

The Thalamus

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What Can You Do With a Degree in Psychology?

Stonehill Alumni with Nontraditional Jobs

By: Sarah Hill

Many undergraduate students studying psychology may think that obtaining this degree means they will undoubtedly be headed towards graduate studies and a career in clinical practice, social work, or some type of counseling or therapy. However, this is far from the case for many students with their Bachelor's degree in psychology. Getting a degree in Psychology can prepare students for a wide variety of potential careers, and provides them with skills that can make them marketable to a range of employers. For example, upon completing their undergraduate education in psychology, students have experience with problem solving,

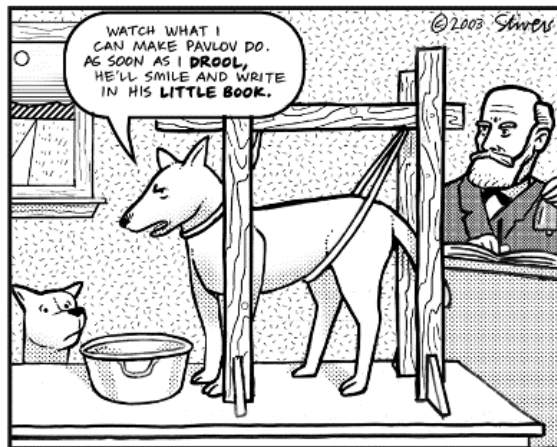
research design and analysis, the ability to look at problems from different perspectives, and an awareness of how the environment, both the physical and social aspects, can influence behavior.

Of course, there are many students who choose to go on to graduate school after completing their B.A. in psychology in order to become psychologists, psychiatrists, clinicians, counselors, researchers, and professors. Nevertheless, there is a large number of students who go on to hold positions in fields that may be considered "non-traditional" for psychology majors. Currently,

there are many psychology alumni from Stonehill who are presently employed in fields that may surprise those who believe that we must all be come therapists or psychiatrists. Stonehill psychology alumni now hold positions as nurses, speech and language pathologists, teachers, business owners, human resources workers, researchers, attorneys, financial analysts, pharmacists, sales representatives, law enforcement agents, realtors, and engineers, just to name a few.

Continued on Page 2

Psychology Humor



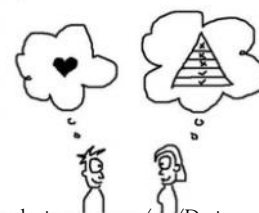
<http://www.psychology-archive.info/humor.htm>



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<http://www.humanfactors.com/downloads/apr10.asp>

The trouble with dating a psychology student



<http://thenebs.deviantart.com/art/Dating-a-psychology-student-126119619>

LUX ET SPES



STONEHILL COLLEGE

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www.stonehill.edu

What Can You Do With a Degree in Psychology?

Continued from Page 1...

Below are some “non-traditional” jobs that individuals with a Bachelor’s degree in psychology may go on to do later in life. This list is not at all comprehensive, but is merely meant to provide you with an idea of just how wide a spectrum of jobs you and your fellow psychology peers may enter into.

Advertising Sales Representative	Occupational Therapist
Applied Statistician	Optometrist
College/School Administrators	Personnel Recruiter
Criminal Investigator (FBI and other)	Pharmaceutical Representative
Customer Service Representative Supervisor	Physician
Department Manager	Police Officer
Employee Relations Specialist	Public Relations Representative
Employment Counselor	Purchasing Agent
Employment Interviewer	Real Estate Agent
Financial Planner	Research Assistant
Human Resource Advisor	Retail Salesperson
Industrial/Organizational Psychologist	Speech Pathologist
Lawyer	Teacher
Market Research Analyst	Veterinarian
Minister, Priest, Rabbi, etc.	Writer
Nurse	

Reading through even just this short list and hearing the broad range of jobs that Stonehill psychology graduates eventually enter should remind current students that their paths in life after completing their degree are far from set in stone. Keep an open mind and remember that there are countless directions you can go in after obtaining your degree in Psychology.

Face to Face: The Debated Universality of Facial Expressions

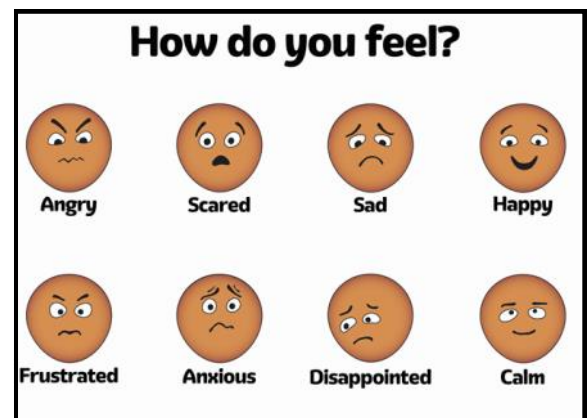
By: Elise Chappell

Emotions are most often accompanied by facial expressions. If someone is upset, his or her facial expression will most likely show this feeling. In other instances, according to the facial feedback hypothesis, a facial expression can actually tell a person how he or she is feeling. For example, it is said that smiling can actually cause a person to become happy because the action of smiling sends signals to the brain. Researchers have said that there are six universal facial expressions representing emotions, which are disgust, sadness, happiness, fear, anger, and surprise. These expressions have been said to be seen across cultures, and use certain facial muscles and motion cues that create the emotional expression.

