

HUMAN BEHAVIOR AND VICTIMOLOGY

Psychology- is the scientific study of the mind and behavior.

Human behavior is the study of human conduct; the way a person behaves or acts; includes the study of human activities in an attempt to discover recurrent patterns and to formulate rules about man's social behavior.

Different Attributes or Characteristics of Behavior

- **Overt behavior** – behaviors that are observable.
- **Covert behavior** – those that are hidden from the view of the observer.
- **Simple behavior** – less number of neurons are consumed in the process of behaving.
- **Complex behavior** – combination of simple behavior.
- **Rational behavior** – acting with sanity or with reasons.
- **Irrational behavior** – acting without reason.
- **Voluntary behavior** – done with full volition of will.
- **Involuntary behavior** – bodily processes that goes on even when we are awake or asleep.

Three Levels of Behavior

- **Vegetative Level** – responsible for nurturing and reproduction, mostly found in plants; in human beings, for food and reproduction.
- **Animal Level** – movement and sensation, mostly the use of the senses and sex drives.
- **Rational/Psyche/Human Level** – values and morals, reasons and the will

Three Faculties of Man

1. **Will** – the power of conscious deliberate actions; the faculty by which the rational mind makes choice of its ends of action, and directs energies in carrying out its determinations.
2. **Intellect** – the faculty of power of perception or thought; or power of understanding
3. **Soul** – the rational, emotional, and volitional faculties in man, conceived of as forming an entity distinct from, often existing independently of his body.

The Two Basic Factors Affecting Behavior

- **Heredity-** is the characteristics of a person acquired from birth being transferred from one generation to another.
- **Environment-** is the surroundings or conditions in which a person, animal, or plant lives or operates as affected by human activity. It may also refer to anything around the person that influences his actions.

Different Environmental Factors Affecting Individuals Behavior:

- **The family background** – a basic consideration because it is in the family whereby an individual first experiences how to relate and interact with another. The family is said to be the cradle of personality.
- **The influences of childhood trauma** –The development processes are being blocked sometimes by parental deprivation as a consequence of parents or lack of adequate maturing at home because of parental rejection, overprotection, restrictiveness, over permissiveness and faulty discipline.
- **Pathogenic family structure** – those families associated with high frequency of problems such as:

a. **THE INADEQUATE FAMILY** – characterized by the inability to cope with the ordinary problems of family living. It lacks the resources, physical or psychological, for meeting the demands of family satisfaction.

b. **THE ANTI-SOCIAL FAMILY** – those that espouses unacceptable values as a result of the influence of parents to their children.

c. **THE DISCONCORDANT FAMILY** – characterized by dissatisfaction of one or both parents from the relationship that may express feelings of frustration.

d. **THE DISRUPTED FAMILY** – characterized by incompleteness whether as a result of death, divorce, separation or some other circumstances.

- **Institutional influences** – such as peer groups, mass media, church and school, government institutions, NGO's, etc.
- **Socio-cultural factors**- such as war and violence, group prejudice and discrimination economic and employment problems and other social changes.
- **Nutrition or the quality of food that a person intake** is also a factor that influences man to commit crime because poverty is one of the many reasons for criminal behavior.

Theoretical Perspective on Human Nature

A .The conformity perspective: It views humans as creatures of conformity who want to do the “right” thing.

B. The nonconformist perspective: It assumes that human beings are basically undisciplined creatures, who, without the constraints of the rules and regulations of a given society, would flout society's conventions and commit crime indiscriminately. This perspective sees humans as fundamentally “unruly” and deviant.

C. The learning perspective: This sees human beings as born neutral (neither inherently conforming nor unruly) and subject to developmental changes throughout the life course.

D. Difference-in-kind Perspective - Humans are spiritually, psychologically and mentally different from other animals.

E. Difference-in-degrees Perspective - Human aggression and violence is a result of innate, biological needs to obtain sufficient food supplies, territory, status and mates.

Sociological criminology focuses primarily on groups and society as a whole, and how they influence criminal activity, psychological criminology focuses on individual criminal behavior—how it is acquired, evoked, maintained, and modified.

Psychological criminology is the science of the behavior and mental processes of the person who commits crime.

Focus of Psychological Criminology

A. Cognitive Approach. Cognitions refer to the attitudes, beliefs, values, and thoughts that people hold about the social environment, interrelations, human nature, and themselves.

B. Biological or Neurological Approach. The biological approach often focuses on aggression and violent behavior.

C. Developmental Approach. Examines the changes and influences across a person's lifetime that may contribute to the formation of antisocial and criminal behavior. These are usually called “risk factors.”

What is Developmental Psychology?- The science of Developmental psychology is the study of the changes in humans over the course of their lifetime.

