

Advanced Placement Psychology SUMMER ASSIGNMENT:

Teacher: Mr. Weiss

To next year's A.P. Psychology class:

Welcome to the fascinating world of psychology, where you get to explore the depths of your life experiences as well as how people are affected by culture, genetics, family history, and expectation.

A.P. Psychology is a college-level class, similar to what you'd be exposed to freshman year in college in a general introductory survey of psychology.

The summer assignment provides an opportunity for you to get ahead with some foundational concepts, so that more time can be spent reviewing in April in preparation for the Advanced Placement Exam, which you are expected to take in early May.

About three to four days after beginning school, you will take the first major test of the course, and during those first three or four days, you will use your summer-assignment notes to take several open-notes quizzes.

Since we cannot go over all the material in three days, much of the first test will measure your desire and discipline to complete the summer study, as well as how well you can absorb and critically apply information on your own.

A final word is in order about the nature of this course and what I expect of you. First and foremost, you must realize that I am just your guide through your first course in psychology. It is you, and you alone, who is responsible for your success in this class. You must set out to own the knowledge through your own sweat and desire.

I will set a high standard of expectation, and I expect you to keep up the work and to meet that standard. As with most college courses, there is no way to expect that all the information you'll be tested on will be discussed in class. Excuses such as "*We never went over this stuff,*" or "*You weren't specific about what we were supposed to know*" are to be left outside the door. If I tell you that you are responsible for all the information in a chapter, then I should not have to spell out the tiniest details contained therein.

I strongly urge you to ask questions, questions that hide between the lines as well as questions that go beyond the page. I hope for you to challenge me at every turn and to take nothing at face value. Finally, I expect you to lead discussions and to volunteer your ideas without fear.

SUMMER HELP-SESSION HOURS: (general question-answer)

Room 201, 12:30 pm to 2:30 pm, on the following 2 dates:

- ✓ Thursday Aug. 20, 2009
- ✓ Thursday Aug. 27, 2009

Checklist for the AP Psychology Summer Assignment:

- ✓ Myers' **Psychology**, 7th edition
- ✓ This SUMMER ASSIGNMENT packet, containing lists of topics, themes, vocabulary for the Prologue: Story of Psychology (pp. 1-17, 587-588), Chapter 1: Thinking Critically (pp. 18-55), and Chapter 7: States of Consciousness (pp. 264-307)
- ✓ Photocopy of Appendix A: Measurement & Statistical Methods pp. 664-674; pick this up at Tallwood HS

SUMMER ASSIGNMENT

1. From Myers' *Psychology*, 7th edition: **Read** pages 1-55, 587-588, and 264-307
2. Read Photocopy of *Appendix A: Measurement & Statistical Methods* pp. 664-674 (available ONLY by picking up the photocopy from Mr. Weiss at Tallwood HS)
3. Take notes on everything...vocabulary, concepts, issues, historical facts, names of people, experiments.
 - You are responsible for everything on the pages listed.
 - For your convenience, a list of the topics, themes, and vocabulary terms you are responsible for is attached.
4. **Turn in all notes** in a flat, pocket folder to the main office not later than August 28. If you are on vacation during the time it is due, or up until that time, it is your responsibility to take your book with you and mail your folder, **postmarked not later than August 28**, to:

Tallwood High School c/o AP Psychology/Weiss
1668 Kempsville Rd
Virginia Beach VA 23464

FOR DETAILED EXPLANATION OF AP PSYCH FROM COLLEGE BOARD:

<http://apcentral.collegeboard.com/apc/public/courses/descriptions/index.html>

WHEN YOU RETURN IN SEPTEMBER...

Your summer assignment will be returned day '1' of class. You may use those notes for several **open-notebook** quizzes on the summer assignment, **but do NOT photocopy the textbook's pages or expect to use this document as part of your open notebook.**

IF YOU NEED TO CONTACT THE TEACHER:

Email me at david.weiss@vbschools.com

LIST OF VOCABULARY TERMS AND CONCEPTS YOU NEED TO KNOW :

IMPORTANT, read THIS: The outlines below match up fairly well with the textbook, but not perfectly; you need to know BOTH what is on the outlines as well as what is in the textbook; if you can't find something in the text or online, you MUST ask about it when you see me next)

