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ИНСТИТУТ МЕЖДУНАРОДНЫХ ОТНОШЕНИЙ
ВЫСШАЯ ШКОЛА ИНОСТРАННЫХ ЯЗЫКОВ И ПЕРЕВОДА

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ENGLISH FOR STUDENTS OF PSYCHOLOGY

Учебное пособие

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Учебное пособие предназначено для студентов психологических специальностей и включает в себя аутентичные тексты по актуальным проблемам психологии, практические задания, направленные на создание необходимого лексического запаса, отработку грамматических конструкций, встречающихся в научном изложении текста, развитие навыков чтения и перевода специальной литературы, развитие навыков устной и письменной речи.

Предисловие.

Настоящее пособие предназначено для студентов первого курса специальностей «Клинико-психологическая помощь ребенку и семье», «Психология», с уровнем Intermediate/Upper-Intermediate по дисциплине «Иностранный язык» и содержит аутентичные материалы по английскому языку и задания к ним.

Цель учебного пособия – совершенствование навыков устной и письменной коммуникации, в том числе реферирования аутентичных статей по психологии.

Пособие состоит из трех разделов. Первый раздел посвящен научным школам психологии, в нем освещаются ключевые идеи и основные положения этих школ. Второй раздел охватывает темы по консультативной психологии и психотерапии. Третий раздел содержит тексты для дополнительного чтения, посвященные теме психических расстройств, которые могут встретиться в работе психолога. Также в пособии представлен план реферирования статей на английском языке.

Первый и второй разделы включают в себя ряд уроков, которые содержат статьи для изучающего чтения, упражнения на отработку и закрепление новой лексики, словообразование, умение оперировать терминами, освоение грамматических конструкций научных текстов, совершенствование коммуникативных навыков устного и письменного перевода. Ряд упражнений предполагает творческое участие студентов в форме презентаций и докладов.

В учебном пособии использованы оригинальные тексты из аутентичных источников, учебников по специальности и электронных ресурсов.

Материалы пособия прошли апробацию в студенческих группах

Content

PART 1. PSYCHOLOGY AS A SCIENCE

TEXT 1.

THE NEW SCIENCE.

PRE-READING

Exercise 1. Study the vocabulary before reading the text.

psychology [saɪˈkɒlədʒɪ] – психология

mental disorder [ˈment(ə)l dɪsˈɔːdə] – психическое расстройство

to psychoanalyze [ˌsaɪkəʊˈænəlæɪz] – подвергать психоанализу

physiology [ˌfɪzɪˈɒlədʒɪ] – физиология

mental process [ˈment(ə)l ˈprəʊses] – психический процесс

mind [maɪnd] - разум

consciousness [ˈkɒnʃəsnɪs] - сознательность

perception [pəˈsepʃ(ə)n] - восприятие

a hazy idea [ˈheɪzɪ] – смутное представление

self – самость

manifestation [ˌmænɪfeˈsteɪʃ(ə)n] – проявление

stimulus-response theory [ˈstɪmjʊləs- rɪˈspɒns ˈθɪərɪ] – условно-рефлекторная теория

psychoanalytic theory [ˌsaɪkəʊˈænəlɪtɪk ˈθɪərɪ] – теория психоанализа

unconscious *(n.)* [ʌnˈkɒnʃəs] – бессознательная психическая деятельность

"talking cure" [kjʊə] – «лечение разговором»

interpersonal relationships – межличностные взаимоотношения

to be prone to [prəʊn] – иметь свойство; иметь тенденцию к

to fall under the umbrella of – попадать под действие

intangible [ɪnˈtæn(d)ʒɪb(ə)l] – неуловимый, неосязаемый

introspective [ɪntrəˈspektɪv] – интроспективный, занимающийся самоанализом

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.

1.   What does the word "psychology" come from?
2.   What does psychology examine?
3.   What are the basic concepts of psychology?

4. Can you name well-known psychologists?

Exercise 3. Read, translate the article and be ready to do the exercises.
The new science

Among all the sciences, psychology is perhaps the most mysterious to the general public, and the most prone to misconceptions. Even though its language and ideas have infiltrated everyday culture, most people have only a hazy idea of what the subject is about, and what psychologists actually do. For some, psychology conjures up images of people in white coats, either staffing an institution for mental disorders or conducting laboratory experiments on rats. Others may imagine a man with a middle-European accent psychoanalyzing a patient on a couch or, if film scripts are to be believed, plotting to exercise some form of mind control.

Although these stereotypes are an exaggeration, some truth lies beneath them. It is perhaps the huge range of subjects that fall under the umbrella of psychology (and the bewildering array of terms beginning with the prefix "psych-") that creates confusion over what psychology entails; psychologists themselves are unlikely to agree on a single definition of the word. "Psychology" comes from the ancient Greek psyche, meaning "soul" or "mind," and logia, a "study" or "account," which seems to sum up the broad scope of the subject, but today the word most accurately describes "the science of mind and behavior."

Psychology can also be seen as a bridge between philosophy and physiology. Where physiology describes and explains the physical make-up of the brain and nervous system, psychology examines the mental processes that take place within them and how these are manifested in our thoughts, speech, and behavior. Where philosophy is concerned with thoughts and ideas, psychology studies how we come to have them and what they tell us about the workings of our minds.

All the sciences evolved from philosophy, by applying scientific methods to philosophical questions, but the intangible nature of subjects such as consciousness, perception, and memory meant that psychology was slow in making the transition from philosophical speculation to scientific practice. In some universities, particularly in the US, psychology departments started out as branches of the philosophy department, while in others, notably those in Germany, they were established in the science faculties. But it was not until the late 19th century that psychology became established as a scientific discipline in its own right.

The founding of the world's first laboratory of experimental psychology by Wilhelm Wundt at the University of Leipzig in 1879 marked the recognition of psychology as a truly scientific subject, and as one that was breaking new ground in

previously unexplored areas of research. In the course of the 20th century, psychology blossomed; all of its major branches and movements evolved. As with all sciences, its history is built upon the theories and discoveries of successive generations, with many of the older theories remaining relevant to contemporary psychologists. Some areas of research have been the subject of study from psychology's earliest days, undergoing different interpretations by the various schools of thought, while others have fallen in and out of favor, but each time they have exerted a significant influence on subsequent thinking, and have occasionally spawned completely new fields for exploration.

The simplest way to approach the vast subject of psychology for the first time is to take a look at some of its main movements. These occurred in roughly chronological order, from its roots in philosophy, through behaviorism, psychotherapy, and the study of cognitive, social, and developmental psychology, to the psychology of difference.

Two approaches

Even in its earliest days, psychology meant different things to different people. In the US, its roots lay in philosophy, so the approach taken was speculative and theoretical, dealing with concepts such as consciousness and the self. In Europe, the study was rooted in the sciences, so the emphasis was on examining mental processes such as sensory perception and memory under controlled laboratory conditions. However, even the research of these more scientifically oriented psychologists was limited by the introspective nature of their methods: pioneers such as Hermann Ebbinghaus became the subject of their own investigations, effectively restricting the range of topics to those that could be observed in themselves. Although they used scientific methods and their theories laid the foundations for the new science, many in the next generation of psychologists found their processes too subjective, and began to look for a more objective methodology.

