The Thalamus

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Psychology Department Welcomes New Faculty Members
By: Teresa McGinley

This year Stonehill College welcomes 6 new full time faculty and eight faculty fellows. Among them, the Psychology Department has received two new professors: Professor Nicole Capezza and Professor David Hurley. Current professors Rose Perkins and Bonnie Klentz invited the new members of the Psychology Department team to speak as part of the 2012 Speaker Series for the Department.

Psychology Society cosponsored this event which took place on Thursday, October 25th.

The new faculty members each provided students with a glimpse into their research pursuits. In her presentation entitled, "Your Partner Called you a "$!#%&"! Coping with Hardships in our Romantic Relationships," Nicole Capezza discussed her past research experience involving romantic relationships and problems due to both psychological and physical abuse.   David Hurley discussed the reasons individuals participate in sports and the characteristics of an effective coach in supporting and helping children achieve these goals. His presentation, " Why did YOU play sports? The psychosocial goals of youth sport and how we can help coaches ensure these goals are met" looked at ways coaches can be trained to support youngsters playing sports for the right reasons.

Students had the opportunity to ask questions after each professor's presentation. There was also a social to conclude the event, allowing students and faculty to mingle on a more casual level.
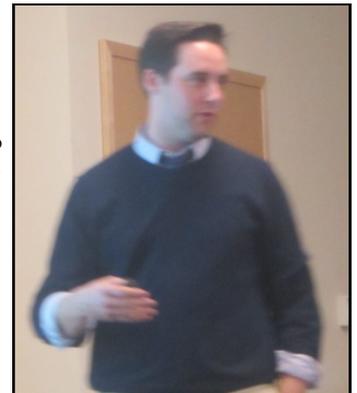
To learn more about our new Psychology Department professors, read their in depth biography pieces continued on page 6!

The Cost of Freedom: The Trajectory of Suicide Rates Among Veterans
By: Laura Dzgoeva

What would you guess is the leading cause of death among American soldiers? Intuitively, you might be inclined to assume combat-related incidents. While this makes plenty of sense, you might be shocked to learn that the leading cause of death amongst soldiers is actually suicide.

Statistics show this year, for every U.S. soldier killed in combat, 25 committed suicide. The Department of Veterans Affairs estimates that 18 veterans take their own lives every day. Even more disturbing, the young-

est group of veterans (ages 17-24), are four times as likely to commit suicide as nonveterans.

Although the exact reason for the rising number of veterans who commit suicide is not fully understood, several contributing factors exist. Post-traumatic stress disorder, though it may be a partial explanation, does not fit everyone. A good number of veterans who take their own lives have not been exposed to combat. Many service members, however, are deployed multiple

times, increasing their risk of suffering what has been called a "moral injury." That is, their morals are thrown for a loop due to the situation around them (perhaps combat). They feel that they have failed in some way, or that their fellow soldiers have failed them. They question themselves and their concepts of right and wrong, become hyper vigilant, and stop trusting others.

Continued on page 5.

How Far Would YOU Go to Reject the Null and Accept the Alternative?
By: Caitlin DeCortin

As budding researchers, college students know that it does not always prove easy to obtain significant results when conducting research. Those who conduct research for a living are certainly no strangers to this obstacle. Sadly, it seems that some researchers, especially in recent years, have resorted to dishonest methodology and publishing false findings, claiming to obtain significant data that supports their hypotheses. Their exact motives aren't clear, but certainly the pressure of gaining tenure and the push to constantly and consistently produce quality, significant research are contributing factors.

Unfortunately, the rates of research fraud continue to rise. Perhaps the most widely known case of psychology fraud is that of former Harvard University professor Marc Hauser, who, in 2011, fabricated and falsified data in six federally funded studies, five of which were published in prominent journals. While he maintained, "I admit that I made mistakes," he did not admit to deliberate misconduct, instead stating that he let too many facets of the research slip away from his control. His offenses included publishing a bar graph of fabricated data, recording false responses from participants, falsely reporting research methods, and manipulating the way he coded his data in order to obtain significant results. For the next three years, any research he conducts using federal funds must be under supervision; he also is prohibited from serving as a peer reviewer.

Marc Hauser

Dirk Smeesters

Dirk Smeesters, formerly a social psychologist at Erasmus University in Rotterdam, Australia, also admitted to "massaging" data in some of his papers. He resigned from his position in June when a researcher from another university, suspicious of Smeesters' statistically perfect results, performed independent analyses on his data.

The widely publicized misdemeanors of these two former professors have certainly damaged the reputation of psychology as a reputable science, at least in the eyes of the public. Furthermore, the question remains: how many other researchers out there are also committing scientific misconduct and simply not getting caught? Unfortunately, no guaranteed way exists to ensure that all researchers in psychology conduct honest research. Peer reviewers' thorough examination and consideration of studies up for publication seems to be the only way to detect those researchers whose methods seem faulty.

5 Ways Supermarkets Get You to Spend More Money

Pre-Cut Vegetables and Fruits
Pre-cut veggies look so attractive, with their colorful packaging and their promise of less work (no need to wash or chop!). However, they aren't exactly a good deal. Consumer Reports found that pre-cut veggies and fruits can be a lot more expensive than the whole items. The team noted that a $1.50 six-ounce bag of shredded carrots costs about five times more than a similar amount of whole carrots.

Items at the Checkout Counter
Ever wonder why all those magazines and yummy candy are crammed in the front at the checkout counters? It's one of the supermarket's tricks to get you to succumb to last-minute purchases while you're waiting in line.

10 For $10
10 for $10 sounds like a great deal. However, you'll get the same savings even if you only buy one item, according to the New York Times. A grocery store survey recently found that people bought way more items when they see 10 for $10 deals vs. five for $5 and one for $1 sales. Even if you aren't buying 10 items, your mind will trick you into thinking that the item is such a great deal that you end up buying more of it.

Growing Carts
No, you're not shrinking; it's the grocery carts that are growing. The larger the cart, the more likely you'll end up spending more, so try to stick to a hand basket instead.

Where Is Everything?
You think you have the layout of your local supermarket down pat when you find out they changed shelves again! Darn it. The stores are actually doing it on purpose, because if you don't know where the items are, you'll end up spending more time in the store. More time to browse means more chances to tempt you into buying more items.

http://www.savvysugar.com/Supermarket-Psychology-Tricks-18344600?slide=5

Psychology in the News
By: Georgia Winters

The Impact of TV on Married Couples

Osborn (2012) examined the effects of television viewing on romantic relationships. Participants included 390 married couples who responded to questions about their viewing frequency and belief in television portrayals of romantic relationships. In addition, participants rated their satisfaction in their relationship, relationship expectations, relationship commitment, and relationship costs. Relationship costs included loss of personal freedom, loss of time, and their lover's unattractive qualities. Results revealed that individuals who believe portrayals of television couples rated their relationship costs higher. These individuals that accept unrealistic portrayals may believe that alternatives to their partner are better. If either or both partners in a relationship believe in the relationships on television, they are less committed to each other which may lead to an inevitable breakup.

