PSYC 2301 - Introduction to Psychology
CRN 46358 – Fall Semester (Second Start)
Willie Lee Gay Hall | 1:00 p.m. – 3:00 p.m. | Tuesdays/Thursdays
3-Hour Lecture/ 48 hours per semester/ Term (12 weeks)

Instructor: Dr. Bernadine Duncan

Instructor Contact Information: Email: bernadineduncan@sbcglobal.net
Telephone: (281) 788-3977

Office location: Willie Lee Gay Hall
Office hours: By Appointment Only

Course Description
PSYC 2301 is a survey course of the basic principles underlying human behavior. Emphasis is placed on major areas of study in the field of psychology, such as learning, memory, personality, health and stress, child and adult development, and psychological disorders. This course transfers as three (3) hours of credit to most other colleges and universities.

Prerequisites
PSYC 2301 requires college-level reading and writing skills. Research indicates that you are most likely to succeed if you have already taken and passed ENGL 1301. The minimum requirements for enrollment in PSYC 2301 and PSYC 2314 include placement in college-level reading (or take GUST 0342 as a co-requisite) and placement in college-level writing (or take ENGL 0310/0349 as a co-requisite). If you have enrolled in this course without having satisfied these prerequisites, you are at higher risk of failure or withdrawal than students who have done so, and you should carefully read and consider the repeater policy notice that follows.

Course Goals
The goals of all psychology courses at Houston Community College are as follows:

Upon completion of this course, students will be prepared to
1. Succeed in advanced psychology courses that include related content and are required for an undergraduate major in psychology
2. Succeed in advanced psychology and psychology-related courses that include
related content and are required in non-psychology majors such as nursing and education
3. Understand and evaluate psychological concepts that are covered in this course and are featured in news reports, self-help materials, and as a part of the process of seeking and engaging in psychotherapy

Student Learning Outcomes
The student will be able to:
1. Demonstrate knowledge in multiple (8) areas of psychology including concepts, facts and theoretical perspectives.
2. Define and identify the basic research and evaluation methods used in psychology, including the strengths and weaknesses of each method.
3. Demonstrate knowledge of and identify concepts related to personal development and the development and behavior of others.
4. Apply psychological concepts to the solution of current issues and problems including ethics, coping with stressful events, health and wellness, parenting, learning, memory, and/or evaluation of media presentations.

Learning objectives

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<thead>
<tr>
<th>OBJECTIVES FOR SLO #1: Demonstrate knowledge in multiple (8) areas of psychology including concepts, facts and theoretical perspectives.</th>
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<tbody>
<tr>
<td>CORE DOMAIN 1: THE SCIENCE OF PSYCHOLOGY</td>
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<tr>
<td>1. Major schools of thought in psychology</td>
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<td>CORE DOMAIN 2: BIOLOGY AND BEHAVIOR</td>
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<tr>
<td>1. Components of the neuron</td>
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<td>2. Components of the synapse</td>
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<td>3. Action potential</td>
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<td>4. Major neurotransmitters</td>
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<td>5. Medulla</td>
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<td>6. Cerebellum</td>
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<td>7. Hypothalamus</td>
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<td>8. Limbic system</td>
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<td>9. Components of the cerebrum</td>
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<td>10. Plasticity</td>
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<td>11. Endocrine system</td>
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<tr>
<td>CORE DOMAIN 3: LEARNING</td>
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<tr>
<td>1. Learning</td>
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<tr>
<td>2. Reinforcement</td>
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<td>3. Punishment</td>
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<td>4. Observational learning</td>
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<tr>
<td>CORE DOMAIN 4: MEMORY</td>
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<tr>
<td>1. Characteristics of short-term memory</td>
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<td>2. Characteristics of long-term memory</td>
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<td>CORE DOMAIN 5: HUMAN DEVELOPMENT</td>
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<td>1. Phases of prenatal development</td>
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2. Piaget's stages of cognitive development
3. Erikson's stages of psychosocial development
4. Alzheimer's disease

**CORE DOMAIN 6: STRESS AND HEALTH**
1. General Adaptation Syndrome (GAS)
2. Post-traumatic stress disorder (PTSD)

**CORE DOMAIN 7: PERSONALITY**
1. Personality
2. Conscious, unconscious, preconscious mind
3. Id, ego, and superego
4. Freud's psychosexual stages
5. Big Five personality traits

**CORE DOMAIN 8: ABNORMAL BEHAVIOR AND THERAPIES**
1. Phobias
2. Panic disorder
3. Obsessive-compulsive disorder
4. Dissociative identity disorder
5. Schizophrenia
6. Major subtypes of schizophrenia
7. Major depressive disorder
8. Bipolar disorder
9. Personality disorders

**OBJECTIVES FOR SLO#2:** Define and identify the basic research and evaluation methods used in psychology, including the strengths and weaknesses of each method.

