Culture & Values

**Sense of Community**

Mcmillan & Chavis Model

**Sense of Community:** feeling member have of **belonging,** feeling members **matter to one another** and to group, and **shared faith that members needs** will be **met through commitment to be together**

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**Sense of Community Index (SCI)** measure most frequently used in social sciences to gauge sense of community. Based on theory by Mcmillan & Chavis, sense of community is perception with an affective (emotional component).

Four Elements:

* Assist formation and maintenance of communities
* Could be used by creators and planners of groups/programs to assist promoting high quality interaction in community

**Membership**

Feeling belonging, being part of something bigger than yourself

5 attributesDiagram

Description automatically generated

**Boundaries:** define those who belong and those who do not

Provide members w/ emotional safety necessary for needs and feelings to be exposed and intimacy to develop

E.g. language, dress, rituals, fences, graffiti

**Common symbol system:** symbolic of social bond, required to obtain smooth functioning and integration in social life of community  (name, logo, flag, holidays, language e.g. slang/jargon, uniform)

**Emotional safety**: willingness members to reveal feelings to one another

Provided by boundaries, develop code of conduct, etiquette for how people expected to behave in group)

**Personal investment:** working for membership provide feeling one earned place in group as consequence of personal investment, membership more meaningful and valuable

E.g. application process to be selected

**Sense of belonging and identification:** feelings, beliefs and expectations that one fits into group and has place there

* Feeling of acceptance

**Influence**

Sense making difference to group, group mattering to its members

* In a community, is bi-directional
  + Members feel empowered to have influence group decision (or won’t be motivated to participate) and group having influence over members **(group cohesiveness)**
  + E.g. having voice in decision making, shared responsibilities, electing group leaders
  + Most influence acknowledge other values and opinions matter

**Integration and Fulfilment of Needs**

Feeling person needs (reward) met through being part of group

* E.g. friendship/socialisation, physical activity/fitness, cognition
* Members rewarded for participation (person-environment fit) , participation provide reinforcement as member belonging)

**Shared Emotional Connection**

Feeling being connected to others through sharing interests, experiences, activities

* Intangible, spiritual bond that develops between members based on quality of interactions
* **definitive element for true community:**Commitment and belief community has shared history, common places, shared events, time together, similar experiences/positive experiences amongst members

Emotional connected based on;

* **Contact hypothesis;** greater personal interaction ensure member become close
* **Quality of interaction;** positive interaction more likely to increase bond
* **Investment**; community more important to someone invested time and energy
* **Honour or humiliation;** reward in front of community strengthens sense of community, humiliation, inhibits it, feel less attraction
* **Closure to events;** ambiguous interaction and unresolved tasks inhibit group cohesiveness
* **Shared valent hypothesis;** increased importance shared event facilities group bond
* **Spiritual bond;** present some degree in all communities, example of concept of soul

**Impact of Significant Events**

Significant events: large scale event affect more than individual, experiences life threatening or where significant threat to one's physical or psychological well being)

* Source of stress
* True if negative or positive event

Traumatic events

* Act of violence
* Natural disasters
* Interpersonal vioelcne e.g. rape, abuse, loss family
* Involvement in serious motor vehicle or workplace accident
* Bullying

**Stress:** individual perceives and responds to event that they appraise as overwhelming/threatening to wellbeing

When a stressful event occurs an individual will appraise the event as either;

* **Threat:** one anticipates event could lead to some kind of harm, loss, negative consequence
* **Challenge:** one believes event carries potential for gain, personal growth

E.g. employee promoted to leadership position

Threat: if she believed promotion lead to excessive work demands

Challenge: if she viewed it as opportunity to gain new skills and grow professionally

* Stressful experiences produce physiological and emotional arousal
* Cause cognitive and behavioural efforts to cope w/ stress Chart, line chart

  Description automatically generated

Event characteristics contributing to stress

**Predictability**

* Whether event could be anticipated it would occur
* Usually unpredictable events more stressful
* E.g. terrorist attacks, bombings, mas shootings vs cuclones, natural disaster warnings

Katz and Wykes

Aim: investigate idea predictable aversive events more beneficial than unpredictable

Method: 80 (18-40 yrs) female paid volunteers

* Told or not told whether electric shock going to be applied
* Each 6 predictable and 6 unpredictable shock trials

Findings:

* felt less distress during predictable
* higher ratings aversiveness (avoidance) when shock unpredictable
* 64% participants prefer predictable

**Controllability**

* Ability influence outcome of event
* No control over events=major source stress
* E.g. victims of terrorist attacks=lives lost, long term residents of refugee camps

Geer and Maisel

* Tested idea if we don't control over something=more stressful

Aim: determine perceived control or actual control reduce stress reactions to aversive stimuli (photos of crash victims)

Method and design: lab experiment, participants shown photographs of dead crash crash victims and stress measured by Galvanic skin response (sweat) and Heart Rate electrodes.

* 60 psych undergraduates NYU
* Randomly divided three groups
* Group 1: actual control over how long saw photograph, press button to terminate for max 35 sec
* Group 2: (predictability group) linked to group with actual control
  + Saw photo for group 1 at the same time group 1, warned photo were 60 seconds apart and told how long they would see each. Told 10 second warning tone would precede each photograph. No control but knew what would happen.
* Group 3: linked to group w/ actual control, told from time to time they would see photographs and hear tones. No control, no predictability.