Taylor & Francis (2012). *When TV and marriage meet: TV's negative impact on romantic relationships.* Retrieved from http://www.sciencedaily.com/

Depressed Individuals Have Difficulties Distinguishing Between Negative Emotions

Demiralp (2012), from the University of Michigan, examined whether clinically depressed individuals differed in their ability to discriminate between varying emotions compared to healthy individuals. The study involved 106 participants ranging from ages 18 to 40. Half of the participants had a diagnosis of clinical depression and the other half did not. Participants were asked to carry a Palm Pilot around for a week and rate their emotions during 56 prompted times each day. The four-point Likert scales included seven negative emotions (i.e. sadness, anxiety, anger, frustration, ashamed, disgusted, and guilty) and four positive emotions (i.e. happy, excited, alert, active). Researchers suggest that when two or more emotions were reported together, the participant did not differentiate them. Results indicate that clinically depressed people were less able to distinguish between negative emotions compared to healthy individuals. Interestingly, there was no difference between the groups in being able to differentiate between positive emotions. Researchers suggest that this ability to separate positive emotions may be a coping mechanism for depressed individuals.

Association for Psychological Science (2012). *Feeling guilty versus feeling angry: Who can tell the difference?.* Retrieved from http://www.sciencedaily.com/releases/2012/09/120924175209.htm

Brain's Response to Unpleasant Sounds

Researchers from Newcastle University explored the perceptions of unpleasant sounds to the actual brain activity occurring. Participants were 13 individuals who rated the pleasantness of 74 sounds while attached to a Functional Magnetic Resonance Imaging (fMRI) machine. Results suggest that the amygdala, which assists in processing negative emotions, modulates the auditory cortex, which processes sounds. The level of interaction of these brain activities were in direct relationship to the perceived ratings of subjects. The most unpleasant sounds include: knife on a bottle, chalk on a blackboard, female scream, baby crying, and electric drill. The most pleasant sounds were applause, baby laughing, thunder, and water flowing.

Newcastle University (2012). The *worst noises in the world: Why we recoil at unpleasant sounds.* Retrieved from http://www.sciencedaily.com/releases/2012/10/121012112424.htm
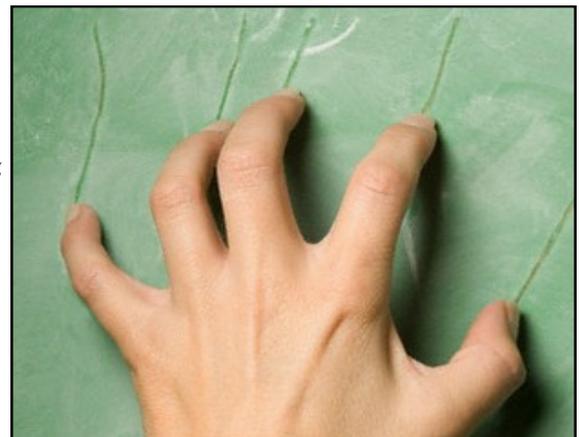
Pathway to Recovery
By: Elena McGinley

Over 24 million US residents 12 years or older presently suffer from drug addiction. However, only 10 percent of these individuals will receive help from a professional treatment facility. Many people do not know enough information about rehabilitation to seek help. Therefore, when helping a friend or family member who has an addiction, we want to ensure they will be in a rehabilitation center that will do everything possible to help them overcome addiction. Most often, numerous searches must be completed in order to compare different facilities and determine which is most likely to produce the best results. Unfortunately, in most cases, people are unable to detect which qualities make a program successful. There are four main aspects one needs to take into consideration:

1) You want to make sure the staff efficiently communicates, hold the essential qualifications, and has your best interest in mind. Staff should be able to thoroughly answer any questions you have. You should make sure you are satisfied with the answers they provide. If not, it is best to find a different facility.

2) You need to look at the rate of success. Most likely you will not find a place that has 100% success. It is important to look at the number of those who relapsed and look for statistics that appear positive, yet still realistic. You may also want to look for locations with relapse prevention programs.

3) The patient accommodations are also important. You want to make sure the patient's room is both comfortable and clean. You need to find a place that they would be able to live in for the duration their treatment. Also, make sure that it is in your price range. Price will depend on if it's a private or state funded facility. Find out if your insurance is accepted there.

4) Finally, the most important piece of the puzzle is their discharge program. You need to make sure they are going to help you succeed in your recovery process so you do not relapse. Look at their method and determine if it would be right for you.

After you find a center for your loved one, you should persuade them to commit. People living with addiction may ask why they should go and what will they receive from treatment. It proves helpful to have researched beforehand so you will be able to have answers for them. When trying to convince someone to go to rehab, you need to be educated about what the process is like. You can almost guarantee the person that upon completion of rehab, he/she will have improved decision making skills and better reactions to "triggers" (i.e., things in an addict's life that would urge them to start using again.) He/she will also have a healthier lifestyle and a better support system with trusted people they can lean on.

Abuse of heroin, cocaine, tobacco, alcohol, and prescription drugs leads to over 556,500 deaths in the U.S. every year. Drug addiction is not something to be taken lightly. If you are aware someone has a drug addiction, you need to get the person help. Some common signs that can help identify if someone is suffering from addiction are:

◊ Isolation from friends and family who don't abuse drugs
◊ New founded interests
◊ Spending time with new friends who use drugs
◊ Poor work or school performance
◊ Becoming argumentative, and getting in trouble with the authorities

Help the addicted person realize that no matter how much they have lost to their addiction that there is a light at the end of the tunnel if he/she goes to a drug rehabilitation center.

Pop Culture True or False

Answers on back page.
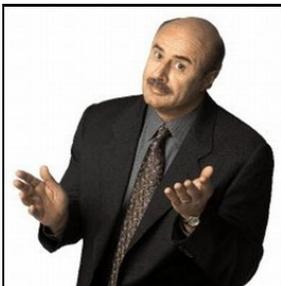
1. Dr. Phil is a certified psychologist.
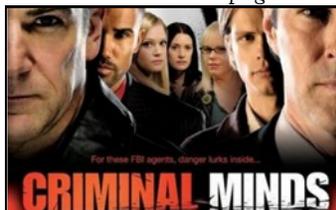
2. The FBI has a profiling unit that Criminal Minds is based on.
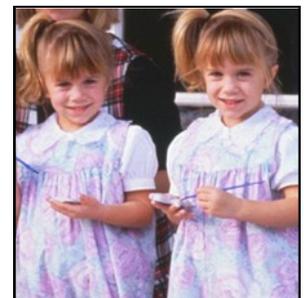
3. Mary Kate and Ashley are identical twins.