Prologue: Story of Psychology + Chapter 1: Thinking Critically

- I. History of Psychology
 - A. Mind-body dualism: see ref.s to Socrates, Plato, Aristotle, Descartes
 - B. Nature vs. Nurture debate
 - C. Locke's tabula rasa; empiricism
 - D. Wundt, 1879; why is he the "father of psychology"; Structuralism; introspection
 - E. James' adaptive Functionalism; the importance of "why"; pragmatism; free-will vs. determinism debate
 - F. Calkins: first APA female president
 - G. Psychology as a science: it came from ph-----phy and b----gy
 - H. Watson, Pavlov, Skinner

J. Definition of "Psychology":

- 1) 1879 science of mental life;
- 2) 1920 science of observable behavior;
- 3) 1960 science of behavior and mental processes

II. Contemporary Psychology: its big issues, perspectives, and subfields

A. Big Issues:

- 1) stability vs. change
- 2) nature vs. nurture

B. Perspectives: see Table 2, p. 11; how would each perspective seek to understand why woman drowns her children, or why a man is heroic, or why a 9th grader's grades have tumbled?

Physiological

- 1) Biological aka Neuroscience, Behavior genetics, Biomedical,

- 2) Evolutionary
- 3) Psychodynamic aka ...
- 4) Behavioral aka...
- 5) Cognitive
- 6) Social-cultural
- 7) Humanistic (*see pp.587-588*)

C. Subfields

- 1) Basic vs. applied
- 2) By profession: biological, developmental, cognitive, educational, personality, social, industrial/organizational, clinical
- 3) By schooling/degree: BA/BS, M.Psy/MC/MSW/MCSW, PhD/MD

III. Limits of Intuition and Common Sense: hindsight bias and overconfidence

IV. Scientific Attitude: skepticism and critical thinking

V. The Scientific Method

A. Theory and hypothesis

B. Operational definition

C. Replication

D. Sampling

- False consensus effect
- Population vs. sample
- Kinds of samples: random, representative (aka stratified, cross-sectional, cross-cultural), biased
- When it's safe to *generalize* from a sample
- When overgeneralizing happens

E. Longitudinal studies ®

VI. Observation:

- Purpose – to describe
- Types: case study, naturalistic observation, survey

VII. Correlation:

A. Purpose – to predict

B. Defined

C. Correlation coefficient; strength of ...; level of statistical significance

D. Scatterplots

E. Types: positive, negative, null, illusory (aka Vivid-case phenomenon)

F. "Correlation is not causation"

VIII. Experimentation:

- A. Purpose – to explain, to discern cause and effect
- B. Controls for all variables but one
- C. Variables: Independent vs. dependent vs. confounding
- D. Procedures: Single-blind vs. double-blind
- E. Placebo effect
- F. Group conditions: control vs. experimental

IX. “Statistical Reasoning” pp. 42-46 (see also Charles Morris Appendix A if you can't find info in text)

A. Distributions

- 1) percentile rank
- 2) frequency distribution
- 3) frequency histograms (see fig 1.11, p. 42) and polygons

B. Measures of Central Tendency

- 1) mode
- 2) mean
- 3) median
- 4) which of the above is most affected by an extreme score (fig 1.12, p. 43)

C. Measures of Variation

- 1) range
- 2) standard deviation
- 3) normal curve
- 4) (Morris) skewed distributions, positive and negative; bimodal distributions

D. Correlation

- 1) Scatterplot
- 2) Correlation coefficient; range of --; statistically significant correlations @ +/- 0.05; strongly correlated @ +/- 0.5
- 3) Positive vs. negative vs. null vs. illusory
- 4) Regression toward the mean

X. American Psychological Association's code of ethics

- 1) informed consent
- 2) debriefing
- 3) if people must be deceived...
- 4) if animals must be harmed...
- 5) Stanley Milgram's famous experiment, in which subjects were tortured (1963)

Chapter 7: States of Consciousness (pp. 264-307)

I. Consciousness (css) defined “...any state of aw-----”

A. what are some different types of states of consciousness?

B. Flow state of consciousness: *“Those euphoric moments of total absorption, when we are so involved with what we are doing – whether it be reading a book, skiing, building something, or playing the piano – can feel like a kind of altered state of [css]. New research suggest that such absorption does lead to an altered state, in which our minds function at peak effectiveness and we experience a feeling of effortless engagement. Our sense of time becomes distorted, and we are filled with happiness.”*

B. cycles/rhythms of the body: circadian, lunar, seasonal

C. dysfunctions in cycles: jet lag, nocturnal/diurnal fluctuation, Seasonal Affective Disorder (SAD)

II. Daydreams and Fantasy-prone Personalities

A. Is daydreaming 'good'?

- Positive (adaptive, creative, escapist due to trauma / deprivation)
- Negative (escapist due to poor attention / focus)