**CORE DOMAIN 1: THE SCIENCE OF PSYCHOLOGY**
1. Scientific method
2. Descriptive methods
3. Representative sample
4. Experimental method

**CORE DOMAIN 2: BIOLOGY AND BEHAVIOR**
1. Methods of studying the brain

**CORE DOMAIN 3: LEARNING**
1. Methods used by Pavlov, Watson, and Skinner

**CORE DOMAIN 4: MEMORY**
1. Recall
2. Recognition

**CORE DOMAIN 6: STRESS AND HEALTH**
1. Social Readjustment Rating Scale (SRRS)

**CORE DOMAIN 7: PERSONALITY**
1. Objective tests (inventories)
2. Projective tests

**CORE DOMAIN 8: ABNORMAL BEHAVIOR AND THERAPIES**
1. Purpose, organization, and content of the *DSM-IV*
<table>
<thead>
<tr>
<th>CORE DOMAIN 1: THE SCIENCE OF PSYCHOLOGY</th>
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<tr>
<td>1. Differences among the major theoretical perspectives in psychology</td>
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<tr>
<th>CORE DOMAIN 2: BIOLOGY AND BEHAVIOR</th>
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<td>1. Processes that occur when a neuron is activated</td>
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<td>2. How neurotransmitters affect behavior</td>
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<td>3. Functions of the frontal lobes</td>
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<td>4. Difference between the central and peripheral nervous systems</td>
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<td>5. Functions of the sympathetic and parasympathetic nervous systems</td>
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<td>6. How the pituitary gland affects behavior</td>
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<td>7. How the adrenal glands affect behavior</td>
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<tr>
<th>CORE DOMAIN 3: LEARNING</th>
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<td>1. How classical conditioning modifies an organism’s responses to stimuli</td>
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<tr>
<td>2. How operant conditioning modifies an organism’s responses to stimuli</td>
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<td>3. Difference between positive and negative reinforcement</td>
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<td>4. Factors that influence the effectiveness of punishment</td>
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<th>CORE DOMAIN 4: MEMORY</th>
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<td>1. Information-processing approach to memory</td>
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<td>2. Reconstructive memory</td>
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<td>3. The function of schemas</td>
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<td>4. Causes of forgetting</td>
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<tr>
<th>CORE DOMAIN 5: HUMAN DEVELOPMENT</th>
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<tr>
<td>1. Effects of teratogens and other negative factors on prenatal development</td>
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<td>2. Relationship between contact comfort and attachment</td>
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<td>3. Differences among the various patterns of attachment</td>
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<td>4. Difference between the social learning and gender schema theory explanations of gender role development</td>
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<tr>
<td>5. Process of cognitive development as Piaget explained it</td>
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<td>6. Proposed causes of Alzheimer's disease</td>
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<th>CORE DOMAIN 6: STRESS AND HEALTH</th>
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<tr>
<td>1. Effects of stress on the immune system</td>
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<td>2. Effects of daily hassles on stress</td>
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<td>3. Factors that influence individual’s capacity for resisting the effects of stress</td>
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<th>CORE DOMAIN 7: PERSONALITY</th>
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<tr>
<td>1. Function of defense mechanisms in Freud's theory</td>
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<td>2. Views of humanistic theorists regarding the personality</td>
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<td>3. Bandura's concept of reciprocal determinism</td>
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<th>CORE DOMAIN 8: ABNORMAL BEHAVIOR AND THERAPIES</th>
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<tr>
<td>1. Criteria for abnormal behavior</td>
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<tr>
<td>2. Possible causes of schizophrenia</td>
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<tr>
<td>3. Symptoms of major depressive disorder.</td>
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<tr>
<td>4. Symptoms of Bipolar disorder</td>
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### OBJECTIVES FOR SLO#4:
Apply psychological concepts to the solution of current issues and problems including ethics, coping with stressful events, health and wellness, parenting, learning, memory, and evaluation of media presentations.