Many people assume that most emotions are universal, and facial expressions have often been said to be the universal language of emotions. Research has always shown that facial expressions have evolutionary origins and therefore should be consistent across cultures. However, new research published by the American Psychological Association attempts to show that there may be inconsistencies across cultures when it comes to facial expressions and how certain emotions are expressed.

Rachael E. Jack, the lead researcher, conducted this study as a part of her doctoral thesis. The study looked specifically at the differences between East Asians and Western Caucasians and how they read facial expressions. The researchers looked at how these two different cultures used mental representations to perceive emotion. A mental representation of a facial expression is what we picture in our mind when we think about what a face showing a particular emotion is supposed to look like. These representations are formed from past experiences.

The study involved fifteen East Asians and fifteen Western Caucasians who individually looked at “neutral” faces which were then altered on the computer. Each person was asked to categorize the faces as happy, sad, surprised, fearful, disgusted or angry. The study found that the Chinese participants looked at the eyes more to categorize facial expressions, while Western Caucasians looked at eyebrows and the mouth. The potential issue with this is that it could lead to miscommunications between cultures. Although the research is new, it is interesting to see differences between the two cultures and whether cultures may have other differences.



How Are we Treating Our Soldiers?: Experimental Remedies for PTSD

By: Laura Dzgoeva

At least 20% of Iraq and Afghanistan veterans have post-traumatic stress disorder (PTSD). With such a high prevalence, it's no wonder that a lot of resources are devoted to researching how to prevent and treat it. Of course, there are the usual treatments: cognitive behavioral therapy (CBT) and medications. The VA offers cognitive processing therapy (CPT) and prolonged exposure (PE) therapy, and these tend to have promising results. Selective Serotonin Reuptake Inhibitors (SSRIs) have proven to be an effective medication, as well. But what about alternative methods of treatment?

Increasingly, veterans are turning to experimental remedies for PTSD. The experimental remedies range from yoga to acupuncture to hyperbaric oxygen treatments. These are often referred to as complementary and alternative medicine (CAM) techniques. The Veterans Affairs healthcare system has been trying all sorts of alternative therapies for PTSD. According to the U.S. Department of Veterans Affairs, nearly 40% of those with PTSD report the use of CAM to address emotional and mental problems. Mind-body treatments (such as meditation, relaxation, and exercise therapy) were the most frequently reported. To date, there is a general lack of empirical evidence for CAM for PTSD due to a lack of studies, and so the VA has decided to go ahead and try the alternative therapies, perhaps filling a gap in the literature along with alleviating the symptoms of PTSD.

Two of the alternative therapies that the VA is currently examining are acupuncture and meditation. Acupuncture, which has Chinese origins and involves inserting needles into tissue to restore the balance within the body system, appears to have beneficial effects on PTSD. Improvements in PTSD due to acupuncture are found to be rapid, significant, and lasting. Also, veterans undergoing acupuncture do not need to share traumatic experiences with their psychiatrists, so it is less invasive in that sense.

Meditation has shown positive effects as well, but it demonstrates a larger overall trend in alternative therapy: that of mindfulness. Mindfulness, which is a part of meditation, introduces cognitive changes which may lead to patients with PTSD learning to be less reactive to intrusive or ruminative thoughts. Meditation is also generally linked to decreasing physiological arousal, which helps with the hyperarousal often linked to PTSD. There are also links between mindfulness and positive emotion and social connectedness.

Overall, alternative therapies for PTSD show potential. Veterans who are uncomfortable going to a one-on-one session with a psychotherapist and divulging the intimate details of their past trauma may be far more likely to try acupuncture or meditation, especially in a group therapy setting. More exploration of these techniques can only benefit veterans and the treatment of PTSD!



Georgia Winters ('13) Named NEPA Honorary Undergraduate Scholar By: Bonnie Klentz



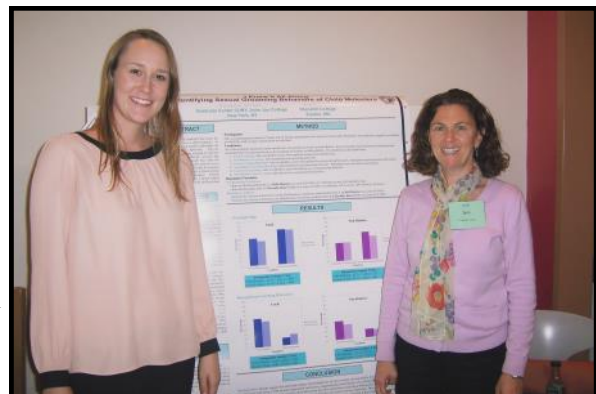
Each year the New England Psychological Association (NEPA) recognizes a small number of psychology students due to their undergraduate excellence by bestowing the NEPA Honorary Undergraduate Scholar award. This year Georgia Winters, Class of 2013, was one of students chosen for this award. A student must be nominated by two faculty and is selected based on extensive research and applied experience, excellence in the classroom, and service to the Psychology Department. Long before Georgia graduated, Professor Jane Nash and I knew she not only met, but exceeded, the criteria for this award. Georgia had already been honored last spring when she was named the Psychology Student of the Year out of the 92 senior psychology majors. There is not enough space to mention all of Georgia's accomplishments, but I would like to mention a few that stand out and led to her NEPA award.