HISTORICAL OVERVIEW OF DEVELOPMENTAL PSYCHOLOGY

- **John Locke-** He is considered the father of modern learning theory. The role of Locke and later learning theorists was to emphasize the role of the environment in development.
- **Jean-Jacques Rousseau-** He is often identified as the father of classical developmental psychology. In his book Emile (1762), he championed a view that emphasized the natural unfolding of the child based on an innate blueprint. He was one of the first to argue that development took place in stages.
- **Sigmund Freud-** He developed the psychoanalysis (belief that all people possess unconscious thoughts, feelings, desires, and memories.) and portrayed early childhood as a formative period for personality development. Adult personality and psychological problems were regarded as arising from childhood influences.
- **Jean Piaget-** He is a Swiss psychologist and developed the Cognitive development theory. Piaget described how children construct new knowledge by adapting current understanding to new experiences, and his emphasis on how the mind actively creates new understanding.
- **Erik Erikson-** an American psychoanalyst who *expanded on Freud's ideas* and portrayed the development as lifelong. His psychosocial theory of development described each stage of life as a conflict involving the social world, such as **“trust vs. mistrust”** of others in infancy, which must be successfully resolved to achieve healthy growth.
- **John B. Watson and B. F. Skinner-** They are learning theorists that proposed that all behaviors were learned responses to environmental influences, such as the reinforcement and examples provided by parents, peers, and others.
- **Lev Vygotsky-** He is a Russian psychologist and a socio-cultural theorist who viewed all development in the context of culture, emphasizing the influence of cultural values on individual growth.

Aspects of Developmental Psychology

- **Physical Development** -The study of physical development focuses on the growth of the brain, body, and physical capabilities, along with the psychological implications of this growth.
- **Cognitive Development** – This development concerns the growth of the mind throughout life.
- **Social and Emotional Development-** focus on relationships, the growth of social skills and social understanding, and the influence of the social world on emotional life.
- **Personality Development** -The study of personality development explores how the distinctive qualities of people develop over life: their characteristic social and emotional dispositions, self-concept, views of the world, and ways of acting and thinking.
- **Moral Development-** Moral development concerns the development of moral values and behavior. Moral values are beliefs about what is right and wrong; moral behavior refers to actions consistent with these beliefs.

The Earliest Theory. The Greek philosopher Hippocrates believed that four basic elements (air, water, earth, and fire) and four body fluids (blood, phlegm, yellow and black bile) affect human behavior. This was further developed by the Roman physician Galen who said that:

- **Sanguine** – caused by an excess of blood, the *person is cheerful, confidently optimistic,* and impulsive.
- **Melancholic** – the person is *depressed, morose, and pessimistic,* caused by an excess of black bile.
- **Choleric** – due to excess yellow bile, the person is *hot-tempered and irritable.*
- **Phlegmatic** – the person is *slow-moving, calm, and unexcitable,* produced by an excess of phlegm.

Ernst Kretschmer (1888-1964) also classified **personality based on body build**:

- **Asthenic** – thin, tall, fragile, narrowly built and looks weak
- **Athletic** – muscular and energetic
- **Pyknic** – round and robust
- **Dysplastic** – malproportioned body, a combination of the above

William Sheldon examined the relationship between body type and personality. He classified the human physique into the hypothetical biological structure called **morphogenotype** and the externally observable physique called **phrenotype**. He attempted to measure the morphogenotype directly through the phrenotype, using what he called the **Somatotype Performance Test**.

Endomorphs with viscerotonia

- Plump with fatty tissues, **round**, soft bodies with large abdomens.
- Sociable
- Fond of food and people
- Even-tempered
- Affectionate

Mesomorphs with somatotonia

- **Lots of muscles**, hard, sturdy with strong bones and muscles
- Love of physical adventure
- Competitive
- Assertiveness of behavior

Ectomorphs with cerebrotonia

- Bony, **thin**, fragile with flat chest
- Love of privacy and secretive
- Self-conscious
- Inhibited in movement

Biological Typology (Hans J. Eysenck)- Eysenck defined personality as the stable and enduring organization of a person's character, temperament, intellect and physique, which determines his/her unique adjustment to the environment.

- **Character** – the system of cognitive behavior (will)
- **Temperament** – the system of affective behavior (emotion)
- **Intellect** – the system of cognitive behavior
- **Physique** – the system of bodily configuration and neuroendocrine endowment.

Basic Dimensions of Temperament

1. Extroversion-introversion – this is a matter of balance of inhibition (calming down) and exertion in the brain itself.

- **Extrovert** – manifests impulsive, **outgoing behavior**
- **Introvert** – generally **avoids highly arousing situation**

2. Stability-instability – neuroticism ranges from normal to fairly calm but tends to be quite nervous; indicative of emotional overreaction and have difficulties adjusting to normal state after emotional experiences.

3. Psychotism – this describes a person with psychotic and psychopathic tendencies due to insensitiveness, hostility and aggressiveness, recklessness and inappropriate emotional expression.

Personality- refers to the sum total of the typical ways of acting, thinking and feeling that make each person unique. It is further defined as the long and enduring pattern of behavior.

Three Components of Personality

1. **ID** – the unconscious part of the personality which serves as the reservoir of the primitive and biological drives and urges. It is that part of the personality with which we are born. ID is the animalistic self.
2. **Ego** – the mediator between the ID and the superego. It refers to the developing awareness of self or the “I”.
3. **Superego** – the socialized component of the personality. It is the authoritative or parental direction that becomes incorporated into the personality as the censoring force or conscience.

The **psychoanalytic perspective** of personality emphasizes the importance of early childhood experiences and the unconscious mind. Below are the most prominent psychoanalytic perspective theorists:

- **Sigmund Freud**: Stressed the importance of early childhood events, the influence of the unconscious, and sexual instincts in the development and formation of personality.
- **Erik Erikson**: Emphasized the social elements of personality development, the identity crisis, and how personality is shaped over the course of the entire lifespan.
- **Carl Jung**: Focused on concepts such as the collective unconscious, archetypes, and psychological types.
- **Alfred Adler**: Believed the core motive behind personality involves striving for superiority, or the desire to overcome challenges and move closer toward self-realization.
- **Karen Horney**: Focused on the need to overcome basic anxiety, the sense of being isolated and alone in the world. She emphasized the societal and cultural factors that also play a role in personality, including the importance of the parent-child relationship.