### Core Domain 1: The Science of Psychology
**Students will apply**

1. Ethical standards for psychological research

### Core Domain 2: Biology and Behavior
**Students will apply**

1. Principles of behavior genetics

### Core Domain 3: Learning
**Students will apply**

1. Principles of behavior modification

### Core Domain 4: Memory
**Students will apply**

1. Techniques for improving memory

### Core Domain 5: Human Development
**Students will apply**

1. Effects of the authoritarian, authoritative, and permissive parenting styles on children’s development

### Core Domain 6: Stress and Health
**Students will apply**

1. Difference between problem-focused and emotion-focused coping

### Core Domain 7: Personality
**Students will apply**

1. Views of Abraham Maslow regarding self-actualization

### Core Domain 8: Abnormal Behavior and Therapies
**Students will apply**

Difference between psychologists and psychiatrists

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**Core Curriculum**

*Credit: 3 (3 lecture)*

PSYC 2301 satisfies the social science requirement in the HCCS core curriculum. The HCCS Psychology Discipline Committee has specified that address the goals of the core curriculum as follows:

* **Reading** at the college level means having the ability to analyze and interpret a variety of printed materials, books, and documents. All students in PSYC 2301 are required to read a college-level textbook.

* **Writing** at the college level means having the ability to produce clear, correct, and coherent prose adapted to purpose, occasion, and audience. In addition to knowing correct grammar, spelling, and punctuation, students should also become familiar with the writing process, including how to discover a topic, how to develop and organize it, and how to phrase it effectively for their audience. All instructors in PSYC 2301 include at least one written assignment in their syllabi.

* **Effective speaking** is the ability to communicate orally in clear, coherent, and persuasive language appropriate to purpose, occasion, and audience. Students in PSYC 2301 are required to communicate about course content in formal or
informal ways as determined by the requirements of each instructor's course syllabus.

* **Listening** at the college level means the ability to analyze and interpret various forms of spoken communication. Students in PSYC 2301 are required to listen to presentations and/or discussions of course content in formal or informal ways as determined by the requirements of each instructor's course syllabus.

* **Critical thinking** embraces methods for applying both qualitative and quantitative skills analytically and creatively to subject matter in order to evaluate arguments and to construct alternative strategies. Problem solving is one of the applications of critical thinking used to address an identified task. Students in PSYC 2301 are required to exhibit critical thinking in formal or informal ways as determined by the requirements of each instructor's course syllabus.

* **Computer literacy** at the college level means having the ability to use computer-based technology in communicating, solving problems, and acquiring information. Core-educated students should have an understanding of the limits, problems, and possibilities associated with the use of technology and should have the tools necessary to evaluate and learn new technologies as they become available. Students in PSYC 2301 are required to exhibit computer literacy in formal or informal ways as determined by the requirements of each instructor's course syllabus.
CALENDAR

WEEK ONE – September 28, 2010
Introduction
Chapter 1: Introduction to Psychology

WEEK TWO – October 5, 2010
Chapter 2: The Biology of Behavior

WEEK THREE – October 12, 2010
Self-Analysis Oral Presentations Due
Chapter 5: Learning (Library Assignment)

WEEK FOUR – October 19, 2010
EXAM I
Chapter 6: Memory
Personal Journal One Due
(Library Assignment-Oct. 23rd)

WEEK FIVE – October 26, 2010
Chapter 8: Child Development
Chapter 9: Adolescent and Adult Development

WEEK SIX – November 2, 2010
Chapter 11: Human Sexuality and Gender
Chapter 13: Personality Theory and Assessment

WEEK SEVEN – November 9, 2010
EXAM II
Personal Journal Two Due
(Library Assignment-Nov. 11th)

WEEK EIGHT- November 16, 2010
Chapter 10: Motivation and Emotion
Chapter 14: Psychological Disorders

WEEK NINE – November 23, 2010
Chapter 15: Therapies (Review It table, pp. 530-531)

WEEK TEN- November 30, 2010
EXAM III
Personal Journal Three Due

WEEK ELEVEN – December 7, 2010
Review for final
Research Article Due

WEEK TWELVE – December 14, 2010
DEPARTMENT FINAL EXAM

Instructional Methods
The instructor will prepare lectures, demonstrations, and learning exercises to cover each topic listed on the schedule. The lectures will cover most of the textbook material on which you will be tested. Read the assigned chapters before coming to class. Prepare questions to ask during the lecture. You are encouraged to share examples, to give opinions, and to make comments appropriate and relevant to the class discussion.