It was during the spring semester of her sophomore year that I first met Georgia. She enrolled in my Group Dynamics course and one day, after I happened to mention my jury research, she approached me and volunteered to assist. Her goal was to pursue a career in forensic psychology and research on jury decision making aligned with her interests. After volunteering her time spring semester of her sophomore year, she continued her involvement in the jury research by enrolling in PSY341 Research in Social Psychology and two semesters of PSY496 Independent Research, and we participated in S.U.R.E. program. During the two and a half years there were many juries to run, lots of data to code and analyze, hours of jury deliberations to code, and many research articles to read as Georgia transitioned from student to collaborator. We presented our work at two conferences including the American Psychology - Law Society Conference in Portland, Oregon and we are still collaborating, as we work on a manuscript of our research. In addition, Georgia completed a Senior Thesis, designing her own study, under the supervision of Professor Nash titled, "I Knew It All Along: Identifying Sexual Grooming Behaviors of Child Molesters." They presented this research at the 2013 NEPA conference. By the time Georgia graduated, she had taken advantage of just about every research opportunity available to a psychology major.

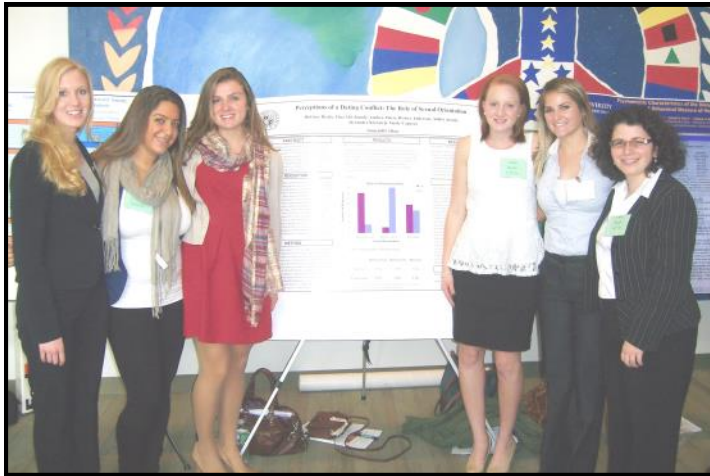
Her applied experience was also extensive. As part of the Counseling Practicum, she interned at Taunton State Hospital for two semesters and she completed an internship at the Domestic Violence Unit in Brockton. In addition, she volunteered with the Big Sister/Big Brother Program and provided child care at a domestic violence shelter. Georgia was very active in the Department serving as Treasurer, Vice President, and President of Psychology Society in her Sophomore, Junior and Senior years, respectively. Additionally, she was co-editor of *The Thalamus* for two years and was a fantastic ambassador for the Department at Admissions Open Houses. A stand-out in the classroom, Georgia graduated summa cum laude, was named to the Dean's list every semester, and was a member of Lambda Epsilon Sigma, the college's honor society and Psi Chi, the International Honor Society in Psychology. As I mentioned above, this is not a complete list of Georgia's accomplishments, but it makes you wonder how she could fit so many things into a schedule that also included a part-time, off-campus, job.

When I introduced Georgia at the Student of the Year ceremony I stated, "I have found that when Georgia gets involved in a project, whether it is spending hours coding jury deliberations or producing the department newsletter, you can expect the final product to be outstanding. But even with those high expectations, she surprises you and the end product is even better than expected." What is so wonderful about Georgia is her pleasant disposition and her ever-present smile, even when she is overwhelmed by all her commitments.

This fall Georgia is enrolled in the doctoral program in forensic clinical psychology at the John Jay School in New York which is considered one of the very top programs in forensic psychology. All of her hard work has paid off, leading her one step closer to her desired career as a forensic psychologist. As Professor Nash commented, "Georgia is everything we hope for in a student. She excels in every environment—in the classroom, in the research lab, and in the community. We are thrilled to see her honored for her hard work as an undergraduate and look forward to following her career in forensic psychology."



Pictures from the 2013 NEPA Conference



Mental Health and the Affordable Care Act: Underemphasized Victory
By: Leanne Brooks

Mental health disorders are a prevalent public health problem in the United States, with 25% of adults (18+) suffering from a diagnosable mental disorder in a given year. These disorders are the leading cause of disability in the U.S. and have a high correlation with poor physical health status. Even though one quarter of the population has need for mental healthcare, in 2008 only 13% of all adults received any sort of treatment. In 2002, mental healthcare expenditures only represented 6% of total medical expenditures in the U.S. Clearly, there is a large gap between access to care and cost of care for the majority of patients who need mental health services. Because of this disparity, the Affordable Care Act (ACA) included tremendous expansion of mental health services, making it the single greatest expansion in behavioral health coverage in the past generation. The regulations in the ACA were written to ensure that mental health coverage would be extended, and is predicted to cover nearly 62 million Americans. There are multiple approaches with which the ACA addressed the current shortages in care, with each relating back to the goals of the ACA as a whole.