Findings

* Group2  more stressed by tone as they knew it was coming, but no control
* Group 2 less stressed than group 2 and 3, had control

Conclusion

* Having control=reduce stress

**Experience of threat or loss**

* Whether ourselves, loved ones/property/livelihood threatened in some way by event
* Greater threat or loss=higher stress

**Positive & Negative Responses**

**Positive Responses**

**Resilience**

Ability bounce back from adversity

* Capacity to respond positively to difficult/challenging circumstances

Kobasa

* Thought personality differences could account for different responses to stress

Aim: investigate weather hardy personality impacts individuals ability defend against negative effects of stress

Method: study which 600 executives and managers were asked to complete two questionnaires

* One measured personality, other stressful events and illnesses that respondents had experienced over past three years
* Divided respondents into two groups, one scored above average for illnesses, other below
* Number of stressful events experienced by both=high

Findings: high stress/low illness group saw change as challenge, felt more in control, sense of direction work and personal lives=hardy personality

* Hardy personality defends against negative effects of stress

Conclusion: hardy personality encourage resilience and help cope stress

* Criticised because possible illness not cause, not result of personality characteristics
* Later loud out longitudinal study, followed group of executives over 2 year period found those identified at start of two years as having hardy personality

Qualities of resilient people, ‘quality of hardy’

* Change as challenge
* Optimistic
* Feel control lives
* Advantage and make most of opportunities
* faith/sense meaning life

What causes someone to be more/less resilient?

* General factors (e.g. high self-efficacy, empathy, sense of humour)
* Relationship factors (e.g. positive mentor/role models, meaningful relationships)
* Community factors (e.g. lack of exposure to violence, access to education)
* Cultural factors (e.g. cultural/spiritual identification)
* Physical ecology factors (e.g. access to healthy environment)

Resilience can be increased by

* Taught by combining challenges with support
* Having sense of community and community support
* Providing programs for support following significant events
* Through past experience of successfully dealing with negative circumstances

**Post traumatic growth**

* coined by Tedeschi & Calhoun
* Positive changes in person's life that can occur because of traumatic response to an experience
* Not return to same life before period of trauma, rather life changing psych shifts in thinking and relating to the world, that contribute to personal process of change that is deeply meaningful

Three ways psychological functioning increases;

1. **Relationships enhanced** e.g. people describe that they come to value their friends and family more, feel increased sense of compassion for others and longing for more intimate relationships
2. **People change view of themselves** e.g. developing wisdom, personal strength, gratitude
3. **People describe changes in life philosophy** e.g. finding fresh appreciation for each new day and re-evaluating their understanding of what really matters in life, less materialistic and more able to live in present

Perspective changes that PTG can bring on

* Value friends and family more
* Increased sense of compassion
* Longing for more intimate relationships
* Changed views of themselves
* Developing wisdom
* Appreciation for each new day

**Negative response:**

Symptoms following trauma:

Cognitive symptoms: poor concentration, disturbances to attention and memory, flashbacks, intrusive thoughts, disorientation

Physical symptoms: disturbed sleep, nightmares, exhaustion, restlessness, headaches

Emotional symptoms: fear, avoidance, anxiety and panic, depression, guilt, withdrawal and fearfulness

**Symptoms of psychological trauma**

|  |  |
| --- | --- |
| **Physical** | **Excessive alertness, on the look-out for signs of danger**  **Easily startled**  **Fatigue/exhaustion**  **Disturbed sleep**  **General aches and pains** |
| **Cognitive** | **Intrusive thoughts and memories of the event**  **Visual images of the event**  **Nightmares**  **Poor concentration and memory**  **Disorientation**  **Confusion** |
| **Behavioural** | **Avoidance of places or activities that are reminders of the event**  **Social withdrawal and isolation**  **Loss of interest in normal activities** |
| **Emotional** | **Fear**  **Numbness and detachment**  **Depression**  **Guilt**  **Anger and irritability**  **Anxiety and panic** |

**post traumatic stress disorder**

* Emotional condition that sometimes follows a traumatic event
* Event involve actual/threatened death or serious bodily injury

Symptoms:

* Disturbed sleep, nightmares, flashbacks, poor concentration, anxiety/depression, fearfulness, avoidance of stimuli associated with event

* Re-experiencing of trauma through upsetting thoughts or memories or extreme cases, flashbacks which trauma relieved at full emotional intensity
* emotional numbness
* Increased anxiety and vigilance
* Nightmares
* avoid reminders of trauma e.g. specific situations, thoughts, feelings
* Depression, anxiety, drug abuse
* Need to last min 1 month or delayed onset

Resilience vs PTG

-   People resilient able to go back functioning as normal following sig event

-   PTG go beyond pre trauma levels of understand and adaptability

Why is PTG not always about positive reactions?

-   About how individual manages and overcomes trauma

-   Does not mean trauma not impact them negativity

-   People have varying reactions mix of pos and neg

Why do some people suffer PTSD and not others?

**Neurological theories:** history of mental illness or substance abuse will increase risk

**Factors that make them more susceptible:** seeing another person hurt, seeing dead body, childhood trauma, living through dangerous events and trauma

**Post trauma factors:** available support, dealing with extra stress after event e.g. loss of loved one, pain, injury, loss of job or home

Treatment of PTSD

* Medications
* Psychotherapy
* Cognitive behaviour therapy
* Exercise and sleep therapy