Psychosexual Stages of Development

1. Oral stage/Infancy. This stage covers the period from birth up to the end of the second year of life. *The mouth region which includes the lips and tongue is the main source of gratification of the child.* The child is learning to deal w/ anxiety by the gratification of oral needs such as sucking, chewing, biting, and spitting is normal activities of the child. This is also characterized by complete dependency on others.

2. Anal stage/Toddler. This extends from the end of the second year to the third year. *The anus, through controlling and expelling feces, is the major source of gratification for the child.* Social control is developed thru defecation and toilet training.

3. Phallic stage/Preschool. This covers approximately the end of the third year to the sixth year of life. *The child finds pleasure by fondling his/her genitals.* The child establishes sexual identity/genital stimulation. This stage is called the **FIXATED BEHAVIOR** which means your behavior right now was being developed during this stage.

- **ELECTRA COMPLEX** - female child *develops intimacy with her father and views the mother as a rival.*
- **OEDIPUS COMPLEX** - a male child *develops intimacy to his mother and views the father as a rival.*

4. Latency/School-age. Starts from the sixth year to age 12. During this period, the child *shifts from deriving gratification from his/her body parts to environmental activities like playing and learning.* The child gains pleasure by being with his/her company. At this stage, sensual motives subside.

5. Genital stage/Adolescence. This starts from puberty and beyond. The individual realizes that other people are not just mere sources of gratification but people to be loved. Attraction to the opposite sex is expected.

Analytical Psychology - suggests that early experiences are very important in personality development. At the same time, though, analytical psychology emphasizes the significance of the present, including the role that cultural shifts and archetypes (or underlying, universal symbols) play in individual psychology.

Carl Gustav Jung, one of the earliest pupils of Freud, eventually created a school that he preferred to call analytical psychology. Under his theory, the **human psyche is embedded in the past, present and future. It consists of conscious and unconscious elements**, masculine and feminine traits, rational and irrational impulses, spiritualistic and animalistic tendencies and the tendency to bring all these contradicting behaviors into harmony with each other.

Stages of Development under Analytic Psychology

1. Childhood (birth to adolescence) – libidinal energy is expected in learning to walk, talk and other skills necessary for survival. After the fifth year, libidinal energy is directed towards sexual activities, reaching its peak during adolescence.

2. Young adulthood (adolescence to 40) – libidinal energy is directed towards learning vocation, getting married, raising children and activities relating to community life. The individual is outgoing, energetic, impulsive and passionate.

3. Middle age (from 40 to later years of life) – the *most important stage* because the person is transformed from an energetic, extroverted and biologically oriented individual to one with a more sophisticated cultural, philosophical and spiritual sense of value.

What is Individual Psychology?- These are body of theories of the Austrian psychiatrist Alfred Adler, who held that the main motives of human thought and behavior are individual man's striving for superiority and power, partly in compensation for his feeling of inferiority. Adler called his approach individual psychology because it expressed his belief that every human personality is unique and indivisible.

Three entrance gates to mental life

1. Birth order

- **The first born** – is the focus of attention until the next child is born, at which time he/she is “dethroned”. The dislocation caused by the birth of the new baby is deeply felt because the parents’ attention is now divided.
- **The second born** – is extremely ambitious since he/she is constantly attempting to catch up and surpass the older siblings. Adler considered the second born the more fortunate.
- **The youngest** – is in the second worst position after the first born. He/she is usually spoiled, easily loses courage to succeed by his/her own effort and can never be independent. The youngest is always ambitious but lazy.

2. **The only child** – is never dethroned by another sibling, but experiences shock upon learning that he/she cannot remain the center of attention (eg school). He/she is very often *sweet and affectionate*.

2. First memories – a research technique of asking a person to describe his/her earliest recollections. These recollections are evidence of the origins of one's lifestyle.

3. Dream analysis – a method whereby a person's dream is used to provide a way of dealing with the person's life problems. By analyzing how problems could be confronted and future events planned through their dreams, a great deal could be learned about the person's lifestyle.

Ego Psychology (Erik Homburger Erikson)- Erikson extended the study of the developing child beyond puberty, emphasizing that the ego continues to acquire new characteristics as it meets new situations in life.

Three Interrelated Aspects of the Ego

1. **Body ego** – refers to one's experience with his/her own body. This refers to the physical state such as being sickly, healthy, abused, battered, etc.
2. **Ego ideal** – represents the image we have of ourselves as compared with an established ideal, such as role models or anyone that a person imitates. The standard that a person sets for himself/herself is based on how well the ego ideal is doing.
3. **Ego identity** – is the image we have of ourselves in a variety of social roles. For example, someone can be a mother and a daughter, but her actions would depend on who she is dealing with.

Psychosocial Development of Personality- we experience eight stages of development over our lifespan, from infancy through late adulthood. At each stage there is a conflict, or task, that we need to resolve.