In the 1890s, the Russian physiologist Ivan Pavlov conducted experiments that were to prove critical to the development of psychology in both Europe and the US. He proved that animals could be conditioned to produce a response, an idea that developed into a new movement known as behaviorism. The behaviorists felt that it was impossible to study mental processes objectively, but found it relatively easy to observe and measure behavior: a manifestation of those processes. They began to design experiments that could be conducted under controlled conditions, at first on animals, to gain an insight into human psychology, and later on humans. The behaviorists' studies concentrated almost exclusively on how behavior is shaped by interaction with the environment; this "stimulus–response" theory became well known through the work of John Watson. New learning theories began to spring up in Europe and the US, and attracted the interest of the general public. However, at much the same

time as behaviorism began to emerge in the US, a young neurologist in Vienna started to develop a theory of mind that was to overturn contemporary thinking and inspire a very different approach. Based on observation of patients and case histories rather than laboratory experiments, Sigmund Freud's psychoanalytic theory marked a return to the study of subjective experience. He was interested in memories, childhood development, and interpersonal relationships, and emphasized the importance of the unconscious in determining behavior. Although his ideas were revolutionary at the time, they were quickly and widely adopted, and the notion of a "talking cure" continues within the various forms of psychotherapy today.

(The Psychology Book, 2012, p.10-12)

VOCABULARY EXERCISES

Exercise 4. Form the adjectives from the given nouns and verbs.

psychoanalyze *(v)*	
subject *(n)*	
science *(n)*	
philosophy *(n)*	
vary *(v)*	
significance *(n)*	
development *(n)*	
theory *(n)*	
object *(n)*	

Exercise 5. Write a word in each gap formed from the given one.

Person, to observe, psychology, child, relation, conscious, behavior.

1. There are also people who require therapeutic help for addictions, relationships, _____ traumas, and more.

2. Human _____ in general is very conservative.

3. These _____ abilities build on other emotional intelligences.

4. While _____ may not be as dominant as it once was, many of its methods are still very popular today.

5. _____ psychology is what interests almost every married couple.

6. One of the simplest, yet most effective, ways to learn about child psychology is _____ .

7. A _____ primarily aids the depressed patient through counseling and psychotherapy.

Exercise 6. Give English equivalents:

Ложное представление, применением научных методов к, ввести в заблуждение, процветать, ознакомиться с, подчеркнуть важность, контролируемые условия, клинический случай, иметь решающее значение для, последующее поколение, модель психического состояния другого человека, возрастная психология, дифференциальная психология.

Exercise 7. Match the words 1-8 with the definitions A-H.

1)	mental disorder	a)	the theory that human and animal behavior can be explained in terms of conditioning, without appeal to thoughts or feelings, and that some mental conditions are best treated by altering behavior patterns.
2)	behaviorism	b)	the action of explaining the meaning of something.
3)	mind	c)	the examination or observation of one's own mental and emotional processes
4)	to measure	d)	a person's awareness or perception of something.
5)	interpretation	e)	any disorder of the mind, such as disturbance of perceptions, memory, emotional equilibrium, thought, or behavior
6)	consciousness	f)	to assess the importance, effect, or value of (something).
7)	psychotherapy	g)	the element of a person that enables them to be aware of the world and their experiences, to think, and to feel; the faculty of consciousness and thought.
8)	introspection	h)	the treatment of mental conditions by verbal communication and interaction.

Exercise 8. Find the synonyms of the following words in the text.

Mental illness, to penetrate, imperceptible, to highlight, cerebral activity, explanation, current, hypothetic, to take place, remarkable.

Exercise 9. Arrange the words so as to make sentences.

1.   Stereotypes/ them/ exaggeration/ although/ these/ are/ beneath/ an/ lies/ truth/ some.

2.   Bridge/ also/ between/ as/ a/ physiology/ and/ psychology/ seen/ philosophy/ can/ be.

3.   20th/ psychology/ movements/ the/ in/ blossomed/ evolved/ the/ of/ course/ major/ all/ century/ its/ of/ and/ branches.

4.   Sciences,/ psychologists/ successive/ as/ theories/ is/ relevant/ generations,/ to/ with/ remaining/ all/ upon/ its/ discoveries/ history/ theories/ contemporary/ the/ built/ with/ the/ of/ older/ many/ and/ of.

5.   Russian/ of/ Pavlov/ conducted/ the/ development/ and/ to/ psychology/ critical/ prove/ the/ US/ experiments/ in/ Europe/ the/ in/ 1890s,/ Ivan/ were/ that/ both/ physiologist/ the/ to.

6.   Behaviorism/ as/ animals/ a/ developed/ movement/ proved/ conditioned/ an/ he/ be/ could/ produce/ that/ new/ idea/ to/ response/, into/ a/ known/ that.

7.   Relationships,/ emphasized/ in/ childhood/ memories/ was/ unconscious/ he/ determining/ importance/ and/ interpersonal/ development/, of/ the/ interested/ in/ behavior/ and/ the.

GRAMMAR EXERCISES

Exercise 10. Find the sentences of the Passive Voice, write them down and define what tenses or forms (infinitive or gerund) they are.

Exercise 11. Rewrite these sentences using the Passive Voice.

1.   The language and ideas of psychology have infiltrated everyday culture.

2.   They conducted laboratory experiments on rats.

3.   Physiology describes and explains the physical make-up of the brain and nervous system.

4.   Psychology examines the mental processes.

5.   Wilhelm Wundt at the University of Leipzig in 1879 marked the recognition of psychology as a truly scientific subject.

6.   They used scientific methods.

7. In the 1890s, the Russian physiologist Ivan Pavlov conducted experiments that were to prove critical to the development of psychology in both Europe and the US.

8. The scientists could not study mental processes objectively.

9. A young neurologist in Vienna started to develop a theory of mind that was to overturn contemporary thinking and inspire a very different approach.

10. He emphasized the importance of the unconscious in determining behavior.

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 11. Answer the questions.

1. How did psychology departments start to develop in the USA and Germany?

2. Who founded the world's first laboratory of experimental psychology? Where?

3. What are the movements and branches of psychology?

4. What were the approaches of studying of psychology?

5. What is the principle of introspective method?

6. What is the Ivan Pavlov's role in the development of psychology?

7. What is the behaviorists' main idea in the study of mental processes?

8. Who developed a theory of mind?

9. What was Sigmund Freud interested in?

Exercise 12. Say whether the statements are true or false. Give reasons.

1. Huge range of subjects fall under the umbrella of psychology.

2. Psychology can be seen as a bridge between physiology and philosophy.

3. In the US psychology departments were established in the science faculties.

4. All major branches and movements of psychology evolved in 18th century.

5. Introspective methods were too objective.

6. The idea that animals could be conditioned to produce a response was proved by Wilhelm Wundt.

7. The behaviorists' object of study was the formation of behavior through interaction with the environment.

8. Sigmund Freud's main methods of study based on laboratory experiments.

9. Sigmund Freud's ideas were widely adopted.

10.   The unconscious was emphasized as the important component in determining behavior.

Exercise 13. Translate the following sentences from Russian into English.