Child Life Specialist
By: Teresa McGinley

Child life specialists prove to be necessity in the medical field due to the psychologically and physiologically taxing hospitalizations experienced by pediatric patients. Although each specialist focuses mainly on the child, additional attention must be given to the family members and the methods they use to handle the disease diagnosis and related procedures. These specialists assess children's psychological and physiological functioning before, during and after hospitalizations. Child life specialists take into account, certain major factors in order to effectively evaluate the overall functioning of each patient.
-Child's temperament
-Child's coping style.
-Parental anxiety
-Number of invasive medical procedures

A **child's temperament** refers to his/her pattern of behaviors or reactions including mood, activity level, responsiveness, distractibility and attention span. Studies have shown that children who responded most optimally to hospitalization displayed a more positive mood, were easier to distract and were less reactive to stimuli (Carson, et al. 1991).

Distinctions made between the types of **coping style** used by children to handle hospitalization, avoidant or vigilant, appear to predict the type of psychological outcomes experienced. Avoidant coping occurs when children deny fears, restrict their thinking and disconnect themselves from a stressful stimulus, in this case their medical procedure. Vigilant patients seek out information and acknowledge the stressful stimulus. LaMontagne, Hepworth, Johnson & Cohen (1996) discovered that children using a vigilant coping style returned to normal activity during the course of their recovery while avoidant patients experienced higher levels of distress and a less favorable outcome, not returning as quickly to their normal lives.

The anxiety experienced by parents often has an effect on the child's reaction to hospitalization. Through use of questionnaires, Wray, Lee, Dearmun and Franck (2011) assessed the anxiety and stress in parents of children admitted to the hospital. The results showed parents had borderline or clinical levels of depression. Parent stress scores were highest for stress related to the behavior and appearance of their child and higher anxiety scores were associated with a greater number of previous hospital visits. This anxiety directly impacts the functioning of children in the hospital setting and serves to increase their experienced anxiety.

Finally, the **number of invasive medical procedures** experienced has been shown to have a clear effect on children's psychological response to these situations. Past research by Thomson (1972) revealed that children exposed to previous hospitalization may be more upset, anxious or vulnerable before medical or surgical procedures.

Addressing the issues faced by children and their families falls into the essential function and responsibilities of a child life specialist. The specialists aim to not merely reduce the negative effects found throughout pediatric patient cases, but to promote the patients' long term coping and adjustment to future health care challenges. Certain methods utilized by child life specialists successfully reduce psychological and physiological stress in hospitalized children.

These include:
-therapeutic play
-preparation programs

Therapeutic play refers to specialized activities that not only support development, but also facilitate the emotional well-being of a pediatric patient. This play aims to promote normal development while allowing children to respond to difficult medical experiences effectively. Thus, therapeutic play addresses developmental milestones specifically, and provides a mechanism for understanding critical events, such as hospitalization. These activities may take a number of different forms: puppet shows, creative arts, doll play, or re-enactments of medical situations. Researchers have concluded that children who engaged in therapeutic play displayed significantly lower hospital fears than those in the other groups. (Rae, et al. 1989)

A **preparation program**, a second method utilized with children during medical procedures, proves vital to calming the nerves and determining the level of cooperation of pediatric patients throughout their hospital stay. In an overwhelming finding, the Child Life Council Evidence review found that 29 out of the 30 examined studies concluded that children who were prepared for surgery experienced fewer negative symptoms than did children in control groups who received no preparation (Koller 2007).

Child life specialists carefully consider all of the factors at work in a child's life and utilize these specific methods to effectively support and comfort their pediatric patients. Research evidence clearly supports the methodologies of child life specialists and their instrumental role in the care of young patients.

The Cost of Freedom
Continued from front page.

Of course, one of the big factors to consider is problems with reintegration. Veterans often feel isolated and experience despair, anxiety, and depression upon their release from the military. Returning to society and reintegrating successfully can often be a real challenge, as the veterans have spent a long time in an environment that is completely different from civilian life. They have also bonded with their fellow service members and feel kinship with them because of their shared experiences. They feel misunderstood by the civilian population, and thus feel lonely. They also don't have anybody around them that they feel they can trust. They are on constant alert against threats, because they have just left an environment, in most cases, of extreme stress and danger. Unfortunately, the VA system is often overburdened and underfunded, and cannot deal with all emergency cases. The wait time for veterans who *do* seek out help (and not many do) is often long.

There is, however, a bright side. As the stigma associated with mental distress has lessened, more veterans are seeking help. This is coupled with the military and VA system's attempts to encourage soldiers to get the help that they need. The Department of Veterans Affairs has, in fact, recently announced its plans to hire 1,600 additional psychologists, psychiatrists, and clinicians to help address veterans' issues. Plans to conduct more research on mental health risk and resilience among military personnel will undoubtedly prove helpful, as well.

The cost of freedom are the lives and wellbeing of our military service members, and that is too high a price to pay. However, the situation is changing as the military actively tries to change the perception of stigma around requiring help for mental distress and researching resilience.

Professor David Hurley

By: Jessica Pappagianopoulos

The 800 new freshmen do not constitute the only addition to Stonehill College during this 2012-2013 academic year. Stonehill also proudly welcomes two new faculty members to the Psychology department, one of them being Professor David Hurley. Hurley received his education in Psychology at Bates College, a small college in Maine that possesses many similarities to Stonehill. He began his collegiate experience as an English major, but his interest quickly shifted to Psychology after taking a General Psychology course during his freshman year. He enjoyed the aspect of working alongside others while understanding why people do what they do.

From Bates, Hurley moved on to continue his education at Boston University, where he became inspired by some of his extraordinary peers and professors. There he received the Glenn Fellowship, a merit-based award given to those who wish to enter the field of academia. This prize allowed him to finance his way through graduate school.

Despite being introduced to a wide range of subjects within the field of psychology, the concentration that intrigued Hurley, being a track athlete, was Sports Psychology. He has worked with a wide variety of athletes and coaches, including high school athletes and collegiate athletes at Boston University, MIT, and Wheelock, improving their performance, goal-setting skills, and imagery strategies before playing in a game. He also has worked with youth sports teams and their coaches to implement tactics for the players to work together collaboratively as a team, as well as to learn how to gain the most fulfillment and happiness out of their sport as possible.

Upon deciding to pursue a career in academia, Hurley narrowed his choices of where to teach to a small, cohesive school, similar to where he had studied. His favorite aspect of Bates College was the close-knit community and how easily accessible the professors were. He first taught at Mt. Ida in Newton, which opened his eyes to the new opportunities awaiting him. He had always heard positive feedback regarding Stonehill from friends who were alumni and, being attracted to this small liberal arts school, he applied as soon as his eyes landed upon a job listing for a psychology professor.

So far, between his classes and the people he has met, Professor Hurley is enjoying his time at Stonehill. He is also pleased to have an office inside the Shield's Science Center, which he considers to be one of the best buildings on campus! He is currently teaching General Psychology, but in the spring he will be teaching only one section of General Psychology as he will be introducing a new class, Sports Psychology. In this class, he will be educating students on the theory of this psychological subfield, its practical applications, and how it differs from all other subfields of psychology.

