**Developmental Psychology -**Study of behavior from conception to Death

Nature vs. Nurture

* Contributions of Genetics vs. Environment are not either-or; rather some of each
* Twin-Study Method: Identical and Fraternal twins examined in same environments.
* Adoption Studies - Compare identical twins who were raised together vs. those raised apart.

Genetic Influences:

"Jim Twin" - Separated at 5, adopted into two different families, both named Jim.

Both married Linda, both divorced, Both then married Linda, and named some Allen. Same Job, same beer, same hobbies, same dog name, Even voices.

 "Oscar and Jack" Oscar raised in Germany, as Catholic Nazi. Jack raised as a Jewish man in the Caribbean. Reunited in 40's, both wore Navy shirts, similar traits. Both would walk into elevators to see how people would react to sneezes.

Environmental Influences:

Hard to distinguish between Environmental Influences and Genetic Influences with Identical twins. Best way to test, is Identical Twin raised apart.

Interactive Influences:

**New Born Baby**

Basic Reflexs: Rooting, Sucking, Swallowing, Grasping, Stepping

Perceptual Abilities: Vision is limited, but develops quickly.

     Ex. Show a baby two image, they prefer to look at complex image and colorful. And a preference for human faces.

Hearing and Auditory Preference: Mothers voice is preferred. Infants are better at distinguishing sounds than adults.

     Ex. As we get older we lose ability to hear sounds not in our native language.

Taste and Smell: Clear response to pleasant and unpleasant odors and tastes.

Habituation and Recovery: Used to estimate when newborns can discriminate between stimuli

     Ex. Child shown same image will look everywhere else but the image.

**Cognitive Development**

Piaget Theory: Biologist became interested when began testing children intelligence.

    Schemas - General knowledge base of information.

          Ex. Classroom, you expect chairs, tables ect.

    Assimilation - Incorporating new information to fit existing schemas (knowledge).

          Ex. When you see a doberman, you fit that knowledge into your schemas of dogs.

    Accommodation - Modifying schemas to fit new information.

          Ex. When you see a cat for the first time, you think its a dog since its small and furry, but once you learn it meows instead of barks you create a new schema for cats.

**Piaget's Stages of Cognitive Development**

     1. Sensorimotor Stage (Birth to 2-Years): Object permanence, separation anxiety. Basic instincts/Reflexes, Self recognition.

               - Object Permanence is the awareness that an object continues to exist even after it disappears from sight.

               - Child will not experience separation anxiety until Object Permanence has been developed.

     2. Preoperational Stage (2-7-Year): Egocentric, lack of conservation.

               Ex. Coins: Think a nickel is worth more than a dime since it is bigger.

               Ex. Cup with the same amount of liquid but a taller cup looks like it has more liquid.

     3. Concrete Operational Stage (7-12 Years): Conservation Achieved: Still concrete thinking.

     4. Formal Operational Stage (12-Death): Systematic, Logical Thinking, work with hypotheticals.

**Critics of Piaget's Theory**

Children understand possible from impossible outcomes.

     Ex. Physics, or bears when one is removed they think its impossible that two bears appeared.

Video: Children cannot describe how he does trick. Because of parental interpretation.

**Language Development**

Development Sequence - Crying, Babbling, Words, Telegraphic Speech, Rich Vocabulary

Developmental Theories

     - Skinner (Learning) vs. Chomsky (Biological Preparedness)

Critical Period Hypothesis

Genie was locked into a room for her entire life (13 Years Old)

     - Never able to put words together in a grammatically correct way.

Secrets of the Wild Child

     - Young boy in france discovered in the 1800's being raised by wolves.

**Social Development**

Parent-Child Relationship

- FIrst attachment - Intense, exclusive bond with primary caregiver

 - Styles of Attachment

          - Secure: Typically feel confident enough to explore when mother is in the room. When mother leaves they are upset. When she returns they are excited.

          - Insecure: Typically do not feel confident to explore even when mother is in room. When she leaves, they are upset. But when she returns they are angry and avoidance.

Harry Harlow's Monkey's - Study on dependency of Monkeys

1. Developmental Psychology
   1. Adolescence
      1. Time period between puberty and adult-hood
         1. Adult-hood usually corresponds to independent from parents
         2. Roughly between 13-20
         3. Once adolescent we can have abstract thinking and have morals
         4. We begin to evaluate people as to why they do certain things
      2. Kohlberg’s stages of moral development
         1. Preconvential level
            1. Moral dilemmas are resolved in ways that resolve in ways that satisfy self-serving motives
            2. Young children would only be able to reason at this level.
            3. Only done to avoid something unpleasant or to get something they want.
            4. A young child may say he would steal the drug because they don’t want to be sad if their wife dies.
            5. A young child may say he wouldn’t steal the drug because they don’t want to go to jail.
            6. The reasoning is all about them.
            7. Examples:

When you speed you’re impatient, it’s all about me.