1.   Психоанализ нередко называют «лечением разговором».

2.   Невозможно противопоставлять интроспективный и объективный психологические методы исследования, они просто должны дополнять друг друга.

3.   В течение 60 лет бихевиоризм занимал доминирующее положение в американской психологии.

4.   Повторяющиеся жизненные сценарии находятся на уровне личного бессознательного.

5.   Когнитивная психология внесла существенный вклад в развитие психологической науки.

6.   Изначально целью экспериментальной психологии было введение научного метода в психологию.

Exercise 14. Render the article from Ex.3 on p. 6. Follow the plan in the Appendix 1

TEXT 2.

THE NEW FIELDS OF STUDY

PRE-READING

Exercise 1. Study the vocabulary before reading the text.

psychoanalysis [ˌsaɪkəʊəˈnæləsɪs] – психоанализ

gestalt [gəˈʃtælt] – гештальт, целостная форма

forgetting [fəˈgetɪŋ] – забывание

myriad [ˈmɪriəd] – огромное количество

acquisition [ˌækwɪˈzɪʃn] – научение

nurture [ˈnɜːtʃə] – воспитание

innate [ɪˈneɪt] – врожденный, природный

common sense – рассудок, здравомыслие

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.

1. What do you know about Gestalt psychology? What does the concept "to find closure" in psychology mean?
2. What are the differences between cognitive-behavioral therapy and psychoanalysis?
3. What is developmental psychology?
4. Does psychology influence the other sciences? Which ones?

Exercise 3. Read, translate the article and be ready to do the exercises.
The new fields of study

In the mid-20th century, both behaviorism and psychoanalysis fell out of favor, with a return to the scientific study of mental processes. This marked the beginning of cognitive psychology, a movement with its roots in the holistic approach of the Gestalt psychologists, who were interested in studying perception. Their work began to emerge in the US in the years following World War II; by the late 1950s, cognitive psychology had become the predominant approach. The rapidly growing fields of communications and computer science provided psychologists with a useful analogy; they used the model of information processing to develop theories to explain our methods of attention, perception, memory and forgetting, language and language acquisition, problem-solving and decision-making, and motivation.

Even psychotherapy, which mushroomed in myriad forms from the original "talking cure," was influenced by the cognitive approach. Cognitive therapy and cognitive-behavioral therapy emerged as alternatives to psychoanalysis, leading to movements such as humanist psychology, which focused on the qualities unique to human life. These therapists turned their attention from healing the sick to guiding healthy people toward living more meaningful lives.

While psychology in its early stages had concentrated largely on the mind and behavior of individuals, there was now an increasing interest in the way we interact with our environment and other people; this became the field of social psychology. Like cognitive psychology, it owed much to the Gestalt psychologists, especially Kurt Lewin, who had fled from Nazi Germany to the US in the 1930s. Social psychology gathered pace during the latter half of the 20th century, when research revealed intriguing new facts about our attitudes and prejudices, our tendencies toward obedience and conformity, and our reasons for aggression or altruism, all of which were

increasingly relevant in the modern world of urban life and ever-improving communications.

Freud's continuing influence was felt mainly through the new field of developmental psychology. Initially concerned only with childhood development, study in this area expanded to include change throughout life, from infancy to old age. Researchers charted methods of social, cultural, and moral learning, and the ways in which we form attachments. The contribution of developmental psychology to education and training has been significant but, less obviously, it has influenced thinking about the relationship between childhood development and attitudes to race and gender.

Almost every psychological school has touched upon the subject of human uniqueness, but in the late 20th century this area was recognized as a field in its own right in the psychology of difference. As well as attempting to identify and measure personality traits and the various factors that make up intelligence, psychologists in this growing field examine definitions and measures of normality and abnormality, and look at how much our individual differences are a product of our environment or the result of genetic inheritance.

An influential science

The many branches of psychology that exist today cover the whole spectrum of mental life and human and animal behavior. The overall scope has extended to overlap with many other disciplines, including medicine, physiology, neuroscience, computer science, education, sociology, anthropology, and even politics, economics, and the law. Psychology has become perhaps the most diverse of sciences.

Psychology continues to influence and be influenced by the other sciences, especially in areas such as neuroscience and genetics. In particular, the nature versus nurture argument that dates back to Francis Galton's ideas of the 1920s continues to this day; recently, evolutionary psychology has contributed to the debate by exploring psychological traits as innate and biological phenomena, which are subject to the laws of genetics and natural selection.

Psychology is a huge subject, and its findings concern every one of us. In one form or another it informs many decisions made in government, business and industry, advertising, and the mass media. It affects us as groups and as individuals, contributing as much to public debate about the ways our societies are or might be structured as it does to diagnosing and treating mental disorders.

The ideas and theories of psychologists have become part of our everyday culture, to the extent that many of their findings about behavior and mental processes are now viewed simply as "common sense." However, while some of the ideas

explored in psychology confirm our instinctive feelings, just as many make us think again; psychologists have often shocked and outraged the public when their findings have shaken conventional, long-standing beliefs.

In its short history, psychology has given us many ideas that have changed our ways of thinking, and that have also helped us to understand ourselves, other people, and the world we live in. It has questioned deeply held beliefs, unearthed unsettling truths, and provided startling insights and solutions to complex questions. Its increasing popularity as a university course is a sign not only of psychology's relevance in the modern world, but also of the enjoyment and stimulation that can be had from exploring the richness and diversity of a subject that continues to examine the mysterious world of the human mind.

(The Psychology Book, 2012, p.12-14).

VOCABULARY EXERCISES

Exercise 4. Complete the table with the appropriate word forms.

Verb	Noun	Adjective
	psychoanalysis	
		predominant
		useful
	memory	
		behavioral
to influence		
to recognize		
	difference	
	education	
to outrage		

Exercise 5. Write a word in each gap formed from the given one.

To Psychoanalyze, to conform, infant, significant, personal, gen, to believe, to decide.

1.   Nevertheless, _____ traits such as optimism and neuroticism predispose certain types of moods.

2.   _____ factors in mental disorders interact with a person's family and cultural environment.

3.   Neurotics (people with neurosis) are believed to benefit from _____ .

4.   The destructive power of psychological trauma depends on the level of stress tolerance of a person, the _____ of the event.

5.   Thus, Social psychology studies _____ and independence; attitudes and beliefs.

6.   However, neurodevelopmental outcomes throughout _____ and early childhood were not assessed.

7.   Psychological well-being, spirituality and personal _____ - self-perception, self-image, and self-esteem.

Exercise 6. Give Russian equivalents.

Predominant approach, mushroomed in myriad forms, cognitive-behavioral therapy, humanist psychology, to interact with our environment, it owed much to, gathered pace, touched upon the subject, to overlap with many other disciplines, nature versus nurture.

Exercise 7. Give English equivalents.