Since the emphasis of the ACA is on prevention, healthcare plans are required to offer depression and alcohol misuse screenings for adults, behavioral assessments for children, and domestic and interpersonal violence screenings for women, at no cost to the patient. By providing these services during critical points in patients' lives, we may be able to prevent future mental health complications and the onset of comorbid physical conditions.

Expansion of insurance coverage was an additional major goal of the ACA, and this was also reflected in terms of mental health coverage. Insurance plans provided in the national marketplace are required to cover behavioral health counseling, inpatient services, and treatment for substance abuse disorders. This is significant because it will allow patients, often times

those who need mental healthcare the most, to access the system on an inpatient and outpatient basis. Furthermore, insurance providers are no longer able to deny patients coverage based on pre-existing conditions, and mental health disorders qualifies as one of these conditions.

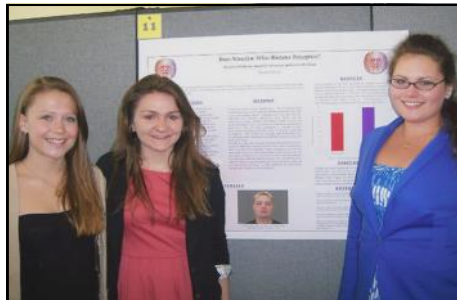
The ACA places an emphasis on integrated care models, which is incredibly important given the traditional issues of system fragmentation between primary care providers and specialty behavioral health professionals. By integrating care and having all their physical and mental needs met in one office visit and the providers functioning as a cooperative team, patients can expect to see a huge benefit in their care outcomes.

In addition to the integrated services, one can expect to see a shift of behavioral healthcare from an inpatient setting to an outpatient setting. The ACA also allows for the expansion of federally qualified health centers to begin to provide behavioral healthcare services, which increases access to care that these patients so rightfully deserve.

As you can see, the ACA is an important landmark in mental health care coverage and services for Americans, and the expansion of care is commendable. By including mental health provisions in this law, the U.S. is showing a commitment to recognizing and treating mental health disorders, and ensuring that their stigma is a thing of the past. Patrick Kennedy, who has been spearheading these efforts, said that these changes in mental health care coverage in the U.S. are "the civil rights movement of our time."

Research Methods Poster Presentation – Spring 2013

A sample of the student research presentations at the poster conference this past spring



Does Facial Attractiveness Affect Perceived Distance?

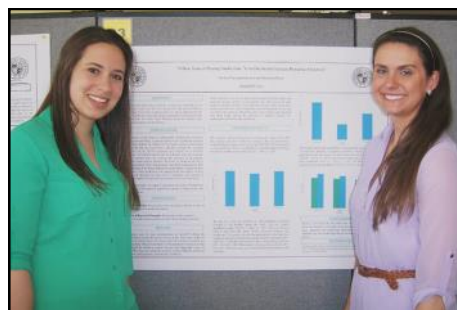
by Kaitlyn M. Gibson, Alexandra M. Kirwin, and Amanda E. Steverman

We investigated whether physical attractiveness affects perceived distance. We predicted that participants would estimate an attractive face as closer in distance than an unattractive face. Twenty-four participants rated facial attractiveness on a 4-point Likert scale and then estimated their physical distance from those faces. We found that participants perceived a greater distance between themselves and the unattractive face than the attractive face. Our results suggest that we perceive ourselves as physically closer to individuals we consider more attractive. Because health manifests physical attractiveness, we theorize that artificial closeness derives from an innate motivation to initiate physiological approach behaviors toward desirable mating partners.

“A New Form of Playing Hard to Get”: Can Uncertainty Increase Romantic Attraction?

by Jessica Pappagianopoulos and Stephanie Rizzo

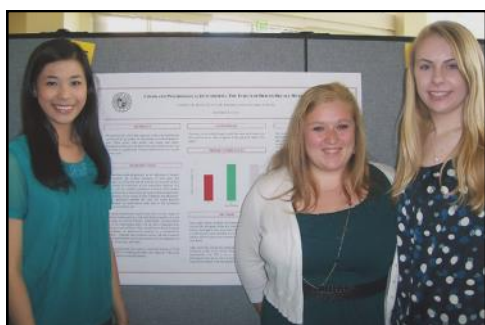
We explored the effect that uncertainty in romantic relationships has on attraction levels from the male perspective. We looked at uncertainty as opposed to the reciprocity principle: that people like others who like them. Our study examined 24 college-aged males from the New England area. Participants viewed four female Facebook profiles and were told that the females had rated them either “liked-best,” “average,” or “uncertain” (meaning that they did not know the rating). We predicted that a high level of uncertainty would increase the males’ attraction to the females. In addition, we predicted that uncertainty would increase the amount of time the males spent thinking about the females. Our results did not support our hypotheses.