The Learning Objectives and Key Terms for each chapter are in the *Student Supplementary Handbook*. They will help you determine which material is most important. You are responsible for the Learning Objective Questions and Key Terms whether or not they are covered in class. The instructor will provide the opportunity to ask questions about the objectives prior to the test date. In addition, tests will be reviewed after they are graded so that you will have the opportunity to ask questions about the material which will reappear on the comprehensive final.

Student Assignments

**Assignment 1: Self-Analysis Presentation (10 points)**

Self-analysis is an important and essential aspect of becoming aware of who you are. In an effort to begin this process, you are required to create a collage, which depicts how you see your current self. You will describe orally to the class what type of person you perceive yourself to be, your strengths, your weaknesses, the most important person in you life and why, and your goals. This presentation should be creative, and PowerPoint equipment will be available. Maximum time of presentation will be ten minutes. The due date is listed on your course outline.

**Assignment 2: Journals (30 points total) (See sample paper in Appendix A)**

Part of the requirements for this course includes keeping a journal relating incidents in your life or the life of someone you know well to the material within your textbook. You will write on one personal situation that relates to a topic you select from the chapters. The journal will be due on the day of each exam. Journals turned in late will lose **three (3)** points per class period. No journals will be accepted after December 2, 2010. The criteria used for grading include the following:

1. Did you select a topic from the chapter and explain the principles clearly? *(2 points)*

2. Were you able to analyze a personal situation in light of the material in the chapter? *(5 points)*
Assignment 3: Research Paper (20 points) (See sample paper in Appendix B)

The research paper must follow these very specific guidelines:

1. You must select a topic that is discussed in your text. Try to choose one that interests you or that relates to your own life. You must inform me of your topic by October 28, 2010.

2. You must consult and utilize at least three outside references. These references must be professional publications (books written by professionals or journals listed in Psychological Abstracts). Popular magazines or books written by non-professionals will NOT be acceptable as references (e.g. you may not use Time, Reader's Digest, or books written by ex-alcoholics or the mothers of mental patients.) Your reference list is due November 8, 2010.

3. Your textbook MUST be referenced in the paper. There are NO exceptions. Papers not referencing the text in the body of the paper will receive a “0.”

4. You must use APA referencing style.

5. The paper should be seven to ten (7-10) pages long. If you turn it in by November 18, 2010; I will return it to you with feedback. You can make corrections and turn it in on the final due date of December 2, 2010. Papers will lose five (5) points per day after this date.

6. Your paper should have the following five sections:
   A. Abstract: An abstract is a brief, comprehensive summary in your own words of the contents of the article; it allows readers to survey the contents of an article quickly. A good abstract is accurate, self-contained, concise, non-evaluative, coherent, and readable. (15% of assignment grade).
   B. Introduction: This section will state why the topic you are writing about is an important one. Define key terms. This part of your paper should only be a couple of paragraphs long, a page at most. (5%)
   C. Main Body: This is where you state what you found in the literature. Discuss the methods and results of the studies about which you read. The paper should also demonstrate evidence of critical thinking. This can be done in the form of analysis, comparisons between references, evaluation or discussions of problems in the research. (General content = 30%; Critical thinking = 20%)
   D. Summary/Conclusion: (5%)
   E. References: List the sources you used in the paper, alphabetically by author, using the APA style of references. There should be at least three
sources included PLUS your textbook. Any source listed here must have been mentioned in the paper itself and all sources mentioned in the paper must be listed here. For more information, consult the Publication Manual of the American Psychological Association (5th Edition) that is in all libraries. (References = 20%, APA style = 5%)

Assessments: Midterm and Final Examinations (20 points each; 40 points total)

The tests will consist of multiple-choice items. Most will be selected from the text, but a few may come from class activities, lectures, and the study guide. The comprehensive Departmental Final Exam will be 100 multiple-choice questions.

Instructional Materials

Textbook:

Student Supplemental Handbook

Available for purchase at HCCS bookstore or for download free of charge at http://groups.google.com/group/hcc-central-psyc-2301

Student Workbook
A workbook that covers the core terms and concepts is available for download free of charge at http://groups.google.com/group/hcc-central-psyc-2301

HCC Policy Statement - ADA
Services to Students with Disabilities
Students who require reasonable accommodations for disabilities are encouraged to report to [insert contact information for disabilities office at your college] to make necessary arrangements. Faculty is only authorized to provide accommodations by the Disability Support Service Office