Принятие решения, когнитивный подход, обратить свое внимание на, склонность, постоянно совершенствующийся, возрастная психология, с раннего детства до старости, всю жизнь, затрагивать, черты характера, генетическое наследование, охватывать весь спектр, диагностирование и лечение психических заболеваний, устоявшийся, исследование разнообразия.

Exercise 8. Match the words 1-8 with the definitions A-H.

1. cognitive therapy	a) the process by which an individual selects, organizes and interprets stimuli into a meaningful and coherent picture of the world
2. perception	b) enthusiasm for doing something.
3. infancy	c) to think about, talk about, or study something, or to experience it, in order to find out more about it
4. motivation	d) to affect or change how someone or something develops, behaves, or thinks.

5.	to influence	e)	behavior that follows the usual standards that are expected by a group or society
6.	to explore	f)	a type of psychotherapy that focuses on changing a person's thinking.
7.	conformity	g)	a quality which you are born with, or which is present naturally.
8.	innate	h)	the time when someone is a baby or a very young child.

Exercise 9. Match the words from two lines to make word combinations.
1. developmental   therapy
2. holistic   beliefs
3. cognitive   phenomena
4. personal   approach
5. long-standing   mind
6. human   psychology
7. biological   feelings
8. instinctive   traits

GRAMMAR EXERCISES

Exercise 10. Find the sentences with the Past Perfect in the text and translate them into the Russian language.

Exercise 11. Open the brackets and use the verbs in Past Simple or Past Perfect.
1. He never _____ (to know) what he _____ (to achieve) in psychology.
2. My friend _____ (to sit) at a table with his daughter, who _____ (to study) psychology in Zurich.
3. By the late 1970s, cognitive psychology _____ (to overthrow) behaviorism, and with the new regime _____ (to come) a whole new language for talking about the brain.

4.   Psychology _____ (can) participate in the cognitive revolution until it _____ (to free) itself from behaviorism, thus restoring cognition to scientific respectability.

5.   What we _____ (to do) is we _____ (to look) at a big sample of kids and we _____ (to look) at those that _____ (to have) trauma during the past year.

6.   The women also _____ (to fill) in a questionnaire about how their child _____ (to behave) in the previous two months.

7.   At the end of the follow-up, people who _____ (to receive) CBT-based psychological therapy _____ (to be) less likely to mental illnesses.

8.   Dr. Spock _____ (to be) a pediatrician who _____ (to study) psychoanalysis in order to understand children's needs.

9.   The study also _____ (to find) that those who _____ (to have) childhood trauma _____ (to be) biologically 1.06 years older, on average, than people who _____ (not to experience) trauma.

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 12. Answer the questions.
1.   What were Gestalt psychologists interested in?
2.   What did cognitive therapy lead to?
3.   What did psychology concentrate on in its early stage? What did it study then?
4.   When did social psychology gather pace?
5.   What does developmental psychology learn?
6.   What did psychologists examine in the psychology of difference?
7.   What is the essence of "nature versus nurture"?
8.   What sciences does psychology overlap with?

Exercise 12. Say whether the statements are true or false. Give reasons.
1.   Scientific study of behavior marked the beginning of cognitive psychology.
2.   Gestalt psychologists were interested in studying change the way people form attachment.
3.   Psychotherapy was also influenced by the cognitive approach.
4.   Initially developmental psychology concerned only with childhood development.

5. Studying human uniqueness was recognized as a field in its own right in the early 19th century.

6. The "nature versus nurture" argument continues to this day.

7. Some of the ideas explored in psychology confirm our instinctive feelings.

Exercise 13. Translate the following sentences from Russian into English.

1. Положения гештальт психологии противопоставлены и бихевиоризму.

2. Значение игры для психического развития детей дошкольного возраста многосторонне.

3. Природа против воспитания – это стало темой горячих дебатов среди учёных, занимающихся исследованием поведения и развития личности.

4. Перспективы – разобраться в механизмах ассоциативного научения, без которых обсуждение высших когнитивных процессов является бессмысленным.

5. Когнитивная терапия – это быстродействующая технология изменения настроения, которую вы можете научиться применять самостоятельно.

6. Именно поэтому у большинства людей работает механизм забывания.

7. Необходимость развивать интеллект сегодня особенно актуальна ещё и потому, что мы живём в информационную эпоху.

8. Конформность предполагает согласие с теми, кто имеет аналогичный социальный статус.

9. При восприимчивой матери и надёжной привязанности ребёнка развитие идёт оптимально.

Exercise 14. Think of the examples when people find closure and discuss them with your partner.

Exercise 15. Render the article from Ex.3 on p. 13. Follow the plan in the Appendix 1

TEXT 3.

PHILOSOPHICAL ROOTS OF PSYCHOLOGY

PRE-READING

Exercise 1. Study the vocabulary before reading the text.

conscious awareness [ˈkɒnʃəs əˈweənəs] – сознательное понимание

to encompass [ɪnˈkʌmpəs] – заключать в себе

mental image – мыслеобраз; умственный образ

to repulse [rɪˈpʌls] – отражать, опровергать

threshold of consciousness [ˈθreʃhəʊld ɒv ˈkɒnʃəsnəs] - порог сознания

to repel [rɪˈpel] – отталкивать, отгонять

to stem – происходить, обусловить

self-awareness [ˌself əˈweənəs] – самосознание

disavowal [ˌdɪsəˈvaʊəl] – отрицание

hysteria [hɪˈstɪəriə] – истерия

contortion [kənˈtɔːʃn] – извивание, скручивание

paralysis [pəˈræləsɪs] – парализованность

convulsion [kənˈvʌlʃn] – судороги

acting out behavior – внешнее поведение, обусловленное

подсознательными мотивами

psyche [ˈsaɪki] – психика

psychiatry [saɪˈkaɪətri] – психиатрия

dementia [dɪˈmenʃə] – деменция

schizophrenia [ˌskɪtsəˈfriːniə] – шизофрения

withdrawal – отчуждение

paranoia [ˌpærəˈnɔɪə] – паранойя

persecution [ˌpɜːsɪˈkjuːʃn] – преследование

hebephrenia [ˌhiːbɪˈfriːnɪə] – гебефрения

catatonia [ˌkætəˈtəʊniə] – кататония

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.

1.   What do you know about philosophical roots of psychology?
2.   Define the concept "emotional state"?
3.   What is despair?

4.   How was hysteria defined from its inception?
5.   What are the signs and symptoms of schizophrenia?

Exercise 3. Read, translate the article and be ready to do the exercises.
Philosophical roots of psychology
Concepts become forces when they resist one another
Johann Friedrich Herbart (1776-1841)

Johann Herbart was a German philosopher who wanted to investigate how the mind works—in particular, how it manages ideas or concepts. Given that we each have a huge number of ideas over the course of our lifetime, how do we not become increasingly confused? It seemed to Herbart that the mind must use some kind of system for differentiating and storing ideas. He also wanted to account for the fact that although ideas exist forever (Herbart thought them incapable of being destroyed), some seem to exist beyond our conscious awareness. The 18th century German philosopher Gottfried Leibniz was the first to explore the existence of ideas beyond awareness, calling them petite ("small") perceptions. As an example, he pointed out that we often recall having perceived something—such as the detail in a scene—even though we are not aware of noticing it at the time. This means that we perceive things and store a memory of them despite the fact that we are unaware of doing so.