* + - 1. Conventional level
         1. Moral dilemmas are resolved in ways that reflect the laws of the land or norms set by parents
         2. If the law says its legal, then it’s OK.
         3. If the law says its illegal, then it’s not OK.
      2. Postconventional level
         1. Most complex
         2. Based on abstract principles such as justice, and the value of life.
         3. An act is moral, if it affirms your own conscious. Whether it is legal or not, so long as it affirms your conscious then it’s right.
         4. If you stole the drug because your wife’s life is worth more than going to jail. Not about you, about your wife.
      3. Example
         1. A woman is dying, a drug a pharmasict in your town has the drug to save her life, the pharmacist is charging too much and they can’t afford it. They tell the pharmacist was asked, please sell it cheap or get now and pay later? He stole the drug, or should he of not stolen the drug?
      4. Kohlberg didn’t care if you were going to take or not take the drug. He was interested in why the situation turned out. Your rationale will tell you where you are on moral development.
      5. Criticism
         1. It is culturally biased
         2. Cultures that value rules and laws, then they’re more likely to reason at the conventional level.
         3. Moral reasoning is very different from moral behavior.
         4. You may say something is right or wrong, but it is different when you’re in that situation.
    1. Dr. Death aka Jack Kevorkian
       1. Helped many people in the 90s commit suicide
       2. Assisted suicide is illegal
       3. He did not agree with that law, he believed our right to die with dignity and peacefully is more important than the law
       4. All of his patients were suffering from terminal illnesses in a tremendous amount of pain
       5. When does human compassion go above the law?
       6. He filmed it, sent it into 60 minutes, knowing that he would be charged with second-degree murder. He was charged, found guilty, and spent 8 or 9 years of prison. He felt so strongly about what he was doing he was willing to serve time in prison. He believed we have the right to decide when we can end our lives.
    2. Women have killed their abusive husbands after years of abuse.
       1. They have been acquitted of their crime.
       2. In those cases the jury must have been reasoning at the post-conventional level
       3. John and Lorena Bobbitt
          1. Lorena was being abused by John for years. While he was sleeping, she went to the kitchen got a butcher knife and chopped off his penis. She went in her car with the severed penis and threw it out on the highway. What she did was illegal, she was found not guilty due to temporary insanity. She admitted the crime, they couldn’t find her not guilty without using temporary insanity.
          2. If they were reasoning at the conventional level they would of convicted her of the crime, however they were reasoning at the postconventional level.
          3. Aftermath of John

He became a porn star after his penis was reattached

Formed a band called the severed parts.

* + - * 1. Aftermath of Lorena

She beat up her mother or mother-in-law.

Found guilty in that case.

* + - * 1. An extreme example of the jury reasoning at the postconventional level

1. Social Development
   1. Erikson’s “identity crisis” describes teenage years
      1. A crisis must be resolved in order for a healthy development is to continue
      2. Identity crisis
         1. Where do you fit into your family, society, etc?
      3. Three aspects you must come to terms with
         1. Relationships with parents
            1. A rise in tension between adolescents and parents
            2. You start to break away from your parents
            3. From an evolutionary perspective we’re essentially dragging out a period of adolescence on both ends. Hundreds of years ago, kids left home at 15-17 years old, about the time they went through puberty. Today we are going through puberty much earlier in life, but yet we are staying with our parents later in life. Of course we want our dependence.
            4. Generally speaking our parents influence most of our major life decisions.

Religious, political, social, beliefs, etc

* + - 1. Relationships with peers
         1. Increase conformity
         2. Influences how we dress, etc
      2. Sexuality
         1. Whether parents like it or not, teenagers are sexually mature. Just because you are sexually mature doesn’t mean you have to be sexually active. Once you go through puberty your body is telling you are a sexually mature adult. Issues with STDs and teenage pregnancies are due to us maturing so much faster than generations ago. The problem is that we are physically maturing faster than generations ago, we are not mentally maturing any faster than generations ago.
         2. Our brain is not fully developed until around 20-25
  1. Adulthood and old age
     1. Biological changes
        1. Our basic abilities start to decrease early in life.
        2. Muscle strength, heart rate, speed of reflex, all increase through your teens and 20s, and start to decrease as early as your 30s and 40s.
        3. Golfing and bowling get better as you get older, unlike the rest of the sports you peak at 25 or so.
     2. Cognitive changes
        1. Intelligence
           1. Fluid intelligence

The ability to reason quickly and abstractly, solve logic problems, etc.