HCC Policy Statement: Academic Honesty
A student who is academically dishonest is, by definition, not showing that the coursework has been learned, and that student is claiming an advantage not available to other students. The instructor is responsible for measuring each student's individual achievements and also for ensuring that all students compete on a level playing field. Thus, in our system, the instructor has teaching, grading, and enforcement roles. You are expected to be familiar with the University's Policy on Academic Honesty, found in the catalog. What that means is: If you are charged with an offense, pleading ignorance of the rules will not help you. Students are responsible for conducting themselves with honor and integrity in fulfilling course requirements. Penalties and/or disciplinary proceedings may be initiated by College System officials against a student accused of
scholastic dishonesty. “Scholastic dishonesty”: includes, but is not limited to, cheating on a test, plagiarism, and collusion.

**Cheating** on a test includes:

- Copying from another students’ test paper;
- Using materials not authorized by the person giving the test;
- Collaborating with another student during a test without authorization;
- Knowingly using, buying, selling, stealing, transporting, or soliciting in whole or part the contents of a test that has not been administered;
- Bribery another person to obtain a test that is to be administered.

**Plagiarism** means the appropriation of another’s work and the unacknowledged incorporation of that work in one’s own written work offered for credit.

**Collusion** mean the unauthorized collaboration with another person in preparing written work offered for credit. Possible punishments for academic dishonesty may include a grade of 0 or F in the particular assignment, failure in the course, and/or recommendation for probation or dismissal from the College System. (See the Student Handbook)

**HCC Policy Statements**

**Class Attendance** - *It is important that you come to class!* Attending class regularly is the best way to succeed in this class. Research has shown that the single most important factor in student success is attendance. Simply put, going to class greatly increases your ability to succeed. You are expected to attend all lecture and labs regularly. You are responsible for materials covered during your absences. Class attendance is checked daily. Although it is your responsibility to drop a course for nonattendance, the instructor has the authority to drop you for excessive absences.

If you are not attending class, you are not learning the information. As the information that is discussed in class is important for your career, students may be dropped from a course after accumulating absences in excess of 12.5% hours of instruction. The six hours of class time would include any total classes missed or for excessive tardiness or leaving class early.

You may decide NOT to come to class for whatever reason. As an adult making the decision not to attend, you do not have to notify the instructor prior to missing a class. However, if this happens too many times, you may suddenly find that you have “lost” the class.

Poor attendance records tend to correlate with poor grades. If you miss any class, including the first week, you are responsible for all material missed. It is a good idea to find a friend or a buddy in class who would be willing to share class notes or discussion or be able to hand in paper if you unavoidably miss a class.
Class attendance equals class success.

**HCC Course Withdrawal Policy**
If you feel that you cannot complete this course, you will need to withdraw from the course prior to the final date of withdrawal. Before, you withdraw from your course; please take the time to meet with the instructor to discuss why you feel it is necessary to do so. The instructor may be able to provide you with suggestions that would enable you to complete the course. Your success is very important. Beginning in fall 2007, the Texas Legislature passed a law limiting first time entering freshmen to no more than **SIX total course withdrawals throughout** their educational career in obtaining a certificate and/or degree.

To help students avoid having to drop/withdraw from any class, HCC has instituted an Early Alert process by which your professor may “alert” you and HCC counselors that you might fail a class because of excessive absences and/or poor academic performance. It is your responsibility to visit with your professor or a counselor to learn about what, if any, HCC interventions might be available to assist you — online tutoring, child care, financial aid, job placement, etc. — to stay in class and improve your academic performance.

If you plan on withdrawing from your class, you **MUST** contact a HCC counselor or your professor prior to withdrawing (dropping) the class for approval and this must be done **PRIOR** to the withdrawal deadline to receive a “W” on your transcript. **Final withdrawal deadlines vary each semester and/or depending on class length, please visit the online registration calendars, HCC schedule of classes and catalog, any HCC Registration Office, or any HCC counselor to determine class withdrawal deadlines.**

**Remember to allow a 24-hour response time when communicating via email and/or telephone with a professor and/or counselor. Do not submit a request to discuss withdrawal options less than a day before the deadline.** If you do not withdraw before the deadline, you will receive the grade that you are making in the class as your final grade.

**Repeat Course Fee**
The State of Texas encourages students to complete college without having to repeat failed classes. To increase student success, students who repeat the same course more than twice, are required to pay extra tuition. The purpose of this extra tuition fee is to encourage students to pass their courses and to graduate. Effective fall 2006, HCC will charge a higher tuition rate to students registering the third or subsequent time for a course. If you are considering course withdrawal because you are not earning passing grades, confer with your instructor/counselor as early as possible about your study habits, reading and writing homework, test taking skills, attendance, course participation, and opportunities for tutoring or other assistance that might be available.