Professor Nicole Capezza

By: Sarah Hill

Professor Nicole Capezza, Ph.D. is one of the newest additions to the Psychology Department at Stonehill. This fall, she taught sections of General Psychology and Theories of Personality. In the spring, she will be teaching General Psychology and Theories of Personality again, but she will also be adding courses in Psychological Science: Gender and Relationships as well as Psychology of Women.

Prior to coming here to Stonehill, Capezza spent most of her time furthering her education. She received her B.A. in Psychology from Clark University and her Master's Degree and Ph.D. in Social Psychology from Purdue University. While earning her degrees at Purdue, she also taught psychology courses at the university. In addition to schooling, she has spent quite a bit of her time doing research-based work. Before entering graduate school, Capezza spent one year doing research on substance abuse. She has also done further research dealing with trauma. Specifically, her research dealt with how people perceive, understand, and cope with trauma and hardships including intimate partner violence, substance abuse, stereotyping, and discrimination. In addition, her dissertation dealt with understanding victim blaming as well as the role of personal and system threat.

Capezza explained that although she enjoyed her research, she has missed being able to teach students and likes having the opportunity to get students involved in the research as well. She says that her favorite course to teach is Psychology of Women because it is most related to what she has worked on and researched in the past. She finds the topics of gender, gender stereotypes, and relationships to be very interesting, and she enjoys having the opportunity to not only conduct her research in this area of psychology, but to also teach these subjects as well. Capezza explained that her favorite part about being at Stonehill so far has been the friendly and welcoming environment that she has experienced here. We are certainly excited to have a new addition to our department and look forward to seeing what different experiences and insight she will be sharing with psychology students here at Stonehill.

Children on Antidepressants
By: Elise Chappell

Although one of the most common ways to treat depression is by prescribing antidepressants, there are many controversies surrounding whether or not children should be taking these medications. Some researchers believe that antidepressants are the most effective way to treat depression in children, while others argue that there are too many risks associated with them. Other researchers are concerned that as a society we are over-medicating children and depending too much on antidepressants in order to control depression rather than other forms of therapy.

Antidepressants are required to have warnings on them about the possible link to suicidal behavior. Part of the issue with children taking antidepressants is that children's bodies do not function the way adults' do and cannot simply absorb medications in the same ways. Their brains are not fully functioning, so some psychologists feel that this could be a potential factor when it comes to prescribing antidepressants to children.

The Committee on Safety of Medicines conducted a study and discovered results that made them advise against the use of paroxetine, a common SSRI (selective serotonin reuptake inhibitor) used for depressed children. It's been said that the health risks outweigh the supposed benefits, and that the adverse effects of these medications are mostly downplayed in studies. A similar study showed children who used paroxetine showed a 4 percent chance of having suicidal thoughts compared to a 2 percent chance of having suicidal thoughts when taking the placebo pill. The difference in the groups was not statistically significant, yet it remained intriguing for many psychologists.

Other researchers discuss how drugs definitely do more good than harm for depressed kids. According to staff at the Mayo Clinic, although antidepressants can be linked to suicidal behaviors, it does not mean it will necessarily happen. They also state that many researchers believe that antidepressants are the best approach to treating depression, and without taking them a child may become worse rather than being able to live a normal, healthy and fulfilling life. These researchers say that parents have to weigh the pros and cons and make a personal decision on whether or not their children should take antidepressants in an effort to combat depression. Psychotherapy is an alternative way to treat depression, and, based on an evaluation of the child, may be more appropriate in treating depression.

Silly Psychology Searches

The first three words you see describe you.

The first 3 words you see are what you want in life.

THE FIRST 3 WORDS YOU SEE ARE WHAT YOU WANT IN LIFE:

http://urlybits.com/

Research Methods Poster Presentation– Spring 2012
A sample of the student research presentations at the poster conference this past spring.
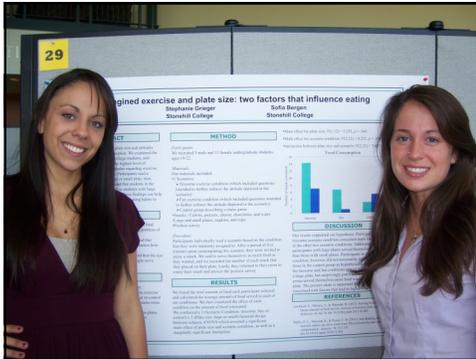
Imagined Exercise and Plate Size:
### Two Factors that Influence Food Consumption
Sofia E. Bergen and Stephanie S. Grieger

Our study explored the effects of plate size and attitudes regarding exercise on food consumption. We examined the amount of food consumed by 18 college students, and observed which condition led to the highest level of consumption. We manipulated attitudes regarding exercise through the use of three scenarios: a tiresome exercise condition, a fun condition, and a control condition. Participants read a scenario and received either a large or small plate, then served themselves a snack. As predicted, we found that students in the tiresome exercise condition as well as students with large plates tended to consume more food. These findings can help demonstrate various factors that influence eating habits in individuals.

The Effect of Detailed Daydreams on Memory Recall
#### by Ashley Paton, Laura Simoncini, and Laura Dzgoeva

This study examined the effect of daydreaming on memory recall. Specifically, it tested the hypothesis that the higher the level of detail in daydreams, the worse participants would recall previously memorized words. We also predicted that there would be no difference between simple and detailed conditions when the word memorization task was not followed by daydreaming. Participants memorized words, daydreamed, memorized another list of words, performed a filler task, and then recalled the words. Nineteen students from Stonehill College participated in the study. We did not find statistically significant support for our hypothesis, although our data went in the correct direction.
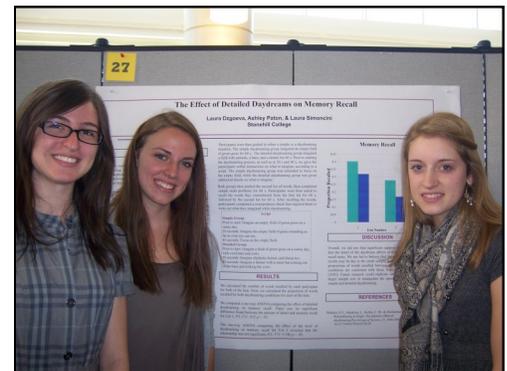
Speech-to-Song Illusion
by Scott Waller and Hadi El Rabbat

We explored the speech-to-song illusion by testing our hypothesis that non-musically trained participants would take longer than musically trained participants to hear the illusion. We tested our hypothesis by having each participant rate ten repetitions of a spoken phrase. As predicted, the non-musically trained participants took longer on average to hear the illusion than the musically trained participants.
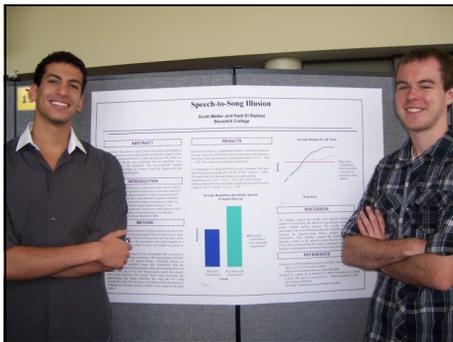
Good Luck!
### The Effect of Superstition Activation on Putting Task Performance
by Samantha R. Harding and Bryana E. Killion