As we age fluid intelligence declines

On a time fluid intelligence test younger adults will do better than older adults.

* + - * 1. Crystallized intelligence

Reflects the accumulation of verbal/language skills and factual knowledge

As we age crystallized intelligence relatively stable throughout age.

On a time fluid intelligence test, sometimes the younger adults will perform better due to wiser explanations to certain problems. They use their years of accumulated knowledge and experience. They tend to compensate for their cognitive slowdown by using their wisdom.

* + - 1. Memory and forgetting
         1. Age related decline in prospective memory (reminders for future action) is seen.
         2. Prospective memory

Remember to go to the grocery store on the way home, to turn your English paper in to your professor, etc.

This is why elderly individuals forget to take their medication or they may forget they took it already and take multiple doses.

* + - * 1. Alzheimer’s disease

We know that as human life expectancy is increasing, so is the prevalence of Alzheimer’s.

Results from a deterioration of neurons that produce Acetylcholine. They begin to plague or die off. That part of the brain isn’t producing enough acetylcholine.

It is different between each person, typically it starts as simple lapses in memory, someone’s name, where you put the remote control, and then the memory problems become more severe.

They often have anterograde and retrograde amnesia.

Changes in judgment, personality, losing the ability to recognize loved ones and family.

The body eventually forgets to talk, feed itself, and then the ability to breath.

A form of dementia

No prevention or cure, there are drugs that can slow the progression of the disorder. The drugs can boost acetylcholine levels.

Factors that are linked to Alzheimer’s

Genetics

Smoking

Drug use

Obesity

Language skill/ability and whether or not you might develop Alzheimer’s

Demonstrated in a study with a group of nuns when they first entered the convent in their 20s. They were asked to write a brief autobiographical essay on why they wanted to be a nun. They were judged on complexity of ideas, sentences, grammar, etc. 60 years later, the nuns that scored lows were then more likely to develop Alzheimer’s. The nuns that wrote complex passages were less likely to develop Alzheimer’s. This is a correlation, but does not mean there is causation.

**Psychological Disorders**

Perspectives

Medical - Disorder caused by disease

     Ex. Family historical disorders passed.

Bio-psycho-social perspective - Disorder caused by genetics, psychological dynamics, and social cultural circumstances.

     Ex. Culture bound syndromes are predominantly found middle to upper-class women in westernized countries. Eating Disorders.

Koro -  Anxiety disorder in which men experience an intense fear that their penis will shrink inside their body and they will die. African

Diagnosis

The process of grouping and naming mental disorders

DSM-IV (Diagnostic and Statistical Manual of Mental Disorders)

     - Over diagnosis, reliability, possible bias, effects of labeling are all concerns.

          - Ex. ADD is the most diagnosed and over diagnosed disorder.

          - Ex. Bias women are more likely to suffer from depression

Specific Disorders

Anxiety Disorder - Persistent feeling of free-floating anxiety

     Ex. Highly sensistive to criticism, cant make decisions. Dwells on past mistakes, worries constantly, inability to relax.

Panic Disorder- Frequent, sudden, intense rushes of anxiety

     Agoraphobia may develop as a consequence

Phobia - Anxious, irrational reaction to an object or even, leading to avoidance. Difference from Panic attack is Phobia is focused on a certain object.

     Simple Intense irrational fear to a specific object

     Social Exaggerated fear of situation that invites public scrutiny

          Ex. Monkeys afraid of snakes and if not known they will observe others and be afraid as well.

Some Phobias are genetically implanted through years of understanding.

     Ex. Heights, Spiders, Snakes

Unexplained Phobia's: Fear of Blood, Fear of Sermons, Fear of Virgins ect.

Obsesive-Compulsive Disorder - Intrusive Thoughts and Rituals

     Constant Obsessions - Intrusion into consciousness of persistent, and often disturbing thoughts.

          Ex. Washing hands until bleeding. Germaphobe.

     Compulsions - Actions that person feels need to be carried out repeatedly.

          Ex. Checking Stove 20 times.

Post-Traumatic Stress Disorder

     Anxiety disorder that occurs after intense psychological trauma - Assault, Rape, Natural Disasters, Wars.

          Ex. Car back fires, and a guy thinks its a gunshot. If symptoms last for a longer period of time.