**Classroom Behavior**
As your instructor and as a student in this class, it is our shared responsibility to develop and maintain a positive learning environment for everyone. Your instructor takes this responsibility very seriously and will inform members of the class if their behavior makes
it difficult for him/her to carry out this task. As a fellow learner, you are asked to respect the learning needs of your classmates and assist your instructor achieve this critical goal.

**Use of Camera and/or Recording Devices**

As a student active in the learning community of this course, it is your responsibility to be respectful of the learning atmosphere in your classroom. To show respect of your fellow students and instructor, you will turn off your phone and other electronic devices, and will not use these devices in the classroom unless you receive permission from the instructor.

Use of recording devices, including camera phones and tape recorders, is prohibited in classrooms, laboratories, faculty offices, and other locations where instruction, tutoring, or testing occurs. Students with disabilities who need to use a recording device as a reasonable accommodation should contact the Office for Students with Disabilities for information regarding reasonable accommodations.

**Instructor Requirements**

As your Instructor, it is my responsibility to:

- Provide the grading scale and detailed grading formula explaining how student grades are to be derived
- Facilitate an effective learning environment through class activities, discussions, and lectures
- Description of any special projects or assignments
- Inform students of policies such as attendance, withdrawal, tardiness and make up
- Provide the course outline and class calendar which will include a description of any special projects or assignments
- Arrange to meet with individual students before and after class as required

To be successful in this class, it is the student’s responsibility to:

- Attend class and participate in class discussions and activities
- Read and comprehend the textbook
- Complete the required assignments and exams:
- Ask for help when there is a question or problem
- Keep copies of all paperwork, including this syllabus, handouts and all assignments

**Program/Discipline Requirements**

The psychology discipline committee has approved the following requirements for all sections of PSYC 2301:

- All students must take the department final exam.
- All instructors must require at least one written assignment.
- All instructors must include assignments, exams, or activities in their syllabi that address all of the HCCS core curriculum standards (see above).
In the 10th Chapter of our text, the author(s) discusses the expressions of emotion in terms of verbal and nonverbal communication. What people say does not always reflect what they are feeling, in fact, peoples' actions usually speak louder than their words. Many times our bodies often send emotional messages that contradict our words. Verbal communication is a personal report of our own emotions. Nonverbal communication is the transmittal of personal information to others through facial expressions, body postures, vocal intonations, and physical distance. The problem presented in the text about verbal communication is the fact that people often are unable or unwilling to report their emotions accurately. Difficulty in nonverbal communication exists, although it may be less that of verbal communication, but can be lessened due to the emotional indicators that convey these messages: facial expressions, body postures, vocal intonations, and physical distance.

I have a close friend that has been involved in a “romantic” relationship for about six months. In fact, another friend of mine and I set up their first date! Anyway, I can remember how excited my friend was about it—her adrenaline was pumping like crazy and her facial expression was full of radiance. She was so excited that she could hardly control herself. Well, she is still involved with the same man to this day, but, I talked to her this morning on the phone and the “newness” of the relationship has worn off.

When I asked her how everything was going and she told me “just fine,” I “heard” a totally different point of view from her. I could tell her feelings weren't coinciding with what she was telling me. I called her back this afternoon and asked her more about how the relationship was going. After breaching through her barrier of reluctance, she proceeded to tell me she actually was unhappy with the progress between them and she wanted to get together for lunch to talk about.

To tie my situation to the material presented in the text, my friend showed an example of both verbal and nonverbal communication on the first date she had with him. She verbally
communicated how thrilled and excited that she was about the date, and she communicated nonverbally her emotions with the expressions on her face and her concern with what to wear, among other things. When I had my conversations with her today, she clearly showed an example of nonverbal communication--even though she was telling me verbally that everything was “OK,” I could tell by the tone of her voice that everything wasn’t “OK.”