The current study examined the relationship between superstition and performance on a motor task. Recent evidence suggests that positive superstitions improve performance on subsequent tasks. To expand upon this finding, we tested the hypothesis that college students would perform better on a putting task when exposed to a positive superstition and worse when exposed to a negative superstition. We compared the performance of 7 participants exposed to a positive superstition to the performance of 7 participants exposed to a negative superstition, and 7 participants who were not exposed to a superstition. Although we found no significant differences between conditions, we found that the data trended in the predicted direction, indicating that positive superstitions improve performance. Alternative explanations for these findings are discussed.
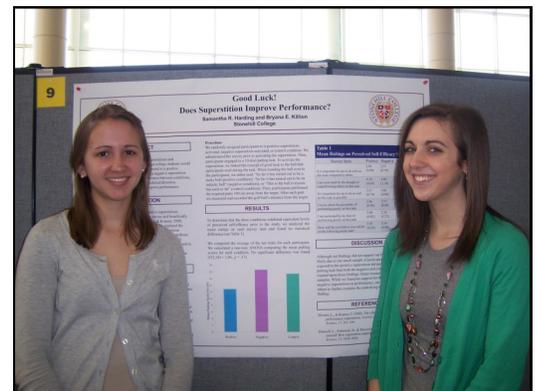
Research Methods Poster Presentation– Spring 2012, cont.
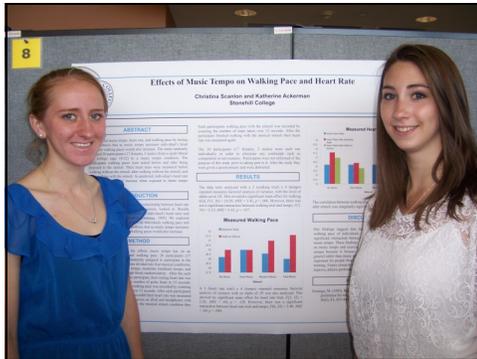
Effects of Music Tempo on Walking Pace and Heart Rate
by Christina Scanlon and Katherine Ackerman

We explored music tempo, heart rate, and walking pace by testing the hypothesis that as music tempo increases individual's heart rates and walking paces would also increase. The study randomly assigned 20 participants (17 females, 3 males) from a small liberal arts college (age 18-22) to a music tempo condition. The participants walking paces were tested before and after being exposed to the stimuli. Their heart rates were measured before walking without the stimuli, after walking without the stimuli, and after walking with the stimuli. As predicted, individual's heart rate and walking pace did increase when exposed to faster tempo music.

The Effect of Power Posing on Self-Esteem
by Nicole M. Farrar and Katherine M. Strout

We explored the effect of power posing on self-esteem. We hypothesized that high power poses would cause higher self-esteem than low power poses. To test this, we had participants complete either high or low power poses and then complete the Heatherton & Polivy State Self-Esteem Scale (1991) to measure overall self-esteem as well as performance self-esteem, social self-esteem, and appearance self-esteem. The results showed no significant difference between the two groups for any of the dependent variables measured. This may have been because most participants began with high self-esteem. Future research in this area could create a pretest-posttest experimental design and focus on individuals who begin with low self-esteem.
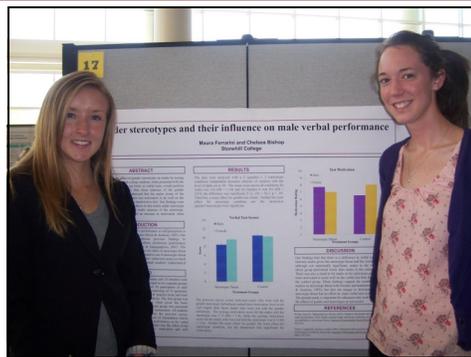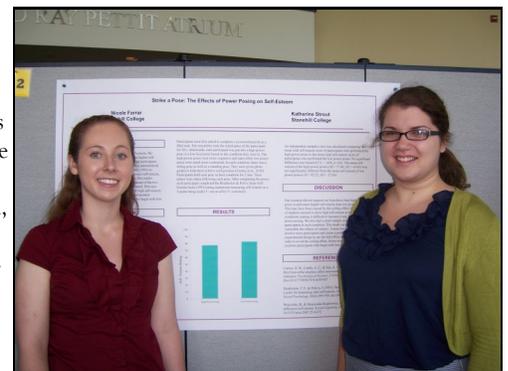

Gender Stereotypes and their Influence on Male Verbal Performance
by Maura Ferrarini and Chelsea Bishop

We explored the effect of gender stereotypes on males by testing the hypothesis that male college students, when presented with the stereotype that females are better at verbal tests, would perform worse on a verbal test, than those unaware of the gender stereotype. We also hypothesized that the males aware of the gender stereotype would have less motivation to do well on the test if they thought they were hardwired to fail. Our findings were consistent with our first hypothesis in that males under stereotype threat performed worse than males unaware of the stereotype. However, our results showed an increase in motivation when given the stereotype.

Comparing Printed and Electronic Text:
Differences in Note Taking, But Not Comprehension
By Colleen Beatson and Taylor Wilson

In this study we explored the differences between e-readers and paper text. We hypothesized that participants reading off of paper would read faster, recall more information, take better notes, and perceive the text as easier to read than those reading on e-readers. Participants read the first chapter of the short story "Bernice Bobs Her Hair" by F. Scott Fitzgerald. The participants took notes on the text and completed a 10-item quiz to test their comprehension. We gave them a semantic differential scale to rate their ease of reading. While there was no difference between the comprehension scores of the two groups, those in the e-reader condition took significantly more notes. There were no significant differences in time or ease of reading.
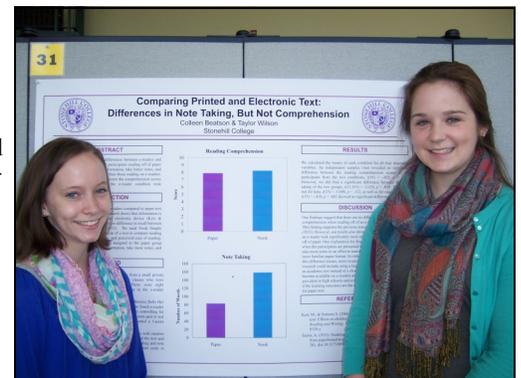
Lucid Dreaming: Not Just in the Movies
By: Genelle Goodhue

In 2010, the popular movie *Inception* revived the human fascination with dreams. While our slumbers most likely are not devices for con-artists, to many they are a source for divination, psychological insight, memory consolidation, or, according to one study, a story made in an attempt to make sense of random neuronal firing (Hobson, et al., 1997).

