

# HLTH140 STUDY GUIDE

## Chapter 3: Stress and Mental Health

1. Stress- the general state of the body, mind, and emotions when an environmental stressor has triggered the stress response  
Stressor- events or agents in the environment that cause stress  
Stress Response (fight-or-flight response)- series of physiological changes that activate body systems, providing a burst of energy to deal with a perceived threat or danger
2. Nervous System- includes the autonomic and somatic parts
  - a. Automatic Nervous System: carries out the stress response; controls involuntary, unconscious functions like breathing, heart rate, and digestion. It has two branches →
    - i. Sympathetic branch- responsible for irritating the stress response (is in control in times of arousal, emergency, or crisis and uses norepinephrine to stimulate responses)
    - ii. Parasympathetic branch- responsible for turning off the stress response and returning the body to normal (is in control when we are relaxed and aids in digestion and growth)
3. Eustress- stress triggered by a pleasant stressor, where stress enhances function  
Distress- stress triggered by an unpleasant stressor; persistent, unresolved stress  
Acute stress- short-term stress, produced by the stress response  
Chronic Stress- long-term, low-level stress in which the stress response continues without resolution
4. General Adaptation Syndrome: Selye's classic model used to describe the physiological changes associated with the stress response (universal/predictable response pattern to all stressors). The three phases →
  - a. Alarm: the body experiences the stress response. During this stage, immune system functioning is suppressed, and the person may be more susceptible to infections and illness
  - b. Resistance: the body works overtime to cope with the added stress and to stay at peak level
  - c. Exhaustion: the body can no longer keep up with the demands of the stressor
5. Mediators of the Stress Response →
  - a. Personality Types: the sum of behavioral, cognitive, and emotional tendencies; effects how people perceive and react to stressors
    - i. Type A- hard driving, competitive, achievement oriented, and quick to anger (hostility)
    - ii. Type B: less driven, more relaxed, easygoing, less readily frustrated
    - iii. Type C: introverted, detail-oriented, cautious and reserved, may have trouble communicating
    - iv. Type D: hold in negative emotions and are not very expressive, experience anger and sadness but fear negative judgment from others
  - b. Traits
    - i. Resilience: ability to bounce back from adversity and redirect energies towards more positive actions
    - ii. Hardiness: effective style of coping with stress, characterized by a tendency to view life events as challenges rather than threats, a commitment to meaningful activities, and a sense of being in control
  - c. Cultural Background: harassment, violence, discrimination
  - d. Past Experience: past experience can influence evaluation of potential stressor
  - e. Thinking Patterns:
  - f. Gender Roles: pressure to fit gender roles dictated by society
6. Health Effects of Stress →
  - a. Immune System: stress decreases immune function
  - b. Cardiovascular System: chronic high blood pressure makes blood vessels more susceptible to atherosclerosis (buildup of plaque in the arteries), stroke, and heart attack
  - c. Gastrointestinal System: evidence suggests stress causes acid reflux, indigestion, stomach pain

- d. Mental Health: stress can contribute to development of psychological problems such as anxiety disorders, depression, post-traumatic stress disorder, eating disorders

#### 7. Common Sources of Stress

- a. Major Life Events- major changes and transitions that force the individual to adjust and adapt such as death of a spouse, divorce, separation, personal injury, being fired from a job. Less stressful events include moving or dealing with a minor violation of the law
- b. Daily Hassles- include arguments, car problems, deadlines, long lines, etc. These can lead to state of chronic, low-level stress if they pile up.
- c. College Stressors- major life transition, academic work, sleep deprivation, relationship concerns, worries about their futures and money
- d. Financial Worries- many people experience financial stress because their income is not equal to their expenditures. Also fear of running short of money, carrying too much debt, unexpected home/car repairs
- e. Job Challenges- job pressure has been found to impact productivity. Also expectations of workers has grown that people will work more, even on vacations. Can lead to burnout (physical, mental, and emotional exhaustion)

8. Time Management techniques for handling stress: Improve planning by asking yourself if you are focusing on things most important to you. Make a daily "to do" list and prioritize the items on it into categories of importance. Then budget enough time, set realistic goals, and consolidate tasks when possible.