Dynamic ideas

According to Herbart, ideas form as information from the senses combines. The term he used for ideas—Vorsfellung—encompasses thoughts, mental images, and even emotional states. These make up the entire content of the mind, and Herbart saw them not as static but dynamic elements, able to move and interact with one another. Ideas, he said, can attract and combine with other ideas or feelings, or repulse them, rather like magnets. Similar ideas, such as a color and tone, attract each other and combine to form a more complex idea.

However, if two ideas are unalike, they may continue to exist without association. This causes them to weaken over time, so that they eventually sink below the "threshold of consciousness." Should two ideas directly contradict one another, "resistance occurs" and "concepts become forces when they resist one another." They repel one another with an energy that propels one of them beyond consciousness, into a place that Herbart referred to as "a state of tendency;" and we now know as "the unconscious."

Herbart saw the unconscious as simply a kind of storage place for weak or opposed ideas. In positing a two-part consciousness, split by a distinct threshold, he was attempting to deliver a structural solution for the management of ideas in a healthy

mind. But Sigmund Freud was to see it as a much more complex and revealing mechanism. He combined Herbart's concepts with his own theories of unconscious drives to form the basis of the 20th-century's most important therapeutic approach: psychoanalysis.

Be that self which one truly is
Søren Kierkegaard (1813–1855)

The fundamental question, "Who am I?" has been studied since the time of the ancient Greeks. Socrates (470–399 BCE) believed the main purpose of philosophy is to increase happiness through analyzing and understanding oneself. Søren Kierkegaard's book The Sickness Unto Death (1849) offers self-analysis as a means to understanding the problem of "despair," which he considered to stem not from depression, but rather from the alienation of the self.

Kierkegaard described several levels of despair. The lowest, and most common, stems from ignorance: a person has the wrong idea about what "self" is, and is unaware of the existence or nature of his potential self. Such ignorance is close to bliss, and so inconsequential that Kierkegaard was not even sure it could be counted as despair. Real desperation arises, he suggested, with growing self-awareness, and the deeper levels of despair stem from an acute consciousness of the self, coupled with a profound dislike of it. When something goes wrong, such as failing an exam to qualify as a doctor, a person may seem to be despairing over something that has been lost. But on closer inspection, according to Kierkegaard, it becomes obvious that the man is not really despairing of the thing (failing an exam) but of himself. The self that failed to achieve a goal has become intolerable. The man wanted to become a different self (a doctor), but he is now stuck with a failed self and in despair.

Abandoning the real self

Kierkegaard took the example of a man who wanted to become an emperor, and pointed out that ironically, even if this man did somehow achieve his aim, he would have effectively abandoned his old self. In both his desire and accomplishment, he wants to "be rid of" his self. This disavowal of the self is painful: despair is overwhelming when a man wants to shun himself—when he "does not possess himself; he is not himself."

However, Kierkegaard did offer a solution. He concluded that a man can find peace and inner harmony by finding the courage to be his true self, rather than wanting to be someone else. "To will to be that self which one truly is, is indeed the opposite of despair," he said. He believed that despair evaporates when we stop denying who we really are and attempt to uncover and accept our true nature.

Kierkegaard's emphasis on individual responsibility, and the need to find one's true essence and purpose in life, is frequently regarded as the beginning of existentialist philosophy. His ideas led directly to R.D. Laing's use of existential therapy, and have influenced the humanistic therapies practiced by clinical psychologists such as Carl Rogers.

The laws of hysteria are universal
Jean Martin Charcot (1825-1893)

Known as the founder of modern neurology, French physician Jean-Martin Charcot was interested in the relationship between psychology and physiology. During the 1860s and 1870s, he studied "hysteria," a term then used to describe extreme emotional behavior in women, thought to be caused by problems with the uterus (hystera in Greek). Symptoms included excessive laughing or crying, wild bodily movements and contortions, fainting, paralysis, convulsions, and temporary blindness and deafness.

From observing thousands of cases of hysteria at the Salpêtrière Hospital in Paris, Charcot defined "The Laws of Hysteria," believing that he understood the disease completely. He claimed that hysteria was a lifelong, inherited condition and its symptoms were triggered by shock. In 1882, Charcot stated: "In the [hysterical] fit… everything unfolds according to the rules, which are always the same; they are valid for all countries, for all epochs, for all races, and are, in short, universal."

A peculiar destruction of the internal connections of the psyche
Emil Kraepelin (1856-1929)

German physician Emil Kraepelin believed that the origins of most mental illnesses are biological, and he is often regarded as the founder of modern medical psychiatry. In his Textbook of Psychiatry, published in 1883, Kraepelin offered a detailed classification of mental illnesses, including "dementia praecox," meaning "early dementia," to distinguish it from late-onset dementia, such as Alzheimer's.

Schizophrenia

In 1893, Kraepelin described dementia praecox, now called schizophrenia, as consisting "of a series of clinical states which hold as their common a peculiar destruction of the internal connections of the psychic personality." He observed that the illness, characterized by confusion and antisocial behavior, often starts in the late teens or early adulthood.

Kraepelin later divided it into four subcategories. The first, "simple" dementia, is marked by slow decline and withdrawal. The second, paranoia, manifests in patients as a state of fear and persecution; they report being "spied upon" or "talked about." The third, hebephrenia, is marked by incoherent speech, and often by inappropriate emotional

reactions and behavior, such as laughing loudly at a sad situation. The fourth category, catatonia, is marked by extremely limited movement and expression, often in the form of either rigidness, such as sitting in the same position for hours, or excessive activity, such as rocking backward and forward repeatedly. Kraepelin's classification still forms the basis of schizophrenia diagnosis. In addition, postmortem investigations have shown that there are biochemical and structural brain abnormalities, as well as impairments of brain function, in schizophrenia sufferers. Kraepelin's belief that a great number of mental illnesses are strictly biological in origin exerted a lasting influence on the field of psychiatry, and many mental disorders are still managed with medication today.

(The Psychology Book, 2012, p.24-27, 30-31).

VOCABULARY EXERCISES

Exercise 4. Read the definition and guess the word.

1. _____ - a thought or suggestion as to a possible course of action.

2. _____ - the minimum above which stimuli enter awareness, characterized in terms of stimulus intensity, duration, and relevance. The threshold concept has been applied to memory and mood as well as to sensory stimulation.

3. _____ - the emotion or feeling of hopelessness, that is, that things are profoundly wrong and will not change for the better

4. _____ - the totality of the individual, consisting of all characteristic attributes, conscious and unconscious, mental and physical.

5. _____ - an involuntary, generalized, and violent muscular contraction, in some cases tonic (contractions without relaxation) and in others clonic (alternating contractions and relaxations of skeletal muscles).