The astounding fact remains that scientists don't know why dreams exist. Regardless, these interesting phenomena can actually be con-trolled by the person experiencing them. While some individuals prove more adept at this skill, almost anyone can train him or herself to con-trol dreams with time.

When one has the ability to control his or her dreams, only the imagination limits the experience. One can defy physics and experi-ence the world in ways not normally possible; whether it's by flying between mountains, swimming into the crushing depths of the ocean, or simply escaping your normal night of terror, lucid dreaming pro-vides its own world of benefits. The options are limitless and the effort is fairly minimal.

One common method of controlling dreams includes performing "reality checks." A few times a day check your surroundings and truly analyze them. Ask yourself questions. Are people behaving normally? Does the library, classroom, house, etc. really look like that? Over time, the feelings of the dreams will change. They perhaps might become more vivid and reach full lucid dream potential. Eventually, you will be able to recognize when illogical events occur and recognize that you are in a dream.

Another method consists of drawing a dot on your hand. Going about your daily life, you will see this dot drawn on your hand; see it, acknowledge it, and perform a reality check. As you go about your dream life, you will eventually notice that the dot is no longer there, thus allowing you to start controlling your dream world.

After leaping over the hurdle of finally being able to realize you are in a dream, the next difficulty comes in maintaining the lucid state. Often, when newcomers realize they are lucid dreaming, they will usu-ally do one of these two things: forget that they are dreaming and con-tinue their normal dream sequence or become overly excited and wake up.

In order to stay in the lucid dream, the best method that I have come across has been to create a stimulus that allows you to stay con-sciously in your dream world. For example, once you have realized that you are in a dream state, you could rub your arm in your dream. Creat-ing a "physical" stimulus can keep your mind in the artificial world.

THE DREAM IS REAL.

LEONARDO DiCAPRIO
WATANABE GORDON-LEVITT COTILLARD PAGE HARDY MURPHY BERENGER AND CAINE
FROM THE DIRECTOR OF **THE DARK KNIGHT**
INCEPTION

Rub your hands through the grass or touch the bark of a tree, whatever best suits you. One method that does not work effectively is the method of staring at an object. If you stare at an object you will forget why you are staring at it and return to your normal dream sequence. It is surpris-ingly challenging to maintain the desired state of mind.

So, you're able to create and maintain a lucid dream...now what? One interesting thing you can do is look at your hands. Many people find that their hands have additional fingers in their dreams. Also, if one looks into a mirror, he or she will most likely not see a realistic representation of themselves but a bizarre distortion.

Amazingly, lucid dreaming provides you with experiences that your normal physical waking life deprives you of. It allows you to tap into your psyche and perhaps discover some incredibly interesting things about yourself and your perceptions.

Celebrity Disorders

Herschel Walker

Dissociative Identity Disorder

Macaulay Culkin

Agoraphobia: fear of social settings

Elton John

Substance Abuse and Bulimia

Coffee: The Caffeine or the Routine?

By: Alison Patev

Recently I have fallen into a habit that I told myself I would never get into, and successfully avoided for a number of years: drinking coffee daily. I didn't want to have to rely on something so heavily, and definitely did not want to spend the amount of money I have spent at Dunkin' Donuts.

However, for me, my addiction to coffee is not blatantly physiological. I do not get a rush from or feel euphoric after the coffee, and it rarely helps me feel awake. Yet morning after morning, day after day, I make my way to Dunkin's and order an iced coffee.

So what is it about coffee that has got us hooked? Is it completely the caffeine or is it something more? It has been shown that caffeine addiction undoubtedly plays some part in it, but for those of us that don't get a noticeable coffee rush or wake-up, there has got to be more to it.

A recent study at the University of Bristol shows that habitual caffeine users do not feel more alert after caffeine ingestion than non-users feel without caffeine. During the study, a group of caffeine drinkers were given a placebo. They complained of headaches, tiredness, and decreased alertness, all associated with caffeine withdrawal.

When given caffeine, they claimed to feel more awake. However, overall they did not report a greater level of alertness than non-habitual caffeine users who received a placebo. This study proposes that regular coffee drinking does not serve to wake up java addicts, but just serves to keep withdrawal symptoms at bay.

This begs the question: is it the caffeine or the routine?

Other research suggests that coffee addiction may be less about caffeine and more about the routine. Maybe you had a coffee at the start of the morning for a few days in a row. After those few days, coffee is part of your morning routine (thanks to the initial caffeine high). Change the routine and you feel irritated, upset, or not as alert.

Part of this, yes, is the caffeine withdrawal. But there's more to it. As humans, we are creatures of habit, with set routines throughout our days. Routines bring us structure and comfort. After a while, we become so accustomed to our routines that breaking them causes chaos.

So I go get my coffee every morning so my long days are not ruined before they begin. But what is the science behind this routine?

It is simple operant conditioning and classical conditioning.

When you drink coffee initially, dopamine receptors are activated in your brain. Dopamine, a neurotransmitter, is part of the reinforcement pathways; therefore, those first few times you drink coffee in the morning, you are being reinforced for your behavior. Early mornings plus coffee have equaled happiness. You associate the coffee with feeling good in the morning, and as a result have to keep drinking coffee to feel good day after day.

A morning cup o' joe is also a social phenomenon. How often do you hear your peers or professors say, "I haven't woken up yet…I didn't get my coffee this morning?"

This generation has grown up seeing most adults we know drinking coffee in the morning. In many television shows and movies, main characters are shown needing coffee before they go to work. It is drilled into us from a young age that adults need coffee to function.

Therefore, as we move through college and into the "real world," we start to drink coffee. Think about it: did you like coffee when you were 13 or 14? Chances are you developed your love for coffee later in high school, or possibly not until college. Society has dictated that in order to be adults, coffee is a necessity in one's daily routine.

It turns out that a coffee habit might not be as simple as caffeine addiction! Coffee drinking, once part of a routine that is influenced by society, is an incredibly hard habit to kick.

So is it the caffeine or the routine? That's for you to decide. As for me, I'm off to get my coffee.

Catherine Zeta Jones

Bipolar Disorder II

Cameron Diaz

OCD: Obsession over dirty doorknobs

Brooke Shields

Postpartum depression

Rampage Shootings: Misconceptions and Motivations
By: Kayla Pirri

From Virginia Tech to the Colorado movie theater, rampage shootings have become prominent events portrayed in both news and popular culture. Although these tragedies are becoming progressively more commonplace in today's world, the reason for these brutal attacks remains unknown and debated among both intellectuals and the general population. It becomes increasingly difficult to profile these shooters, as they come from a variety of familial and educational backgrounds. Nonetheless, scientists and psychologists alike have been continuing to research the causes behind these shootings, and have formed theories on what may drive these individuals to shoot.