Hippocampus - If smaller, then could potentially explain fragmented memory. Stress hormones damage hippocampus. or Naturally smaller developed hippocampus.

Dissociative Disorders

Temporary disruption in one's memory, consciousness, or self-identity.

     Anterograde Amnesia is ability after a traumatic event.

     Retrograde Amnesia is ability before a traumatic event.

Fugue States - Forgetting Plus Wandering.

     Dissociative Identity Disorder - Formerly known as multiple personality disorder.

          More common in women and girls who were sexually abused.

     Ex. Man went missing and began a gay life, when originally heterosexual existence.

Mood Disorders

Disorders marked by severe mood disturbances

Major Depression - Deep despair, loss of interests, fatigue, feelings of worthlessness

Biological Factors - Lower than normal levels of norepinephrine and serotonin.

Psychological factors

     Learned helplessness - an expectation of lack of control.

     Depressive explanatory style - a tendency to attribute bad events to factors that are internal rather than external

     Mood congruent memory - We tend to remember information congruent with our certain mood we are in.

          Ex. Require social support, but act in ways to will repel friends. Show a preference for negative feedback.

          Ex. Depressive Realism - View the world in a more accurate way. No dilution.

Normal Person

Positive events - Internal causes

Negative Events - Situation

Depressed

Positive events - Situation

Negative events - Internal causes

If a twin suffers from depression - If Maternal 20% then Fraternal 50% undersupply of ceratonin or epinephrin.

Bi-Polar Disorder - Fluctuations between mania and depression.

     Ex. Manic - Feel like they can do anything. Stronger genetic component: No gender difference. Extremely productive and creative when happy.

Dysthymia - Mild level of depression, introverts, low-self esteem, low energy. Similar to depression treatment.

Cyclothymia - Mild level of Bi-Polar disorders. Able to adjust mood swings.

Schizophrenic Disorders

Group of Psychotic Disorders Characterized by a loss of contact with reality, hallucinations, delusions, and bizarre behavior.

     Symptoms:Selective Attention, Jumbled Language, Express inappropriate emotions. Thalamus - Tends to be smaller than normal. (Part of brain directing traffic between senses and cerebral cortex)

          Positive Symptoms: Hallucination, Inappropriate behavior

          Negative Symptoms: Absence of an appropriate behavior, expressionless

Biologic Factors:

1. Family studies reveal a genetic link.

2. Excess of dopamine.

3. High family stress

4.

Men experience much earlier, late teens to early twenties. Women late 20's to early 40's.

Types of Schizophrenic Disorders:

1. Paranoid: Often have delusions that people are out to get them.

Hallucination: Mistaken sensory sensation. Typically auditory or visual

Andrea

Post-Pardon Psychosis - Including depression she suffered from hallucination.

Somatoform Disorders

Disorders involving physical symptoms that are psychological in origin (non-medical).

Conversion Disorder: Gain a symptom, loss of bodily function without physical basis. Ex: Paralysis when awake but when asleep you move around. (Physiologically impossible)

Hypochondriasis - Chronic unwarranted preoccupation with one's health.

**Psychological Therapy**

Psychiatrists - Work in groups psychological issues can diagnose medicine.

Clinical Psychologist - One on One Therapy and diagnose

Counseling Psychologists -

Psychoanalytic Therapy

- Free flowing. Seek insight through interpretation. Very intensive.

- Free association - stating whatever comes to mind.

          Resistance - Indication that an important issue is at hand. - Defense mechanism (Underlying problem)

Transference - ???

Psychodynamic - Speeds up process.

Behavioral Therapies

Classic conditioning techniques. Repeatedly pairing US with CS.

Flooding (Exposure Therapy) - Exposure to anxiety provoking stimulus until extinction takes place. If nothing bad happens you will overcome.

               Ex. Hold tarantula until you are no longer afraid

Systematic Desensitization - Relaxation, anxiety hierarchy; gradual exposure. Start at bottom of anxiety hierarchy, air fare.

               Ex. Rabbit scared boy but they gave candy and cookies and he no longer was afraid of rabbit.

               Ex. Virtual Therapy and Spider

Aversive Conditioning - Pairing aversive reaction with harmful stimulus

     Ex. Some people take antabuse when they drink so they do not enjoy drinking cause of after effects.

Operant Conditioning Techniques - Punishers decrease, Rewards increase.

     Token Economy: Patients earn tokens for engaging in desirable behavior.

Cognitive Therapy - Change the way you think

     - Change beliefs, perceptions, thoughts about depression

CBT (Cognitive Behavior Theory) - Change the way you act and the way you think.