6. _____ - an involuntary, generalized, and violent muscular contraction, in some cases tonic (contractions without relaxation) and in others clonic (alternating contractions and relaxations of skeletal muscles).

7. _____ - a psychotic disorder characterized by disturbances in thinking (cognition), emotional responsiveness, and behavior, with an age of onset typically between the late teens and mid-30s.

8. _____ - in psychology, the mind in its totality, as distinguished from the physical organism.

9. _____ - disorganized schizophrenia.

10. _____ - the period of human development in which full physical growth and maturity have been achieved and certain biological, cognitive, social, personality, and other changes associated with the aging process occur.

Exercise 5. Find English equivalents of the following word combinations in the text.

На протяжении, сложная идея, противоречить друг другу, терапевтический подход, достигнуть поставленной цели, оставить старое «я», предлагать решение, истинная суть, взаимосвязь между психологией и физиологией, слепота и глухота, врожденное состояние, вызваны шоковыми потрясениями, распространяться на, ранняя деменция, ряд клинических состояний, раскачиваясь взад и вперед, аномалии мозга

Exercise 6. Make nouns from these words and write them in the correct column. Make any other small changes necessary to form nouns.

-ment	-ness	-er	-ity	-ist	-ance/ence	-sion/tion

To exist, philosophy, deaf, to associate, blind, conscious, to resist, aware, to solve, happy, to manage, psychology, to ignore, ill, to found, rigid, desperate, to inspect, to accomplish, responsible, to destruct, to classify, to connect, personal, to persecute, to move, to express, to investigate, abnormal, to impair, to suffer.

Exercise 7. Write a word in each gap formed from the given one.

Adult, aware, emotion, consequential, conscious, tolerable, avowal, to cover, frequent, complete.

1.   Sadly, more _____ commentary followed.
2.   We are _____ what the origins of Van Gogh's mental illness were.
3.   Traditional individual therapy _____ addresses the person's inner psyche in order to create change in relationships and other features of life.
4.   Bullies are often people who have a very sensitive core _____ psyche and they are trying to protect that core.
5.   In _____ developmental trauma can manifest in many ways which are not obviously connected with earlier experiences.
6.   If you're five, that is _____ normal behavior.
7.   He also believed in a collective _____ .

8. Specially trained therapists can help _____ the mental causes of obesity and obesity-promoting behaviors and patterns.

9. There has been strong support of this decision from representatives and essentially no _____ .

10. Our knowledge of prolonged, complete sleep deprivation in humans is limited because _____ psychological effects such as hallucination and paranoia take hold long before the more severe physical symptoms.

Exercise 8. Make up verb phrases. Write down your own sentences using the phrases:

1.	manages	a)	beyond our conscious awareness
2.	to exist	b)	denying who we really are
3.	encompasses	c)	it into four subcategories
4.	stems	d)	over something
5.	to be despairing	e)	of hysteria's status as a physical illness
6.	to achieve	f)	emotional state
7.	stop	g)	ideas or concepts
8.	was convinced	h)	a goal
9.	divided	i)	in patients as a state of fear
10.	manifests	j)	from ignorance

GRAMMAR EXERCISES

Exercise 9. Find the examples of Direct Speech in the text and rewrite the sentences in Reported Speech.

Exercise 10. Rewrite the quotations in Reported Speech.

1. "We are what we are because we have been what we have been, and what is needed for solving the problems of human life and motives is not moral estimates but more knowledge." –Sigmund Freud
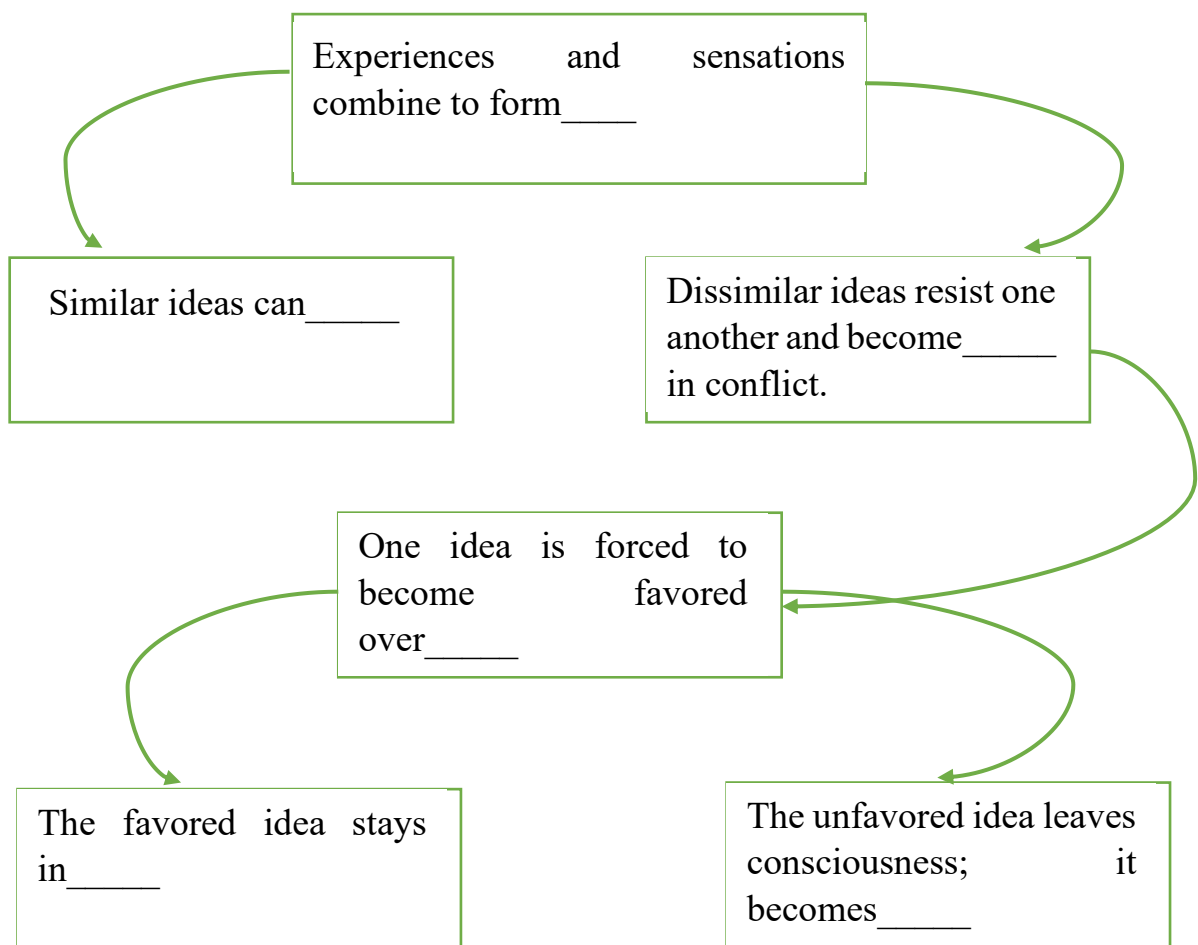
2. "The highest and most beautiful things in life are not to be heard about, nor read about, nor seen but, if one will, are to be lived." –Soren Kierkegaard