The most common theory concerning rampage shootings attempts to explain the shooter's motivation with respect to the individual's relation to his/her peers. This hypothesis points out the misconception held by society in which they believe shooters to be "loners," or individuals who lack the desire to socialize and prefer to be alone. Conversely, this theory asserts that these shooters are most commonly males who have repeatedly tried and failed to fit in with their peers and actually desire social acceptance from their peers. This hypothesis also refutes popular belief in that most believe these individuals to be acting out in anger. However, shooters seldom act out in anger and rarely hesitate to think about who will be hurt as a result of their outburst. Rather, these individuals believe that by engaging in this violent behavior, they will change their "loser" persona to one of a strong, cool "anti-hero." They hope that others might see them as someone who stands up for himself and is not afraid of anyone or anything, rather than simply someone who is causing mass-hysteria and pain.

Additionally, research has supported the idea that feelings of inadequacy and tension that are associated with not fitting in have recently been amplified due to increased use of the internet, specifically social media sites like Facebook and Twitter. Not only do these websites make it easier for teasing and bullying, but they also encourage young people to compare themselves to others and become aware of social events that they may or may not be included in. For these reasons, intellectuals correlate the upsurge of internet usage with the increasing number of rampage shootings that have occurred within the last few years.

Another theory concerning why individuals engage in rampage shootings states that shooters desire to get revenge against a person or group of people and go "out with a bang." These individuals are usually those who intend to make a statement, and seek to draw negative attention towards an undesired individual or group. For example, it was reported that the Virginia Tech shooter left a suicide note elaborating on how he wished to seek vengeance on the rich and capitalism, and that he sought to end his life in the most dramatic way possible. This incident represents just one example of rampage shootings driven by the need for retribution and attention.

In the case of the Virginia Tech shootings, the desire for revenge was also paired with schizophrenic tendencies, highlighted by the evidence in the suicide note that the shooter believed himself to be God. Psychologists confirm that many shooters who go on rampages also do so because of a psychotic disorder. For example, schizophrenia, which is associated with symptoms such as imagined threats, delusions, living in an alternate reality, and the need to correct perceived wrongs. Psychologists do not discredit the fact that psychological disorders can and do play a part in instigating many of these outbursts.

It is worth mentioning that other, less accepted and scientifically supported theories concerning the motivation for rampage shootings do exist. Some psychologists do blame the current influx of rampage shootings on factors such as violent media, specifically violent video games and movies. Violence and drug problems in the family of the perpetrator are also thought to be correlated with shootings as well. It must be noted that these theories are all correlational in nature, and one cannot deem one factor responsible for causing a perpetrator to shoot. In fact, many intellectuals claim that a combination of factors, rather than just one, often culminate in a shooting.

With stories of rampage shootings infiltrating today's media, it is essential for society to be educated on warning signs and symptoms that may precede a rampage shooting. Most hope that this might also help to ensure that anyone who witnesses warning signs or suspicious behavior will come forward to authorities to prevent future incidents. Until then, the true cause of these shootings can only be hypothesized and researched.
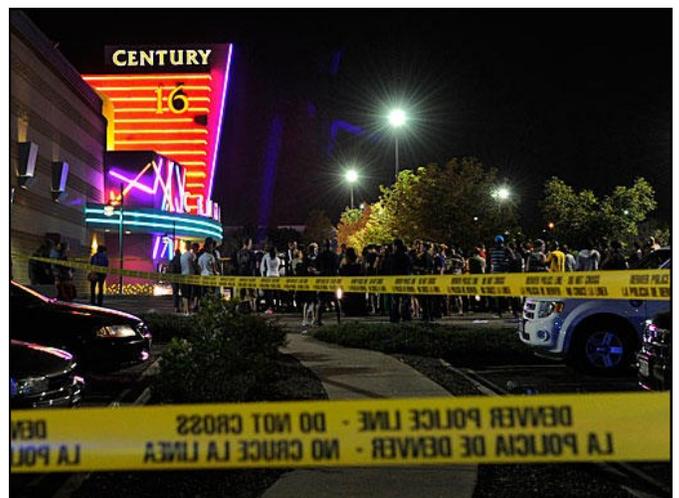
Politicians: Why We Believe Their Lies
By: Alison Patev

With the presidential election just passed, and in the aftermath of the debate between Romney and Obama, it only seems fitting to talk about politicians... and their lies. Politicians tend to stretch the truth in their speeches and debates, and often make promises they don't keep, regardless of political affiliation.

If we know politicians lie, then why do we believe them?

First, human beings all too often assume that what they hear on television, on the radios, or read in papers is true, a concept called "*the trusting bias.*" We tend to trust people all too easily who appear to be knowledgeable on a subject and believe what they say.

This proves to be especially true if the statements come from a person in a position of authority. Certainly, people running for Governor, Senate, or President represent positions of authority!

Combine this with cognitive laziness, and it makes sense that we believe so many political fabrications. *Cognitive laziness* is the principle that, since we take what we hear from authorities as true, we do not feel a need to put in the time and effort to investigate the facts. This lack of awareness leads to uninformed voters at the polls every year.

Another phenomenon that could lead to believing one candidate's promises is *confirmation bias*. This idea states that we favor any information that aligns with our own personal beliefs. If a candidate promises that he will make abortion illegal, and you believe abortion should be illegal, you are likely to believe what he says as true.

In a time when politicians debate so many important issues, people hear what they want to hear. It's not a secret that our economy isn't doing well. Voters want to hear a candidate say, "I will get us out of this mess." So politicians tell voters that they will fix the economy in their four-year term. Voters are so happy to hear this that they believe it, not stopping to think that maybe the politician is lying.

Voters, don't get fooled! Promises your candidate makes may not be true. So, hopefully before you went to the polls this past November, you took a second and did some research to see what your candidate was **really** talking about!

Taunton State Hospital Remains Open
By: Nikki Remillard

As a result of strong community support, a rally, and two unanimous votes by both the House and the Senate, Governor Deval Patrick's plan to close Taunton State Hospital has been overruled. As of now, Patrick's proposal to completely shut down the hospital and transfer patients to different facilities across Massachusetts will not continue as planned. Instead the hospital will remain open with a reduced number of beds. This is not the final say, however, for Taunton State Hospital. As State Senator Marc Pacheco explains, the results of further studies will be crucial in determining the future of the hospital. The state is ordering an independent study aimed to determine the mental health needs of the community. Specifically, this study intends to undertake an updated assessment of the number of beds that are required in the state of Massachusetts. A report of the findings will be due to the Legislature in late December, and Pacheco believes that any new information will support the decision to keep the hospital open. However, he explains that if the report does end up supporting the closure of the hospital, then closing will, in fact, be the action taken.

Photograph from the Taunton Gazette.

In the coming months, some patients will still be transferred from the hospital, as a result of the reduced number of beds. A plan was established that forty-five beds will remain operational. Many employees of the hospital and community members understand just how important staying at Taunton State Hospital is to the patients. Family participation and involvement can be crucial to a patient's recovery, and moving to another facility may stand in the way of this vital part of a patient's therapy. As seen from the rally in March, many family members of patients gathered to show their support, and ideally they would like their family members to remain in one of the forty-five beds where family involvement and visiting is an easier option.