Color and Psychological Function: The Effect of Red on Recall Memory

by Connielyn Ramos, Chelsea Shepherd, and Alexa Zygiel

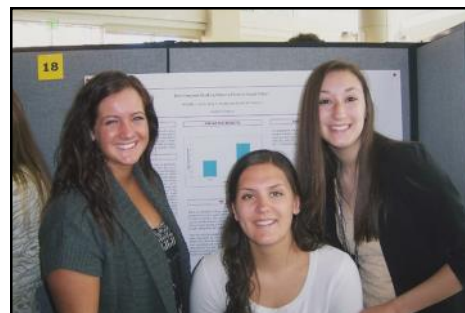
This study investigated the effect that exposure to the color red has on recall memory. Since previous research has shown that red decreases performance on achievement tasks, we hypothesized that red would similarly impair performance on a recall memory task. Participants viewed a list of 20 words, completed a distraction task, and then recalled as many words as possible. We manipulated the color of the test booklet’s title page so that participants were exposed to red, green, or white prior to beginning the recall memory task. The results suggest perception of the color red before the memorization task does not significantly decrease performance on a recall memory task.



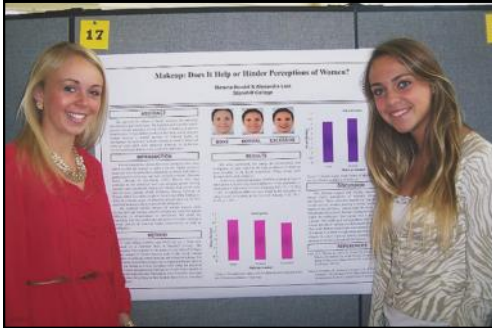
Does Imagined Drinking Impact a Person’s Actual Thirst?

by Michelle L. Barry, Kelly A. Dionne, and Rachel M. Peterson

In this study we examined the effect of imagined drinking on people’s actual thirst. We tested 36 participants using a repetitive imagined task of placing a coin in a laundry machine. In addition to this task, half of the participants imagined taking three sips of water. We then measured how much water each participant drank in ounces, and found that those in the imagined drinking condition drank significantly more water than those in the control condition. Therefore, the results suggest that the use of a limited amount of mental imagery can influence a person’s actual desire.



Research Methods Poster Presentation – Spring 2013, cont.



Makeup: Does it Help or Hinder Perceptions of Women?

by Victoria Hendel and Alexandra Losi

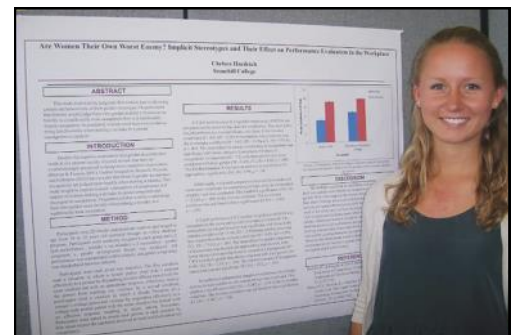
We explored the effects of facial cosmetics on perceived attractiveness and intelligence. We hypothesized that men would perceive women wearing a normal amount of make-up higher in attractiveness. It was further predicted that men would perceive women wearing a normal amount of makeup to be more intelligent. As predicted, women wearing a normal amount of make-up were rated more attractive. Contrary to prediction, women wearing no makeup were rated more intelligent.

Are Women Their Own Worst Enemy?

Implicit Stereotypes and Their Effect on Performance Evaluation in the Workplace

by Chelsea Haedrich

This study explored the judgment that women face in choosing careers uncharacteristic of their gender stereotype. Participants rated women in a gender incongruent occupation as significantly less competent than women in a gender congruent occupation regardless of job performance and a similar trend was found for respect. Most importantly, women in a gender incongruent occupation were judged more harshly when they made a mistake than women in a gender congruent occupation. Additionally, women who had good job performance were rated as deserving of more respect when in a gender incongruent occupation.



What's In a Name:

Are Original Names Really Better?

by Gabrielle Hill and Anne Shea

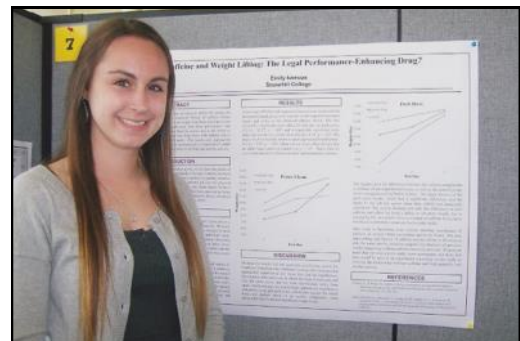
We explored the idea that hard to pronounce and rare names are judged more harshly than those with easy to pronounce names. Our procedure expanded on this belief into a ballot. Based on previous research, we expected that a candidate with a hard to pronounce name would be voted for less frequently. Our study contained an experimental group who received names on each ballot and the control group received a ballot with numbers replacing the name. Our results did not show a significant difference between the number of votes between the control and experimental groups, which could be due to inequality of groups.