1. **Basic trust versus basic mistrust (birth – 1 year old)** – infants develop a sense of trust and mistrust of the world around them.
2. **Autonomy versus shame and doubt (2 – 3 years old)** – this stage is concerned with muscular maturation and the accompanying ability to hold on or to let go.
3. **Initiative versus guilt (4 – 5 years old)** – at this stage, the child experiences mobility and inquisitiveness, an expanding sense of mastery and responsibility. The child is eager to learn and perform well.
4. **Industry versus inferiority (6 – 11 years old)** – this stage is the beginning of life outside the family. School life begins here. This is a stage of systematic instruction, a movement from play to a sense of work.
5. **Identity versus identity confusion (12 – 20 years old)** – as childhood ends, adolescence begins. They question role models and identifications of the past and try out new roles.
6. **Intimacy versus isolation (20 – 24 years old)** – a critical commitment that generally occurs at this stage is mutuality with a love partner. This level of intimacy is significantly different from the earlier sexual exploration and intense search for sexual identity. Without a sense of intimacy and commitment, one may become isolated and unable to sustain an intimate relationship. If one's sense of identity is weak and threatened by intimacy, the individual may turn away from or attack the possibility of a relationship.
7. **Generativity versus stagnation (25 – 65 years old)** – generativity includes concern for children and the ideas and products that we have created. We are teaching as well as learning human beings.
8. **Ego integrity versus despair (65 years to death)** – the sense of ego identity includes the acceptance of a unique life cycle with its triumph and failures. The sense of ego integrity includes an awareness of the value of other lifestyles, including those that are very different from one's own.

Feminine Psychology (Karen Danielson Horney) - Horney maintained that neurosis is caused by disturbed human relationship, particularly that between parent and child. She described parental behavior that undermines a child's security as a **basic evil**.

Social Psychological Theory (Erick Fromm)- Fromm believed that human beings are not genetically aggressive. Destructiveness and cruelty cannot be explained in terms of heredity. The desire to destroy emerges only when life forces are frustrated.

Interpersonal Theory (Harry Stack Sullivan)- People are socially created animals. Sullivan emphasized that society is the actual creator of people's personalities. The human being does not exist as a simple personality; its personality can only exist in relation to others.

Personology (Henry Murray)- He focused on the importance of genetic and maturational factors in the development of personality such as (1) childhood, adolescence and young adulthood; (2) middle years and (3) senescence (final era).

Operant Reinforcement Learning Paradigm (Burrhus Frederic Skinner)- simply stated as: "If the occurrence of the operant is followed by the presentation of reinforcing stimulus, the strength is increased." In other words, if a response is followed by a reward, the response will be strengthened. A reinforce, positive or negative, always increases the operant response rate.

Reinforcement in Operant Conditioning- is any event that strengthens or increases the behavior it follows.

1. Positive reinforcement- are favorable events or outcomes that are presented after the behavior. In positive reinforcement situations, a response or behavior is strengthened by the addition of praise or a direct reward.

2. Negative reinforcement - involve the removal of an unfavorable events or outcomes after the display of a behavior. In these situations, a response is strengthened by the removal of something considered unpleasant.

Punishment in Operant Conditioning- is the presentation of an adverse event or outcome that causes a decrease in the behavior it follows.

1. Positive punishment - sometimes referred to as punishment by application, presents an unfavorable event or outcome in order to weaken the response it follows.

2. Negative punishment - also known as punishment by removal, occurs when a favorable event or outcome is removed after a behavior occurs.

Social Learning Theory/Imitation (Albert Bandura)- is the process where a person's behavior changes as a result of being exposed to the behavior of another person, the model.

Anxiety- According to Freud, human beings experience an extreme form of anxiety when they are separated from their mother at birth. He called this **birth trauma**. Refers to fear or nervousness about what might happen.

Three Kinds of Anxiety

- **Reality anxiety** – caused by real, objective sources of danger in the environment.
- **Neurotic anxiety** – fear that the id's impulses will overwhelm the ego and make the person do something for which he/she will be punished.
- **Moral anxiety** – fear of doing something contrary to the superego and thus experiencing guilt.

Types of Anxiety Disorder

A. Separation Anxiety Disorder: It is a severe distress about leaving home, being alone, or being separated from a parent.

B. Generalized anxiety disorder (GAD) is characterized by persistent, high levels of anxiety and excessive and difficult-to-control worry over life circumstances; these feelings are accompanied by physical symptoms such as feeling restless or tense.

C. Obsessive-compulsive disorder (OCD): a condition characterized by intrusive, repetitive anxiety-producing thoughts or a strong need to perform acts or dwell on thoughts to reduce anxiety.

The following conditions were earlier recognized under the term "**Somatoform Disorders**".