Though the future of Taunton State Hospital may not be entirely certain, the satisfaction of the patients, their families, lawmakers, and community members seems to be so. The decision to keep the hospital open and operational to a certain extent seems to be in the best interest of the community. Any further action taken will be in response to the upcoming study's results.

Diagnosis Riddle Matching
Answers on back page.

Riddle

1. I will not soon be dead, That's what the doctor said, There is no pill To cure my ill, the problem is all in my head!
2. I am paranoid now and then, Sometimes hallucinating when, The mood grips me, and all can see I am delusional once again!
3. I feel sad both day and night, I very rarely feel quite right, crying and blue, despairing too, I cannot seem to see the light!
4. I admire myself most of all, Some say, I have lots of gall. But I am so fine, just top of the line. My appreciation simply won't pall!
5. I am ugly! True as can be! As anyone can plainly see, I hate parts of me. And wish to only change myself finally!
6. I seem to like to see, flames as bright as can be, they hypnotize, and draw my eyes, to their truly hot beauty!
7. One day I feel quite sad, But soon I am manically glad. I am high one day, then too low to say, the extremes can get quite bad!
8. I look in the mirror and groan, I must lose more weight I moan, I do not see the actual me, I am little but skin and bone!
9. A new month is here, and I'm blue I am saddened quite often, that's true I feel depressed and often stressed when a real weather change is due!
10. I simple cannot seem to not steal, even when it makes me feel like a heel. About taking from others, parents, friends and lovers, The thrill is just part of the deal!

Diagnosis

A. Pyromania
B. Body Dismorphic Disorder
C. Depression
D. Hypochondria
E. Kleptomania
F. Anorexia Nervosa
G. Schizophrenia
H. Seasonal Affective Disorder
I. Narcissism
J. Bipolar

15 Psychology Tidbits

http://www.psychologytoday.com/

- Freud initially only sold 700 copies of the *Interpretation of Dreams.*
- Placebos can often offer as much relief as actual treatments.
- Maslow's study of 3,000 college students found that none met the criteria for self-actualization.
- Skinner began his work on pigeons in working on a missile detection system during World War II.
- Most people experience déjà vu about a conversation or a dream.
- Posting a calorie chart in fast food restaurants leads people to choose less healthy foods.
- John F. Kennedy Jr. and his wife Caroline died due to a vestibular illusion.
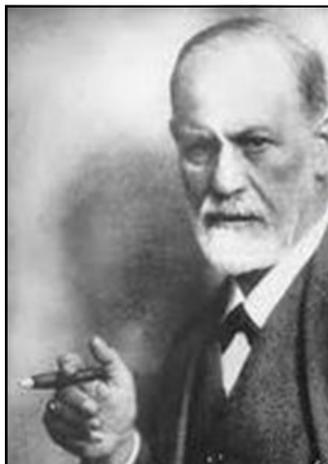
- The Stanford Prison experiment had to be discontinued after 6 days instead of the planned 14.
- Over 50% of the U.S. population believes in psychic phenomena.
- Optimists don't always cope well with stress.
- Rorschach's nickname as a child was "inkblot"
- Alfred Binet, inventor of first intelligence test, was trained as a lawyer.
- Cats have almost 2 times the number of neurons in their cortex than dogs.
- Getting paid for doing something you like can make you less creative.
- Negative reinforcement works better than punishment as a disciplinary measure.

Surfing Under the Influence: Drugs of the Digital Age
By: Leanne Brooks

Time after time, adolescents have been known for finding novel ways to engage in reckless and harmful behavior in the pursuit of fun. Parents have taken steps to prevent mischief inside the home, outside the home, and everywhere in between, but there is somewhere they may be missing – their child's computer. Introducing the new trend, "digital drugs" (not to be confused with illegally ordering pharmaceuticals online), this is actually using specially blended digital music files to produce a sort of "high" in the listener. This novel fad is a twenty-first century spin-off of a type of psycho-auditory therapy, known as *binaural beats therapy*, created back in the nineteenth century. The basic mechanism of this auditory therapy is presentation of two tones of slightly differing frequencies to be heard at the same time by the listener, and the intermediate frequency is perceived as a single tone, creating what is known as a *binaural beat*.

From medical patients to teens to successful Olympic athletes, this new craze is sweeping a nation already hooked on the Internet, pop music, and addictive tendencies themselves. As many studies have shown, young adults spend countless hours on the Internet, which is associated with increased engagement in harmful behaviors, and they are also overly concerned about their social perception in cyberspace. Thus, popularity of these drugs is rampant among social circles because it combines the Internet and bond-forming social recreation. Adolescents prove especially vulnerable to engaging in habit-forming activities such as "iDosing," the term that refers to "dosing" yourself with these digital drugs. This predisposition as well as the social environment that glorifies this behavior makes iDosing a very dangerous activity.

But how do these digital drugs affect people? In a clinical setting, binaural beat therapy has been used with some success to relieve anxiety, promote memorization and learning, and increase quality of life indices in patients over a long period and under controlled conditions. However, teens are abusing these musical and auditory properties to produce the so-called "high." Not only do the drugs cause changes in brain activity, but also the booming volume of the "music" can cause auditory damage to teens' developing systems. To date, no scientific study has been able to prove that listeners experience an actual "high," though many subjects stated they felt definite changes in their moods, which may just be attributed to disorientation within the brain due to the overload of sensory stimuli. As this trend attracts more and more users in both the clinical and nonclinical sectors, additional research is needed to determine the specific neurophysiological mechanisms and effects of binaural beats, especially the consequences it may have on adolescents' brains.

Clinical worries aside, another frightening aspect of this trend is the marketing of the digital drugs as substitutes for specific illegal recreational drugs (i.e. one track is called "LSD"). This advertisement reduces teens' perceptions of the actual drugs' severity and increases their likelihood to transition from this gateway drug to illicit substances. Furthermore, like everything on the Internet, the first track is free! Get "high" now and pay later? Sounds like an ideal situation for teens. The advertisements for these beats say that they are "100% harmless, legal, and working!," downplaying any sort of negative consequences and encouraging prospective listeners to try them out. As this trend becomes more prevalent, schools, parents, and public health officials may have to campaign to ban these digital drugs for the best interest of their teens, who are so susceptible to these types of marketing schemes and products. However, some may argue that this is a violation of our right to freedom of speech and our digital rights, and thus the government does not have the power to ban such sites. Only time will tell whether or not this digital drugging trend will last in the adolescent subculture or will be replaced by a new, even more dangerous way of escaping reality. Either way, the best advice is to stick to iTunes instead of iDosing!

http://www.scientificamerican.com/

Diagnosis Riddle Matching

1. D. Hypochondria
2. G. Schizophrenia
3. C. Depression
4. I. Narcissism
5. B. Body Dismorphic Disorder
6. A. Pyromania
7. J. Bipolar
8. F. Anorexia Nervosa
9. H. Seasonal Affective Disorder
10. E. Kleptomania

Contributing to this Edition of The Thalamus

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