Caffeine and Weight Lifting: The Legal Performance-Enhancing Drug?

by Emily Iverson

We explored the effects caffeine has on physical ability by testing the hypothesis that participants who consumed 200mg of caffeine before weightlifting would be able to lift more weight than those participants who did not ingest caffeine. We also hypothesized that those participants who received a placebo would lift more than the control due to the belief of taking a performance enhancer, but less than those with caffeine whose bodies were physically able to lift more. The results only approached significance when the lifting exercise incorporated a component of cardio or endurance, furthering the research done on caffeine and aerobic activity.



Foster Care and the Effects on Children

By: Elena McGinley



Foster care is supposed to be a program through which children are taken away from the harm that they once faced in their previous home from parents or guardians. Unfortunately, it does not always work this way. Many children are faced with further trauma and abuse while in foster care. Over 500,000 children in the United States currently reside in some form of foster care. On average children remain in foster care for three years. At least 28% of children in state care are abused while they are in the system. In interviews, 9 out of 10 children stated that they were abused sexually, verbally, or physically by other children in foster care, by staff taking care of them, or by foster parents they were placed with. Foster children also said that they are conditioned to keep quiet and not to trust anyone. A quote from a former foster child, who is now an adult, states: "What one has to consider is that foster kids are taught to not trust... so while it seems that we are detached, the truth is, often we know full well what is going on. But yes, we do have to protect ourselves, and hence what seems like detachment to the

clinical eye is simply what a 'normal' individual would call reserved." Many children in foster care are diagnosed with "Detachment Disorder," which is diagnosed when someone is unable to show genuine affection. This can often result in a child who is not able to form normal long-lasting relationships that are viewed to be crucial to success later in life.

Countless children say they never spoke up about abuse because they were afraid that they would be moved to another place and become subject to more "unknown abuse." A number of people constantly turn to the social workers or the staff at foster agencies questioning why no one noticed signs of abuse while on visits to the new homes in which the children were placed. In some cases people are completely aware but don't do anything because foster agencies receive money for each placement and if a child is removed from a placement the agency could lose that money. This results in social workers and agencies not having the child's best interest in mind and turning a blind eye. Thirty percent of children in foster care have severe emotional, behavioral, or developmental problems. Complications that children in foster care struggle with include:

Blaming themselves and feeling guilty about removal from their birth parents.

Wishing to return to their birth parents even if they were abused by them.

Feeling unwanted if awaiting adoption for a long time.

Feeling helpless about multiple changes in foster parents over time.

Having mixed emotions about attaching to foster parents.

Feeling insecure and uncertain about their future.

Reluctantly acknowledging positive feelings for foster parents.

Foster agencies don't always look well enough into the foster parents' records: 40% of foster caregivers abuse drugs or alcohol, 14% are mentally ill, 18% have committed domestic violence, 10% spent time in jail or prison, 32% of children report being neglected, and 15% have reported physical and sexual abuse. As a result, foster children may demonstrate negative characteristics like sadistic behavior, lying and stealing, defiance, school anxiety, fear of being alone, lack of empathy, lack of social desire, lack of self-awareness, flatness of emotion, and obliviousness to others.

Although not all foster children have a bad experience or are abused while in foster care, many are. It is important to realize that not every child in foster care is suffering this kind of life style. Some people who were once in foster care said that they had and still do have an excellent relationship with their foster parents. They said they still see them regularly, spend holidays with them, and even receive financial help from them. If a child is placed in a healthy environment, foster care can be a successful program. Foster agencies need to try to stop abuse and place foster children with parents who will love them unconditionally and take care of them.

Alzheimer's Disease

By: Genelle Goodhue

We do walks and raise money for its cure, but how many of us actually know what Alzheimer's Disease (AD) is? According to the Alzheimer's Association, a reported one in three elderly people die having suffered from either dementia or Alzheimer's Disease. In 2013 alone, AD will cost the nation \$203 billion. With statistics this staggering, surely we must educate ourselves.

From the neurological perspective, the cause of Alzheimer's disease lies in the loss of integrity of the microtubules of neurons. Microtubules serve as the basis to maintaining neuron structure. In Alzheimer's disease, the amyloid beta naturally produced by the brain causes tau, microtubule association protein, to dissociate from the microtubules. Without this protein, cell structure is compromised. Additionally, tau collects in the soma, the cell body, eventually causing cell death. This cell death is seen over the course of several years in Alzheimer's patients as it spreads from frontal to the more posterior portions of the brain.

An interesting fact about AD is that it cannot be diagnosed until after death. While the neurological degeneration is said to be able to spread to the portions of the brain responsible for basic life sustaining processes, such as the medulla oblongata and the pons, the patient never survives long enough for the disease to progress this far. Before this can happen, the patients usually have lost the ability to care for themselves and despite having the help of nurses and loved ones, complications arise that curtail their lives. While doctors are able to give an educated assessment as to whether or not a patient is suffering from AD, examination of tissue needs to be done to verify that the collection of tau was the cause of neuronal cell death. Brain tissue obviously cannot be extracted from a living person.