- **Conversion disorder** – This is a somatic symptom disorder where a person actually loses a sensory or motor bodily function, resulting in blindness, deafness, paralysis, or numbness or sometimes suffers from seizures.
- **Somatization disorder** - Persons with somatization disorder can have various physical symptoms related to any body part such as pain, nausea, vomiting, bloating, headaches, sexual dysfunction, irregular menstruation and balance problems.
- **Hypochondriasis** - Persons with hypochondriasis often imagine that they suffer from a serious illness when they experience minor symptoms. For example, a bloating sensation or indigestion may be attributed to having a stomach cancer or a headache may be attributed to a brain cancer. Frequent health care visits don't relieve the concerns and in fact, make them worse. Reassurance by doctors and relatives does not help either.
- **Body dysmorphic disorder** - The afflicted person is unduly concerned with body image, manifesting as excessive concern about and preoccupation with a perceived defect of their physical appearance that is not very obviously apparent to others.
- **Pain disorder** - Persons suffering from pain disorder suffer from chronic pain for which no physical cause can be found.
- **Undifferentiated somatoform disorder and somatoform disorder not otherwise specified (NOS)** – Only one unexplained symptom is required for at least 6 months to qualify for undifferentiated somatoform disorder. If the duration is less than 6 months, the condition is referred to as somatoform disorder not otherwise specified.
- **Somatic Symptom Disorder** - Somatic symptom disorder is characterized by a person having an exaggerated focus and thoughts about physical symptoms, such as pain, weakness or shortness of breath, that results in severe mental distress and disruption of normal functioning.

Dissociative Disorders- are characterized by a disruption of and/or discontinuity in the normal integration of consciousness, memory, identity, emotion, perception, body representation, motor control, and behavior. There are three major dissociative disorders:

1. **Dissociative amnesia.** The main symptom is memory loss that's more severe than normal forgetfulness and that can't be explained by a medical condition. You can't recall information about yourself or events and people in your life, especially from a traumatic time.
2. **Dissociative identity disorder.** Formerly known as multiple personality disorder, this disorder is characterized by "switching" to alternate identities. You may feel the presence of two or more people talking or living inside your head, and you may feel as though you're possessed by other identities.
3. **Depersonalization-derealization disorder.** This involves an ongoing or episodic sense of detachment or being outside yourself — observing your actions, feelings, thoughts and self from a distance as though watching a movie (depersonalization).

What is Mood Disorder?- These are disorders characterized by extreme and unwanted disturbances in feeling or mood. These are major disturbances in one's condition or emotion, such as depression and mania. It is otherwise known as **affective disorder**. These are the types of Mood Disorder:

1. **Bipolar Disorder** – it is formerly known as **manic depression**, there are swings in mood from elation (**extreme happiness**) to depression (**extreme sadness**) with no discernable external cause.
2. **Depressive Disorder** – this is when the person experiences extended, unexplainable periods of sadness. Depressive disorders are also characterized by sadness severe enough or persistent enough to interfere with function and often by decreased interest or pleasure in activities.

SEXUAL DYSFUNCTIONS- a disruption of any part of the normal sexual response that affects sexual desire, arousal, or response.

Dysfunction	Definition	Associated Features
Male Hypoactive Sexual Desire	Recurrent lack of sexual interest	Increasing prevalence with age
Erectile Dysfunction	Inability to attain or maintain erection sufficient for sexual activity	Low self-esteem or lack of confidence; fear of failure
Premature Ejaculation	Ejaculation prior to or within 1 minute after vaginal penetration	Fear of not satisfying partner; but only 1%–3% meet the criteria
Delayed Ejaculation	Persistent delay or absence of ejaculation nearly all the time during partnered sex activity	Partner may feel less attractive, feelings of frustration
Female Sexual Interest/Arousal Disorder	Little or no sexual interest or arousal for sexual activity	Problems with arousal, pain, orgasm; relationship problem
Female Orgasmic Disorder	Persistent delay or inability to attain an orgasm in nearly all sexual encounters	Only mildly related to women's sexual satisfaction
Penetration Disorder	Difficulty with vaginal penetration, fear of pain, tightening of pelvic muscles	Fear of penetration, avoidance of sexual activities

The following are classifications of abnormal behaviors involving sex.

A. Sexual Reversals

- **Homosexuality** – a sexual behavior directed towards the same sex; lesbianism or tribadism for female relationship.
- **Tranvestism** – the achievement of sexual excitation by dressing as a member of the opposite sex such a man who wears female apparel.
- **Fetishism** – sexual gratification is obtained by looking at some body parts, underwear of the opposite sex or other objects associated with the opposite sex.

B. Abnormal behavior based on choice of partner

- **Pedophilia** – a sexual perversion where a person has the compulsive desire to have sexual intercourse with a child of either sex.
- **Bestiality** – the sexual gratification is attained by having sexual intercourse with animals.
- **Auto-sexual** – sexual self-abuse; sexual satisfaction is carried out without the cooperation of another.
- **Gerontophilia** – is a sexual desire with an elder person.
- **Necrophilia** – an erotic desire or actual intercourse with a corpse.
- **Incest** – a sexual relation between persons who, by reason of blood relationship cannot legally marry.

C. Based on sexual urge

- **Satyriasis** – an excessive desire of men to have sexual intercourse.
- **Nymphomania** – a strong sexual feeling of women with an excessive sexual urge.

D. Based on mode of sexual expression

- **Oralism** – the use of mouth or the tongue as a way of sexual satisfaction.
- **Fellatio** – male sex organ to the mouth of the women coupled with the act of sucking that initiates orgasm.
- **Cunnilingus** – sexual gratification is attained by licking the external female genitalia.
- **Anilism/Anilingus** – licking the anus of the sexual partner.
- **Sadism** – achievement of sexual stimulation and gratification through the infliction of physical pain on the sexual partner. It may also be associated with animals or objects instead of human beings.
- **Masochism** – infliction of pain to oneself to achieve sexual pleasure.
- **Sado-masochism (Algolagnia)** – pain/cruelty for sexual gratification.