9. Relaxation Techniques: deep breathing, progressive relaxation, visualization, yoga, biofeedback

10. Counterproductive Techniques for Coping with Stress: tobacco, alcohol and other drugs, and unhealthy eating

11. From presentation → techniques for improving sleep to reduce stress

- a. Develop healthy exercise, eating, and sleeping habits
- b. 7-9 hrs of sleep: improves mood, fosters feelings of self-worth, enhances mental functioning, supports emotional functioning

12. Positive Psychology- area of interest within the field of psychology that focuses on positive emotions, character strengths, and conditions that create happiness

- Self-actualization- in Maslow's work, the state attained when a person has reached his or her full potential

- Emotional Intelligence- In Goleman's work, the kind of intelligence that includes an understanding of emotional experience, self-awareness, and sensitivity to others. Able to recognize and understand emotions, manage these emotions, motivate themselves, respond to others emotions, and be socially competent

13. Factors Contributing to Mental Disorders:

- a. Complex interactions from biological factors (neurotransmitter levels, genetics)
- b. Psychological processes
- c. Social influences
- d. Cultural factors

14. Common Anxiety Disorders:

- a. Panic Disorder: mental disorder characterized by recurrent, unexpected panic attacks along with concern about having another attack
- b. Specific Phobia: intense fear of an activity, situation, or object, exposure to which evokes immediate anxiety. May originate from bad experience. Ex: flying, heights, spiders
- c. Agoraphobia: anxiety about being in situations where escape may be difficult or embarrassing, or where help might not be available in case of a panic attack
- d. Social Phobia: intense fear of certain kinds of social or performance situations (fear of humiliation and embarrassment *while being observed by others*)
- e. Generalized Anxiety Disorder: excessive, uncontrollable worry about all kinds of things and in many situations. People with this disorder worry about ordinary future threats, when their worries go unresolved they take over, and they have persistent nervousness which often leads to depression

- f. Obsessive-compulsive Disorder: persistent, intrusive thoughts, impulses, or images that cause intense anxiety or distress. Obsessions are persistent, upsetting thoughts while Compulsions are repetitive, difficult to resist rituals.

#### 15. Common Mood Disorders:

- a. Major Depressive Disorder: symptoms include depressed mood, as indicated by feelings of sadness or emptiness or by behaviors such as crying, a loss of interest or pleasure in activities that previously provided pleasure, fatigue, feelings of worthlessness, and a reduced ability to concentrate
- b. Bipolar Disorder: person experiences one or more manic episodes, often but not always alternating with depressive episodes. A manic episode is a distinct period during which that person has an abnormally elevated mood. They may have racing thoughts, accelerated speech and have insomnia.

#### 16. Suicide:

- a. Warning Signs: expressing wish to be dead, increasing social withdrawal/isolation, sudden inexplicable lightening of mood, increase in risk taking behavior, intensified moodiness, previous history attempts, suicide by a family member or friends, readily available means of committing suicide, history of substance abuse or eating disorders, serious medical problems
- b. Steps to take if you recognize them in an individual: it is critical to get the person help, encourage the person to talk, ask direct questions, encourage them to get help by calling a suicide hotline or seeking counseling, contact parent or relative

17. Schizophrenia: A psychotic disorder in which a person has disorganized and disordered thinking and perceptions, bizarre ideas, hallucinations (often voices), and impaired functioning. The symptoms are sometimes so severe that the person becomes socially, interpersonally, and occupationally dysfunctional. Strong genetic component

### Chapter 10: Alcohol and Tobacco

- 1. Alcohol: central nervous system depressant
- 2. Effects on body:
  - a. Brain
    - i. Neurotransmitter function disrupted
    - ii. Impaired coordination, judgment, thinking, slowed reaction time
  - b. Ears, nose, tongue, eyes
    - i. Decreased use of senses
  - c. Heart
    - i. Weakened heart muscle
    - ii. Irregular heartbeat
    - iii. Enlarged heart
    - iv. Elevated blood pressure
    - v. Increased risk of stroke
  - d. Breasts
    - i. Increased risk of cancer
  - e. Liver
    - i. Fatty liver
    - ii. Alcohol hepatitis
    - iii. Cirrhosis
    - iv. Increased risk of liver cancer
  - f. Bones
    - i. Increased risk of osteoporosis and bone loss
  - g. Digestive System
    - i. Risk of mouth, larynx, esophagus, pancreas, colon cancers
    - ii. Stomach inflammation, bleeding
  - h. Reproductive System