3. "Even a happy life cannot be without a measure of darkness, and the word happy would lose its meaning if it were not balanced by sadness." –Carl Gustav Jung

4. "The pendulum of the mind oscillates between sense and nonsense, not between right and wrong." –Carl Gustav Jung

5. "Life doesn't make any sense without interdependence. We need each other, and the sooner we learn that, the better for us all." –Erik Erikson

6. "Once you start making the effort to 'wake yourself up'—that is, be more mindful in your activities—you suddenly start appreciating life a lot more." –Robert Biswas-Diener

7. "Every person on this earth is full of great possibilities that can be realized through imagination, effort, and perseverance." –Scott Barry Kaufmann

8. "The truth is, bad things don't affect us as profoundly as we expect them to. That's true of good things, too. We adapt very quickly to either." –Daniel Gilbert

9. "Be content with what you have. Rejoice in how things are. When you realize there is nothing lacking the whole world belongs to you." –Lao Tzu

10. "We forget very easily what gives us pain." –Graham Greene

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 11. Complete the chart.

Experiences and sensations combine to form____

Similar ideas can_____

Dissimilar ideas resist one another and become_____ in conflict.

One idea is forced to become favored over_____

The favored idea stays in_____

The unfavored idea leaves consciousness; it becomes_____

Exercise 12. Answer the questions.
1.   What did J.F. Herbart investigate?
2.   What can ideas do according to J.F. Herbart?
3.   What is the unconscious according to J.F. Herbart?
4.   Who offers self-analysis as a means to understanding the problem of "despair,"?
5.   How many levels of despair did S. Kierkegaard describe?
6.   When did J.M. Charcot study "hysteria"?
7.   What are "The Laws of Hysteria"?
8.   What is schizophrenia characterized by?
9.   How many subcategories did E. Kraepelin divide schizophrenia into?

Exercise 13. Translate the following sentences from Russian into English.
1.   Шизофрения является причиной 39,9% случаев от общего числа инвалидов по психическим заболеваниям.
2.   Ментальные ловушки часто остаются ниже порога сознания именно таким образом.
3.   Подростковый период – это период, для которого характерна начинающаяся активная работа над собой, это период формирования нравственного сознания, идеалов, период развития самосознания личности.
4.   Есть ли в человеке какие-то качества или инстанции, которые могут управлять идеями благотворным для него образом?
5.   Взаимопонимание – одна из основ терапевтического подхода.
6.   Многим удастся обрести внутреннюю гармонию и спокойствие, а это – залог хорошего психологического и физического состояния.
7.   Мама будет ассоциироваться с одним языком, папа – с другим, и это послужит залогом здоровой психики ребёнка.
8.   Паранойя встречается у 0,02—0,1 % больных, поступивших в психиатрическую больницу.
9.   Образ восприятия существует только тогда, когда объект находится перед глазами малыша, умственный образ появляется тогда, когда самого объекта перед ребёнком нет.

Exercise 14. Choose one of the topics and make a report, present in the front of the class.
1.   Dementia
2.   Paranoia

3. Hebephrenia

4. Catatonia

Exercise 15. Render the article from Ex.3 on p. 21. Follow the plan in the Appendix 1

TEXT 4.

SCHOOLS OF PSYCHOLOGY: MAIN SCHOOLS OF THOUGHT

PRE-READING

Exercise 1. Study the vocabulary before reading the text.

structuralism [ˈstrʌktʃərəlɪzəm] – структурализм

to advocate [ˈædvəkeɪt] – защищать, отстаивать

vie [vaɪ] – соперничать, состязаться

eclectic [ɪˈklektɪk] – эклектический

functionalism [ˈfʌŋkʃənəlɪzəm] - функционализм

outlook [ˈaʊtlʊk] – точка зрения, взгляд, мировоззрение

molecular approach – молекулярный подход

holism [ˈhəʊlɪzəm, ˈhɒlɪzəm] – целостность

optical phenomenon [ˈɒptɪkl fəˈnɒmɪnən] – оптическое явление

phi phenomenon [faɪ fəˈnɒmɪnən] – видимое движение

classical conditioning – классическое формирование условных рефлексов

operant conditioning – оперантное научение

behavioral training – обучение навыкам поведения

token economy [ˈtəʊkən] – жетонная система вознаграждения

aversion therapy [əˈvɜːʃn] – лечение посредством выработки условнорефлекторной реакции отвращения

neo-Freudian [niːəʊ ˈfrɔɪdiən] – неофрейдист

innermost [ˈɪnəməʊst] – глубочайший

transcendent [trænˈsendənt] – превосходящий

positive psychology – позитивная психология

to fulfill – выполнять, осуществлять

to align with [əˈlaɪn] – примыкать к, присоединяться к

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.

1.   Do you know what the main schools of psychology are? List them.
2.   What school of thought used molecular approach? What is the essence of this approach?
3.   Are there any Russian scientists that contribute to psychology?
4.   Which school of psychology is the newest?
5.   Who are the main representatives of Gestalt psychology?

Exercise 3. Read, translate the article and be ready to do the exercises.

Schools of psychology: main schools of thought

When psychology first emerged as a science separate from biology and philosophy, the debate over how to describe and explain the human mind and behavior began. The different schools of psychology represent the major theories within the field of psychological science.

The first school of thought, structuralism, was advocated by the founder of the first psychology lab, Wilhelm Wundt. Almost immediately, other theories began to emerge and vie for dominance.

The main schools of psychology are structuralism, functionalism, Gestalt, behaviorism, psychoanalysis, humanism, and cognitivism.

In the past, psychologists often identified themselves exclusively with one single school of thought. Today, most psychologists have an eclectic outlook on psychology. They often draw on ideas and theories from different schools rather than holding to any singular perspective.

The structuralist school of psychology

Structuralism is widely regarded as the first school of thought in psychology. Major thinkers associated with structuralism include Wilhelm Wundt and Edward Titchener.

The focus of structuralism was on reducing mental processes down into their most basic elements. The structuralists used techniques such as introspection to analyze the inner processes of the human mind.

The introspective experimental technique used by the structuralists involved having trained observers examine their inner responses. Using this approach, also known as experimental self-observation, experimenters like Wundt trained people to analyze their thoughts as carefully and objectively as possible.

While these methods were understandably not the most empirically rigorous, the structuralist school of thought played an important role in the development of experimental psychology.

The functionalist school of psychology

Functionalism formed as a reaction to the theories of the structuralist school of thought and was heavily influenced by the work of William James. It functioned on the mind's functions and adaptations.

Instead of focusing on the mental processes themselves, functionalist thinkers were interested in the role that these processes play. In a functionalist approach, for example, instead of trying to understand the underlying processes that cause mental states, the focus would be on understanding the function that those states serve. Gaining a better understanding of the purpose would allow psychologists to better understand how the mind allows people to respond and adapt to their environments.

The functionalist school was interested in the purpose of thoughts and behaviors, whereas structuralism was concerned with the elements that make up consciousness. While functionalism largely disappeared as a school of thought, its influence persisted in applied psychology, behaviorism, and educational psychology.