E. Based on part of the body

- **Sodomy** – is sexual act through the anus of the sexual partner.
- **Uranism** – sexual gratification is attained through fingering, holding the breast and licking parts of the body.
- **Frottage** – the act of rubbing the sex organ against body parts of another person.
- **Partialism** – it refers to the sexual libido on any part of the body of a sexual partner.

F. Based on visual stimulus

- **Voyeurism** – the person is commonly called “the peeping Tom”; an achievement of sexual pleasures through clandestine peeping such as peeping to dressing room, couples’ room, toilets, etc. and frequently the person masturbate during the peeping activity.
- **Scoptophilia (Mixoscopia)** – the intentional act of watching people undress or during sexual intimacies.

G. Based on number of participants in the sexual act.

- **Troilism** – three person participate in sex orgy such as two women versus on man or vice versa.
- **Pluralism** – group of person in sexual orgies such as couple to couple sexual relations. It is also called sexual festival.

What are the other sexual abnormalities?

- **Exhibitionism** – it is called indecent exposure, the intentional exposure of genitals to members of the opposite sex under inappropriate conditions.
- **Coprolagnia** – sexual gratification through putting feces in the body.
- **Coprolalia** – the use of obscene language to achieve sexual satisfaction.
- **Don Juanism** – the act of seducing women as a career without permanency of sexual partner or companion.
- **Urolagnia** – sexual gratification through urinating.
- **Necro sadism** – sexual behavior wherein the offenders perform sexual intercourse and then kill the victims.

PERSONALITY DISORDERS- characterized by impairment in self and interpersonal functioning and the presence of pathological personality traits that are relatively inflexible and long-standing.

Cluster A (Odd or Eccentric Behaviors)

PARANOID PERSONALITY DISORDER	SCHIZOID PERSONALITY DISORDER	SCHIZOTYPAL PERSONALITY DISORDER
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Although they are prone to unjustified angry or aggressive outbursts when they perceived others as disloyal or deceitful, those with PPD more often come across as emotionally “cold” or excessively serious.	Those with this disorder may be perceived by others as somber, aloof, and often are referred to as “loners”.	This disorder is characterized both by a need for isolation as well as sold, outlandish, or paranoid beliefs. Some researchers suggest this disorder is less severe than schizophrenia.
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Cluster B (Dramatic, Emotional, or Erratic Behaviors)

ANTISOCIAL	BORDERLINE	NARCISSISTIC	HISTRIONIC
Is characterized by a lack of empathy or conscience, difficulty controlling impulses, and manipulative behaviors.	This mental illness interferes with an individual’s ability to regulate emotion. They are highly sensitive to rejection, and fear of abandonment may result in frantic efforts to avoid being left alone, such as suicide threats and attempts.	Is characterized primarily by grandiosity, need for admiration, and lack of empathy. They tend to be extremely self-absorbed, intolerant of others’ perspectives, insensitive to others’ needs, and indifferent to the effect of their own egocentric behavior.	This person exhibits a pervasive pattern of excessive emotionality and attempts to get attention in unusual ways, such as bizarre appearance or speech.

Cluster C (Anxious, Fearful Behaviors)

AVOIDANT	DEPENDENT	OBSESSIVE-COMPULSIVE
They are often hypersensitive to rejection and unwilling to take social risks. They display a high level of social discomfort, timidity, fear of criticism, avoidance of activities that involve interpersonal contact.	They exhibit a pattern of needy and submissive behavior and rely on others to make decisions for them.	They are also called Anankastic Personality Disorder , they are so focused on order and perfection that their lack of flexibility interferes with productivity and efficiency. They can also be workaholics, preferring the control of working alone, as they are afraid that work completed by others will not be done correctly.

SCHIZOPHRENIA- A disorder characterized by severely impaired cognitive processes, personality disintegration, mood disturbances, and social withdrawal. This is characterized by loss of contact with reality, marked disturbances of thought and perception, and bizarre behavior. At some phase delusions or hallucinations almost always occur.

Symptoms of Schizophrenia

- A. Positive symptoms:** These are symptoms of schizophrenia that involve unusual thoughts or perceptions, such as delusions, hallucinations, disordered thinking, or bizarre behavior.
- Delusions:** These are false beliefs that are firmly and consistently held despite disconfirming evidence or logic.
 - Delusions of grandeur.** Individuals may believe they are someone famous or powerful (from the present or the past).
 - Delusions of control.** Individuals may believe that other people, animals, or objects are trying to influence or take control of them.
 - Delusions of thought broadcasting.** Individuals may believe that others can hear their thoughts.

- D. **Delusions of persecution.** Individuals may believe that others are plotting against, mistreating, or even trying to kill them.
- E. **Delusions of reference.** Individuals may believe they are the center of attention or that all happenings revolve around them.
- F. **Delusions of thought withdrawal.** Individuals may believe that someone or something is removing thoughts from their minds.

- **Hallucination:** It is a perception of nonexistent or absent stimuli; it may involve a single sensory modality or a combination of modalities, including hearing (*auditory hallucination*), seeing (*visual hallucination*), smelling (*olfactory hallucination*), touching (*tactile hallucination*), or tasting (*gustatory hallucination*).
- **Disorganized thinking (formal thought disorder):** It is typically inferred from the individual's speech. The individual may switch from one topic to another (*derailment or loose associations*). Answers to questions may be obliquely related or completely unrelated (*tangentiality*). Rarely, speech may be so severely disorganized that it is nearly incomprehensible and resembles receptive aphasia in its linguistic disorganization (*incoherence* or "word salad").