In conclusion, I actually believe that examination of nonverbal communication, as compared to verbal communications, is the most accurate method possible to determine another’s emotions about a particular situation. Even though you may be told one thing in all likelihood, the person may be communicating a different message altogether. I feel that a person has a much easier time “bluffing” their emotions verbally than trying to conceal any physical effects that person may have about that situation.
APPENDIX B
RESEARCH PAPER - SAMPLE PAPER

IN SEARCH OF PAIN RELIEF

PSYCHOLOGY 2301

John Smith
December 1, 2010
ABSTRACT

Pain is an enigma that has puzzled experts for centuries. Americans spend billions yearly and try countless approaches in search of pain relief. There are varying theories of what pain actually is. Some believe it is sensory stimulation, while others theorize that it is mostly psychological. Others describe it as a complex phenomenon involving several factors. Some of the approaches to pain relief are medication, acupuncture, hypnosis, and cognitive measures such as biofeedback and relaxation techniques. Whatever method is used, it is relatively certain that human beings will continue to try the old along with the new in their never ending search for pain relief.
IN SEARCH OF PAIN RELIEF

What is pain? It is a human condition shared by almost all members of our society. Pain exists in virtually all tissues of the body except the brain itself (Schwartz, 1978). Experts have been perplexed by the enigma of pain for centuries. Studies show that at least one-third of the population of the United States has some form of persistent or recurring pain (McConnell, 1989). Americans spend billions of dollars and try numerous approaches in search of effective measures for relief of pain.

The body has two mechanisms for pain control. One involves the release of endorphins, the natural pain killers that are produced by the human body. It is believed that the natural pain killers your body produces are sufficient to protect you from most of the everyday aches and pains (McConnell, 1989). The other pain control mechanism involves the blocking of painful inputs at the top of the spinal cord (McConnell, 1989). This is known as the spinal gate theory. These two systems differ in several ways, but both are effective in controlling pain. One system involves the suppressing of emotions and the other involves input blocking.

There are varying theories describing what pain is. According to Richard M. Restak, MD, “Pain is not a stimulus, it is a perception and as such it can be influenced by a variety of psychological factors” (Restak, 1988, p. 139). Other researchers, Robert Rivlin and Karen Gravelle, suggest that....”it becomes clear that perception of pain is as much a cognitive experience as it is a physical one” (Rivlin, Gravelle, 1984, p. 29-30). Patrick Wall, a noted pain expert believes that pain is a “need state like hunger or thirst, not a sensation such as light, warmth or sound” (McConnell, 1989, p. 329). Pain specialists Arnold Holtzman and Dennis Durk take a more holistic approach in their description of pain as “a complex phenomenon that is the product of interaction of (injurious) sensory stimulation, psychological factors....and socioenvironmental factors” (McConnell, 1989, p. 330). Whatever definition of pain is accepted, it definitely involves emotional feelings as well as physical ones (Rivlin, Gravelle, 1984).

Through the ages profound religious experiences have been associated with the blocking out of painful inputs. The power of suggestion or the mind over matter phenomenon is most likely responsible for the ability of Indian fakirs to lie on crushed glass or for religious zealots in Voodoo ceremonies to walk on burning beds of coal. Another example is evident in the Indian Sun Ceremony in which the brave skewered himself through the skin of his chest then tethered himself to a post in the middle of the desert for days (Rivlin & Gravelle, 1984). These examples religious experiences in which man has endured and survived great pain tell us that the concept of mind over matter and the power of suggestion in pain relief is not a new idea. However, throughout the years new concepts have
arrived on the scene which test the mind over matter theory in a variety of ways.

Acupuncture is an ancient form of pain relief developed in China. Although it has been around for many years, only recently has it become the subject of some scientific investigations (Schwartz, 1978). An interesting application of acupuncture was a study to investigate the effects of acupuncture in treating alcoholism. The study showed that of those who received the acupuncture in the correct way (meaning at the standard acupuncture points) nearly half of the participants in the study managed to stay away from alcohol for at least a short period of time (Restak, 1988). The most successful applications of acupuncture, however have been in situations in which chronic pain is a problem. It has even been effective in many cases where no anesthesia was administered and patients underwent painful surgery (Schwartz, 1978).

In 1734 a man by the name of Anton Mesmer was born in Austria. He eventually took degrees in both theology and medicine. He theorized that the mind was strongly affected by magnetic radiation from outer space. He announced that he was able to restore health through magnetic cures (McConnell, 1989). Mesmer induced a trance state in his patients which was actually hypnosis. Mesmer never made any attempt to study this trance condition scientifically. This so called trance state used by Mesmer was the introduction of hypnosis as a way to control pain. Although Freud renounced hypnosis as a “useless therapeutic tool,” (McConnell, 1989, p. 325), a few physicians and psychologists found hypnosis to be an effective tool for use in pain control.