B. What is a fantasy-prone personality? (see hypnosis section)

III. Sleep (diff state often defined by EEG brain wave differentiation)

A. Why we sleep:

- ❖ *biological perspective* (energize body's systems),
- ❖ *cognitive perspective* (improves thinking, memory, problem-solving),
- ❖ *evolutionary perspective* (forces lethargy during time of danger and inefficiency)

B. Stages of sleep:

- Fig. 7.6 p. 274: 1,2,3,4,3,2,1,REM,1,2,3,4,3,2,1,REM, etc.
- But note different sleep patterns over lifespan (Morris 148 fig. 4-2, 149 fig. 4-3)
- Fig 7.4 p. 272: Brain waves during sleep

C. REM facts:

- intense in: brain activity, eye movement, ANS arousal
- most vivid dreams
- aka 'paradoxical sleep': as close to waking as possible in brainwave and ANS activity, but 'deep sleep' appearance b/c muscles functionally paralyzed (relaxed beyond control / no muscle tone)
- REM time steadily increases with each cycle
- REM time 50% in early infancy, decreasing to 25% by age 5
- REM essential for peak cognitive functioning during waking C_{ss} (experimental disruption of REM yields poor memory retention next day and poor problem-solving)
- REM deprivation leads to *REM Rebound* (increased REM next night; hallucinations and increased fantasies when awake)
- REM correlates with sexual arousal
- REM is disrupted by sleep-agents: depress NS, induced stage-4, severe REM Rebound *even during waking state!*

D. Dreams

- theories of dream content
 - Freud's theory of *symbolic censorship*; manifest content vs. latent content
 - *cognitive theory*, supported by experimental disruption of REM
 - *random theory (aka activation-synthesis theory)*, supported by illogical nature of dreams

E. Sleep disorders:

- insomnia,
- apnea,
- narcolepsy,
- sleepwalking, night terrors (both occur during stage 4 sleep)

IV. Hypnosis: a trance-like state of increased suggestibility

A. "Invented" by Mesmer (hence 'mesmerized'), passed on to Chircot, then Freud

B. State: relaxed, appears to be asleep yet EEG shows waking brain activity

C. Still has control, but acts out 'hypnotic suggestions'; unwilling dominance unproven; post-hypnotic amnesia, if induced, only temporary

D. Most hypnotizable: willing, fantasy-prone, had pretend friends, submits to authority

E. Post-hypnotic suggestions: can last several days

F. Therapeutic uses:

- reduce reaction to pain
- quit undesirable addictive habits (but success here *is no better than an 'addict' who willingly goes to talk therapy*)
- stress-related conditions: (headache, asthma, skin reactions)

G. Questionable therapeutic use:

- recovery of repressed memories
- age regression

V. *Meditation*: narrowly focus on object or word; pushes out distractions and anxieties; leaves one relaxed, lowers stress; improves concentration, cognition, immune system

VI. *Near-death-experience*: floating pain-free "self/soul"; tunnel; greeters who've died; peaceful light

VII. *Sensory Deprivation (SD)*

A. Aims: psychologists' attempts at "raising consciousness"

B. SD "chambers": (1960's) bed in soundproof room, subject wrapped in bandages on head, hands, feet; (1990's) tank the size of a covered hot tub, water at 98.6 d, cushioned "floaties" on head, hands, chest, feet

C. Results? Hallucinations, cognitive dysfunction, emotional discomfort

VIII. *Psychoactive / Psychotropic Substances (i.e. drugs)*

- Dependence (aka addiction) = the need for a psychoactive substance (PS) to feel normal
- tolerance = need for *more* of a PS in order *to feel the same high* you felt when you first started taking it
- withdrawal = the craving "hunger" for a PS your body feels when you're physically dependent on it and it's out of your system
- The A.P. student knows classes of drugs, types, and effects:

Classes:

Types of:

Depressants

alcohol
barbiturates
tranquilizers
benzodiazepines
opiates/narcotics
heroin
codeine; morphine; Oxycontin;
phenobarbitol; Seconal; Librium; Valium

Stimulants

nicotine
amphetamines
cocaine
Ritalin
caffeine

Hallucinogens

marijuana
LSD
psilocybin
peyote

Short-term effects: (read in textbook for specific effects)

How opiates affect the NS: attach to receptor sites that normally are stimulated by endorphins, and continually make the neuron fire

Long-term dangers: (any variety of these) physical and psychological addiction, dysfunction in motor-kinetic-sensory-cognitive-psychological-emotional functioning, psychosis, coma, death