B. Negative symptoms: These are associated with an inability or decreased ability to initiate actions or speech, express emotions, or feel pleasure (Barch, 2013). Such symptoms include:

- A. Avolition—an inability to initiate or persist in goal-directed behavior;
- B. Alogia—a lack of meaningful speech;
- C. Asociality—minimal interest in social relationships;
- D. Anhedonia—reduced ability to experience pleasure from positive events; and
- E. Diminished emotional expression—reduced display of emotion involving facial expressions, voice intonation, or gestures in situations in which emotional reactions are expected.

KINDS OF SCHIZOPHRENIA

Paranoid Schizophrenia

- Is very suspicious of others,
- Has great schemes of persecution at the root of the behavior,
- Has hallucinations and delusions which are also the symptoms of this type of schizophrenia
- Displays the psychotic symptoms.

Residual Schizophrenia

- Having no motivation or interest in everyday life,
- Advised when an individual has been through at least one episode of schizophrenia (6 months) but then "recover".

Disorganized Schizophrenia (Hebephrenic)

- Person is incoherent verbally and to his/her feeling,
- Expressing emotions that are not appropriate to the situation.

CATATONIC SCHIZOPHRENIA

- Extremely withdrawn, negative, isolated, and has obvious psychomotor disturbances,
- The subject may be almost immobile or exhibit agitated purposeless movement,
- Symptoms can include catatonic stupor and waxy flexibility.

UNDIFFERENTIATED SCHIZOPHRENIA—People with this kind exhibit the symptoms of more than of the above-mentioned types of schizophrenia, but without a clear predominance of a particular set of diagnostic characteristics.

Coping Mechanism- These are the sum total of ways in which people deal with minor to major stress and trauma. Some of these processes are unconscious, others are learned behavior, and still, others are skills that individuals consciously master in order to reduce stress, or other intense emotions like depression.

Defense Mechanism- This refers to an individual's way of reacting to frustration. These are unconscious psychological strategies brought into play by various entities to cope with reality and to maintain self-image.

EXAMPLES OF DEFENSE MECHANISMS

Defense Mechanism	Definition	Example
Acting Out	The behavioral outcome of the conflict between an unconscious need to express anger & a conscious need to deny it.	A college student who has an abusive mother has difficulty with women teachers as well as women on authority.
Avoidance	Unconsciously staying away from any person, situation, or place that might cause unwanted feelings to occur.	A female college student with an abusive father avoids dating.
Denial	Refusal to believe or accept an unpleasant reality	An alcoholic person denies that they have any problems even though their family has observed classic signs.
Displacement	Transferring emotions associated with a particular person/event to another person, object, or situation that is less threatening.	A person punches a punching bag after an argument with their boss.
Dissociation	A person deals with emotional conflict or stress by splitting off or repressing some part of their personality or consciousness from their awareness.	A person talks about a traumatic event and goes into a trance.
Identification	Unconscious modeling of another person's values, attitudes, or behavior.	An adolescent's talks & acts are similar to a teacher she admires.

Intellectualization	Use of thinking to avoid experiencing emotions that are unpleasant	A father talks to his child about what love should be like but fails to demonstrate love towards the child.
Isolation	Separation of emotions from precipitating event or situation	A rape victim talks about her rape without showing any emotions.
Projection	Attributing one's unacceptable or anxiety-provoking feelings, thoughts, & characteristics to another person.	A worker masks feeling of inadequacy by claiming fellow workers are incompetent.
Rationalization	Attempting to justify one's behavior by presenting reasons that sound logical.	A person treated for a drug addiction claims an inability to stop taking drugs because of a "bad marriage".
Reaction Formation	Adopting behavior or feelings that are exactly the opposite of one's true emotions.	A woman who has intense sexual feelings towards her husband's friend treats him rudely & keeps him at a safe distance.

Repression	A person deals with emotional conflict or stress by forcing out any thoughts, impulses, experiences, or memory from conscious awareness.	A mother who seems unaware of the date or events surrounding her child's death A victim of a car accident does not remember anything about the accident
Sublimation	Substituting constructive & socially acceptable behavior for strong impulses not acceptable in their original form	A mother who lost a child in a drunk-driving accident joins an organization that works to educate the public about the dangers of drunk driving
Introjection	A form of identification that allows for the acceptance of others' norms and values into oneself, even when contrary to one's previous assumptions.	A 7-year-old tells his little sister, "Don't talk to strangers." He has introjected this value from the instructions of parents and teachers
Minimization	Not acknowledging the significance of one's behavior.	A person says, "Don't believe everything my wife tells you."
Regression	Resorting to an earlier, more comfortable level of functioning that is characteristically less demanding and responsible.	An adult throws a temper tantrum when he does not get his own way.
Substitution	The replacement of a highly valued, unacceptable, or unavailable object by a less valuable, acceptable, or available object	A woman wants to marry a man exactly like her dead father and settles for someone who looks a little bit like him.
Undoing	An action or words designed to cancel some disapproved thoughts, impulses, or acts in which the person relieves guilt by making reparation	A father spans his child and the next evening brings home a present for him. A teacher writes an examination that is far too easy, then constructs a grading curve that makes it difficult to earn a high grade.