However, not all hope is lost. While we are very aware of the unalterable genetic component underlying AD, there are some things we can do to possibly prevent its occurrence. Studies have actually shown that there is a link between head trauma and development of AD. Therefore, when playing sports, riding a bike, or doing any activity that may lead to a concussion, be sure to wear the proper protective head gear.

The Alzheimer's Association stresses the heart and brain connection. Studies have shown that factors that negatively influence the heart also affect the brain. Therefore conditions of high blood pressure, high cholesterol, heart disease, stroke, and diabetes have been correlated to AD. These are factors that we can control with a healthy diet and good exercise.

There is still much more work to be done in the research field regarding Alzheimer's Disease. One thing is certain: whether or not this disease runs in your family, eat right and take care of yourself now, and you will have happier and better golden years.

Psychology Fun Facts

Too much stress can actually stunt a person's growth.

Most men exhibit an immediate decline in mental performance when interacting with women. Women do not have this problem.

Listening to music boosts the immune system and can help fight off disease.

If a woman crosses her legs while in conversation, she's probably not into you.

Our brains do not recognize a person by his or her entire face, but from the eyes and other key features on the person's face.

Watching people dance causes our muscles to respond in a way as if we are dancing too.

Getting the Message: A Look at the Psychology of Advertising

By: Nikki Remillard

In today's world it seems rare that we go a day without either seeing or hearing an advertisement. Whether we are reading a magazine, watching TV, or surfing the web, we come across different advertisements. Most of us usually do our best to ignore them, but according to 'Psychology Today', we may still be getting the message.

Advertisers use a psychological principle known as "affective conditioning" in order to entice viewers to buy their products. They do this by using positive feelings to their advantage. Essentially, advertisers want their viewers to associate any positive feelings that they may have for certain images or ideas with the product. To do this, the advertisers will likely include imagery, in their commercial or print ad, alluding to positive feelings or scenarios.

For example, an advertisement selling a particular brand of toilet paper uses bright colors, with happy-looking people and adorable animals. A certain brand of face wash crafts a commercial with two visibly happy teenage girls dancing and laughing to uplifting, positive

music. The goals of these advertisements are for the viewers to 1) bring to mind their positive feelings that are linked to the images and 2) associate those feelings with the product. A successful advertisement will cause the viewer to experience a positive feeling toward the product, because it was associated with other concepts that the viewer had previous positive feelings about.

This method of "affective conditioning" seems to be so effective that, in fact, it works even when we ignore the commercials! Affective conditioning tends to work best when the viewer is unaware of what the advertisers are trying to do. So essentially, when we turn down the volume on the TV or attempt to ignore an ad as it plays before a video online, the message may have an even stronger effect on us. We won't be aware of it, but we may still associate the product with positive feelings. So next time we're shopping for toilet paper or face wash, we are more likely to select the brand that we have (unknowingly!) associated with positive feelings.

Top Psychology Jokes

Answers to 1, 3, 4, and 6 on back page

1 What's the difference between a psychologist and a magician?

2 Two psychotherapists pass each other in the hallway. The first says to the second, "Hello!"
The second smiles back nervously and half nods his head. When he is comfortably out of earshot, he mumbles, "God, I wonder what *that* was all about?"

3 How many psychotherapists does it take to change a lightbulb?

4 How many narcissists does it take to change a lightbulb?

5 "Doctor," said the receptionist over the phone, "there's a patient here who thinks he's invisible."
"Well, tell him I can't see him right now."

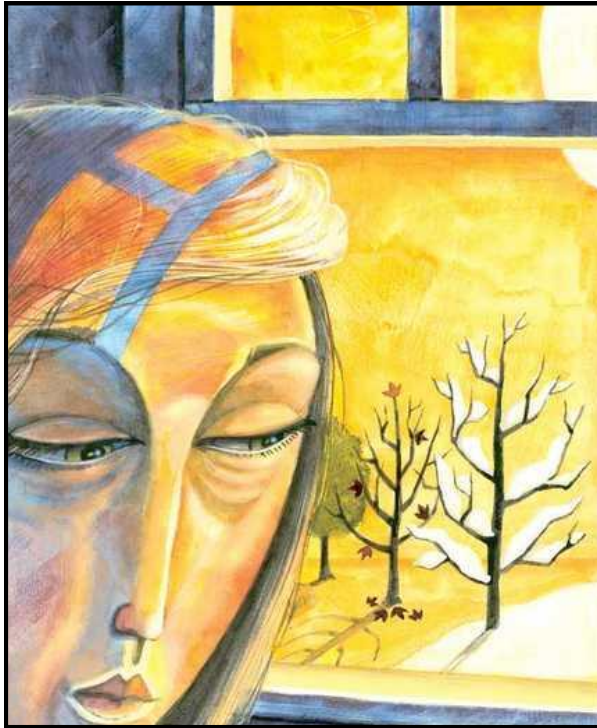
6 What's the difference between a loan and a psychologist?