Again, the power of suggestion theory appears since many felt that hypnotism was the result of suggestibility. Well documented cases in which hypnosis is involved in pain control are those in which women undergo both surgery and childbirth while they are hypnotized. In these situations does the hypnosis prevent them from actually feeling the pain? Or, by the power of suggestion, are they prevented from remembering it (Ellerby, 1981. film?) Another example of pain relief through hypnosis is described by Gail Scheiber, a woman who has employed self-hypnosis to control pain from arthritis.

“You're not of any pain when you're in a hypnotic state,” she explains, “because your mind, your attention span is somewhere else. You're ignoring it, you've tuned it out. When you come out of a hypnotic state, your subconscious has accepted your fed-in thoughts, your phrasing, so it naturally carries out the orders that you've given it. It's a matter of tuning in and tuning out your pain” (Restak, 1988, p. 155).

There have been numerous studies comparing hypnosis with other types of pain relief. In 1977, a group of investigators did a comparative study of the relative effectiveness of hypnosis, acupuncture, morphine, diazepam,
aspirin, and placebo. They found that hypnosis provided the greatest relief of laboratory–induced pain (Hilgard, 1987). Other studies conducted by Theodore X. Barber in which he compared the effectiveness of hypnosis to conscious strategies of controlling pain demonstrated that the cognitive strategies were at least as effective as was hypnosis (McConnell, 1989, p. 328). Yet another study comparing hypnosis with biofeedback, social interaction, therapy, placebo, and a non-treatment control group was conducted in 1980. In this case, hypnosis was judged the method of choice (Hilgard, 1987). The results of these studies tell us that the effectiveness of hypnosis in pain control is still a controversial subject.

In searching for relief from pain, many of us instinctively reach for relief in our medicine cabinet. Over-the-counter drugs are a billion dollar business. We believe that perhaps an aspirin or Tylenol will ease our pain. Actually, perhaps even the placebo will help. A placebo is a pill made of sugar or flour. It does no harm, and when prescribed by the physician, the placebo may actually reduce pain and promote healing (McConnell, 1989). The placebo response is not due simply to the power of suggestions. When naloxone (an opiate-antagonizing drug) is administered, the pain relief of the placebo is cancelled. This suggests that the placebos help to activate a person's own pain relief mechanism (Restak, 1988). A study of the placebo effect was conducted at the University of California in San Francisco. Volunteers were asked to rate their pain after a tooth extraction. They were all given placebos. Approximately one-third of the group experienced immediate relief from the placebo. These people were placebo reactors. The other two-thirds experienced little relief. (They were placebo non-actors.) Naloxone was administered to the patients. After receiving the naloxone, the placebo reactors experienced a worsening of the pain, but the non-reactors did not. It was concluded that the placebos caused a release of endorphins in the patients who were placebo reactors. The placebo effect, however, seems to work only in certain people—those who have been conditioned to secrete endorphins. The placebo effect has a time limit on its effectiveness. After ten weeks placebos often are of little use. The same is true of morphine-like drugs (McConnell, 1989).

In recent years more attention has been given to cognitive coping strategies for pain relief. There are numerous types of cognitive strategies including biofeedback, relaxation therapy, mental imagery, self-instruction and self-monitoring. All of these are direct coping strategies in which patients take responsibility. An advantage of cognitive coping strategies is that they can be effective for longer periods of time than some of the other pain relieving methods. A systematic application of behavior techniques to treat chronic pain was developed by W. Fordyce. He identified respondent pain caused by physiological distress and operant pain behaviors such as
moaning, taking medication, being physically inactive and avoiding responsibilities—all of which are learned behaviors and maintained by environmental reinforcement. The main idea was to use praise and attention to reinforce well behaviors and avoid reinforcement expression of pain (Goldstein & Krasner, 1987). These techniques proved to be effective. Later the treatment package was expanded to include feedback and relaxation techniques.

The best answer to pain relief seems to lie in a combination of methods and approaches. The "bottom up" approach is demonstrated in the use of pain killing medication or the releasing of endorphins in the brain. This bottom up approach is most effective with acute pain as it tends to lose its effectiveness in a few weeks (McConnell, 1989). Chronic pain seems to be best treated by the top down approach of cognitive coping strategies. This top down blocking of painful inputs seems to have longer lasting effects. As new approaches to pain relief are developed and tested, it is very likely that our society will be willing to try them along with the older methods in their continuing search for pain relief.
REFERENCES