Factors Altering Human Behavior

1. EMOTION

- Refers to feeling affective responses as a result of physiological arousal, thoughts, and beliefs, subjective evaluation, and bodily expression.
- It is a state characterized by facial expressions, gestures, postures, and subjective feelings.
- It is associated with mood, temperament, personality, and disposition.
- Emotion is derived from the French word **emouvoir**, Latin **emovere**, where e- (variant of ex-) means "out" and **movere** means "move".

2. CONFLICT

- Is a stressful condition that occurs when a person must choose between incompatible or contradictory alternatives. It is a negative emotional state caused by an inability to choose between two or more incompatible goals or impulses.

Types of Conflict

- **Psychological Conflict (Internal)-** Conflict could be going on inside the person and no one would know.

- **Social Conflict (External)**- occurs when two or more people oppose each other in social interaction, each exerts social power with reciprocity in an effort to achieve incompatible goals whilst preventing the other from attaining their own.
- **Approach-Avoidance**- Conflict can be described having features of approach and avoidance: *approach-approach* (++), *avoidance-avoidance* (- -), *approach-avoidance* (+ -). In this, two pleasing things are wanted but only one option should be chosen.

3. DEPRESSION

- Is an illness that causes a person to feel sad and hopeless much of the time.
- Depression (major depressive disorder) is a common and serious medical illness that negatively affects how you feel, the way you think, and how you act.

4. STRESS

- Refers to the consequence of the failure of an organism to respond appropriately to emotional or physical threats, whether actual or imagined.
- Can be thought of as an event that strains or exceeds an individual's ability to cope.
- **Stressor**- is anything (physical or psychological) that produces stress (negative or positive).

Two Types of Stress

1. Eustress

- Good stress
- It is stress that is healthy or gives one a feeling of fulfillment or other positive feelings.
- Eustress is a process of exploring potential gains. Stress that enhances function (physical or mental), such as through strength training or challenging work

2. Distress

- Negative stress
- Persistent stress that is not resolved through coping or adaptation, deemed distress, may lead to anxiety or withdrawal (depression) behavior.

5. FRUSTRATION

- is a negative emotional state that occurs when one is prevented from reaching a goal.
- It is an unpleasant state of tension and heightened sympathetic activity, resulting from a blocked goal.
- It is associated with motivation since we won't be frustrated if we were not motivated to achieve the goal.

INTRODUCTION TO VICTIMOLOGY

The term **victimology** first appeared in 1949, in a book about murderers written by forensic psychiatrist Fredric Wertham. It was used to describe the study of individuals harmed by criminals (Karmen 2007).

Today, as explained, *victimology* refers generally to the scientific study of victims and victimization, including the relationships between victims and offenders, investigators, courts, corrections, media, and social movements (Karmen 1990). According to Jan Van Dijk, there are two major types of victimology, namely:

1. **General Victimology**: The study of victimity in the broadest sense, including those that have been harmed by accidents, natural disasters, war, and so on. The focus of this type of victimology is the treatment, prevention, and alleviation of the consequences of being victimized, regardless of the cause.
2. **Penal Victimology**: Generally, approach the subject from a criminological or legal perspective, where the scope of the study is defined by Criminal Law. This type of victimology advocates for victims, for their rights, or in relation to certain types of prosecution.

Dynamics of Victimization

There are a number of procedural models that can be applied to the study of the victimization process for the purpose of understanding the experience of the victims.

1. **Victims of Crime Model** (by Bard and Sangrey). According to this model, there are three stages involved in any victimization:

a. Stage of Impact & Disorganization – stage during and immediately following the criminal event

b. Stage of Recoil – stage during which the victim formulates psychological defenses and deals with conflicting emotions of guilt, anger, acceptance, and desire of revenge (said to last three to eight months),

c. Reorganization Stage – stage during which the victim puts his or her life back to normal daily living. Some victims, however, may not successfully adopt the victimization experience and a maladaptive reorganization stage may last for many years.

2. **Disaster Victim's Model** – this model was developed to explain the coping behavior of victims of natural disasters. According to this model, there are four stages of victimization:

a. Pre-impact - stage describe the victim's condition prior to being victimized

b. Impact - the stage at which victimization occur

c. Post-impact – a stage that entails the degree and duration of personal and social disorganization following victimization

d. Behavioral outcome – a stage that describes the victim's adjustment to the victimization experience

Victimology & Damages

1. **Moral Damages** – the compensation awarded to a person's physical suffering, mental anguish, fright, serious anxiety, besmirched reputation, wounded feelings, moral shock, social humiliation, and similar injury

2. **Actual or Compensatory Damages** – the compensation awarded to a person for such pecuniary loss suffered by him as he has duly proved

3. **Nominal Damages** – the amount awarded to a victim in order that his right that had been violated or invaded may be restored or recognized

4. **Temperate Damages** – moderate damages; the compensation that is more than nominal but less than compensatory damages given to a person when the court finds that he has suffered some pecuniary loss, but its amount cannot, from the nature of the case, be proved with certainty

5. **Liquidated Damages** – damages that agreed upon by the parties to a contract to be paid in case of BREACH OF CONTRACT

6. **Exemplary Damages** – corrective damages; those that are imposed by way of example or a correction for the public good, in addition to the moral, temperate, liquidated, or compensatory damages.