7 A man was walking in the street one day when he was brutally beaten and robbed.
As he lay unconscious and bleeding, a psychologist, who happened to be passing by, rushed up to him and exclaimed, "My God!
Whoever did this really needs help!"

8 A psychotherapist returned from a conference in the Rocky mountains, where the delegates spent more time on the icy ski slopes than attending lectures and seminars.
When she got back, her husband asked her, "So, how did it go?"
"Fine," she replied, "but I've never seen so many Freudians slip."

Having Holiday Hiccups?

By: Brittany Wickham



Summertime fades, and suddenly it feels as if the work piles on continuously and there's no place of solace to avoid the anxiety associated with the difficult deadlines. It becomes a hassle to get out of bed in the morning because there is no morning sun to brighten your day. Snow accumulates as rapidly as the homework and the projects, and the yearning for a vacation becomes that much stronger. Just a holiday is not enough; you want an actual vacation, one that does not require visiting the folks, binging at the family dinner table, and discerning what would be the best present to give your spouse. Feeling depressed around the holidays may make you appear to be the Grinch, but it could mean that you are suffering from Seasonal Affective Disorder (SAD).

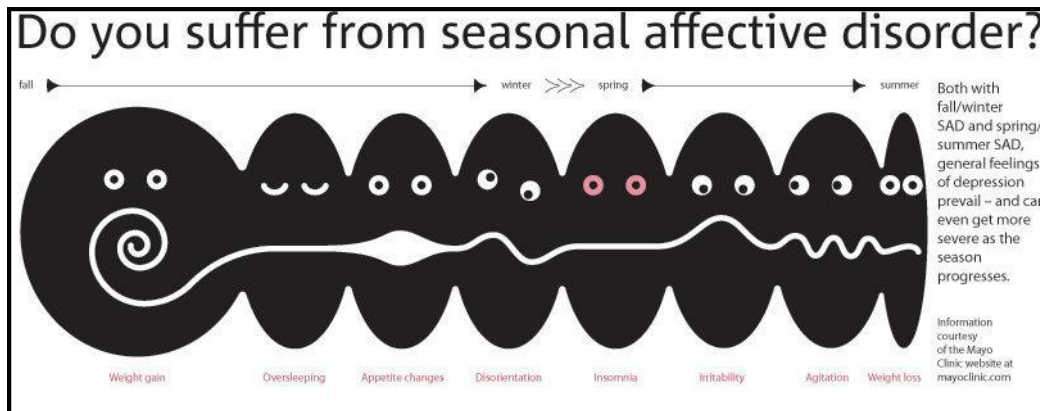
SAD is a form of depression that normally occurs in the winter, and sufferers of SAD are typically teens or adults. Like many other forms of depression, SAD is more common in women than men, and affects people who live in colder climates with longer winters. The symptoms build up in the autumn and winter months. Common symptoms include:

- Hopelessness
- Increased appetite with weight gain
- Increased sleep
- Decreased energy
- An inability to concentrate
- Loss of interest in activities
- Sluggish movements
- Social withdrawal
- Unhappiness and irritability

Sometimes the symptoms of SAD resemble depression or bipolar disorder, so it is important to get tested by a health care provider to rule out other disorders that have similar symptoms.

Many of the treatments of SAD are the same as treatments for depression: antidepressant medications and therapy. However, ways of managing depression at home include getting enough sleep, eating healthy foods, taking medicines at the discretion of a physician, exercise, and simply doing activities that make you happy. It can also be helpful to have a person to talk to, a friend to confide in, and to volunteer or get involved in group activities that you can immerse yourself in and find a sense of purpose in that activity. Involving yourself in areas that interest you are more likely to help alleviate the depression that comes along with SAD. Another form of treatment is light therapy, a form of therapy during which a special lamp with bright light is used to mimic the sun's rays. The treatment is often done in the late fall, before the symptoms manifest. The symptoms should improve or subside within three to four weeks. It is important to check with an eye doctor before taking this treatment, and some side effects of light therapy include headaches and eye strain.

It is important to recognize that, because it is called Seasonal Affective Disorder, it means exactly what it sounds like: the disorder is seasonal. It is not impossible to overcome the depression that you're suffering, and through treatment the outcome is often positive. With a better understanding of SAD and its treatments, those who are diagnosed can fully enjoy the holiday season with their families, despite that guest who brought the dreaded fruitcake!



The Thatcher Illusion



You, as a perceptive young student of psychology, probably noticed that the flipped features in the top photo look grotesque, whereas the bottom two pictures look completely normal, right? Look again: one of the bottom pictures is still the flipped features photo from above. We're not used to viewing faces upside down, so we don't pick up on the abnormality because we focus on the local features. In the right-side-up photos, when we see the whole face, it looks off to us. Cool, right?

Top Psychology Joke Answers

1
A magician pulls rabbits out of hats, whereas a psychologist pulls habits out of rats.

3
Just one, so long as the light bulb *wants* to change.

4
Just one. All he has to do is to hold it in place while the world revolves around him.

6
The loan eventually matures and earns money.

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"No, I'm fine. It just feels good to lay down for a bit."

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