Unlike some of the other well-known schools of thought in psychology, functionalism is not associated with a single dominant theorist. Instead, a number of functionalist thinkers are associated with this outlook, including John Dewey, James Rowland Angell, and Harvey Carr.

Some historians have questioned whether functionalism should be considered a formal school of psychology, given its lack of a central leader or formalized ideas.

The Gestalt school of psychology

Gestalt psychology was a school of psychology based upon the idea that people experience things as unified wholes. This approach to psychology began in Germany and Austria during the late 19th century in response to the molecular approach of structuralism. Some thinkers associated with the Gestalt school of thought included Max Wertheimer, Wolfgang Köhler, and Kurt Koffka.

Instead of breaking down thoughts and behavior to their smallest elements, the gestalt psychologists believed that you must look at the whole of experience. According to Gestalt thinkers, the whole is greater than the sum of its parts, a philosophy known as holism.

Some examples of Gestalt thinking include explanations for optical phenomena, such as visual illusions. Wertheimer described the phi phenomenon by observing how alternating railway lights created the illusion of movement. The phenomenon suggests that a succession of images seen in rapid sequence are perceived as moving.

The Behaviorist school of psychology

Behaviorism became a dominant school of thought during the 1950s. It was based upon the work of thinkers such as John B. Watson, Ivan Pavlov, and B. F. Skinner.

Behaviorism suggests that all behavior can be explained by environmental causes rather than by internal forces. Behaviorism is focused on observable behavior. Examples of behavioral theories that emerged during this time include:

Classical conditioning: This is a type of learning that involves associating a previously neutral stimulus with a stimulus that naturally and automatically triggers a response. For example, pairing the sound of a bell with the presentation of food. After an association is formed, the previously neutral stimulus will produce the same response as the natural stimulus.

Operant conditioning: This type of learning involves using rewards and punishments to create an association between the behavior and the consequences of that behavior.

The behavioral school of psychology significantly influenced the course of psychology. Many ideas and techniques that emerged from this school of thought are still widely used today. Behavioral training, token economies, aversion therapy, and other methods are frequently used in psychotherapy and behavior modification programs.

The psychoanalytic school of psychology

Psychoanalysis is a school of psychology founded by Sigmund Freud. This school of thought emphasized the influence of the unconscious mind on behavior. Other major psychoanalytic thinkers included Anna Freud and Otto Rank and neo-Freudians such as Erik Erikson, Alfred Adler, and Karen Horney.

Freud believed that the human mind was composed of three elements: the id, ego, and superego. The id consists of primal urges. The ego is the component of personality charged with dealing with reality. The superego is the part of the personality that holds all the ideals and values we internalize from our parents and culture. Freud believed that the interaction of these three elements was what led to all of the complex human behaviors.

Other important theories within the psychoanalytic school included the idea of the conscious and unconscious, Freud's psychosexual approach to personality development, and the concept of life and death instincts.

Freud's work also played an important role in the development of talk therapy as an approach to treating mental illness. Many traditional Freudian approaches to treatment are no longer in favor, but modern psychoanalytic therapy continues to play

an important role in psychology today. Research has shown that using self-examination can play an important role in emotional growth.

Freud's school of thought was enormously influential, but also generated considerable debate. This controversy existed not only in his time but also in modern discussions of Freud's theories.

The humanistic school of psychology

Humanistic psychology developed as a response to psychoanalysis and behaviorism. The development of this school of thought in psychology was heavily influenced by the work of humanist thinkers such as Abraham Maslow, Carl Rogers, and Clark Moustakas.

While early schools of thought were primarily centered on abnormal human behavior, humanistic psychology differed considerably in its emphasis on helping people achieve and fulfill their potential. Humanistic psychology instead focused on topics such as:

1.   *Becoming a fully functioning person:* A person who is in touch with their innermost desires and trusts their own instincts.

2.   *Individual free will:* The capacity that individuals have to make choices, select courses of action, and control their own lives.

3.   *Hierarchy of needs:* A theory introduced by Maslow suggesting that people were motivated by a series of increasingly complex needs, starting with their basic physiological needs up to the need to achieve an individual's full potential.

4.   *Peak experiences:* Moments of pure, transcendent joy that play an important part in the reaching self-actualization.

5.   *Self-actualization:* A state of reaching one's full potential

Humanistic psychology remains quite popular today and has significantly influenced other areas of psychology including positive psychology. This particular branch of psychology is centered on helping people live happier, more fulfilling lives.

The cognitive school of psychology

Cognitive psychology is the school of psychology that studies mental processes, including how people think, perceive, remember and learn. As part of the larger field of cognitive science, this branch of psychology is related to other disciplines such as neuroscience, philosophy, and linguistics.

Cognitive psychology emerged during the 1950s, partly as a response to behaviorism. Critics of behaviorism noted that it failed to account for how internal processes impacted behavior.

Examples of theories that grew out of the cognitive school of thought include:

Stages of cognitive development: A theory proposed by Jean Piaget, which suggested that children go through a series of progressive stages of intellectual development.

Sociocultural theory: This theory, introduced by Lev Vygotsky, looked at how the interaction of cultural and social factors contributed to cognitive development.

Informational processing theory: This theory suggests that the mind functions much like a computer to process and interpret information about the world.

Cognitive-behavioral therapy (CBT) was also heavily influenced by this psychological perspective. CBT is an approach to treatment that focuses on how automatic negative thought patterns influence behavior and psychological problems.

This period is sometimes referred to as the "cognitive revolution" as a wealth of research on information processing, language, memory, and perception began to emerge.

Today, many psychologists do not align themselves solely with a single school of thought. Instead, they may take a more eclectic approach, drawing upon many different perspectives and theoretical backgrounds.

(Retrieved from https://www.verywellmind.com/psychology-schools-of-thought-2795247.)

VOCABULARY EXERCISES

Exercise 4. Match the words with their opposites.

1.	separate	a)	to increase
2.	different	b)	minor
3.	major	c)	physical
4.	immediately	d)	to unite
5.	eclectic	e)	similar
6.	to reduce	f)	outer
7.	inner	g)	inexact
8.	objectively	h)	subjectively
9.	rigorous	i)	eventually
10.	mental	j)	specific

Exercise 5. Find the synonyms of the given words in the text.

Deliberately, crucial, to affect, a theorist, aim, prevailing, occurrence, inducement, outcome, treatment, impulse.

Exercise 6. Give English equivalents.

Соперничать за доминирование, научная школа, внутренняя реакция, строгий, адаптироваться к окружающей среде, задача мышления, составлять сознание, разложение поведения на мельчайшие части, запускать ответ, использование метода вознаграждения и наказания, влияние бессознательного на поведение, состоять из трех элементов, лечение психического заболевания, эмоциональный рост, реализовать свой потенциал, базовые психологические потребности, паттерн мышления, теоретическая основа.

Exercise 7. Complete the table. Guess the word or give the definition were necessary.

1)	a movement considered to be the first school of psychology as a science, independent of philosophy.
2) introspection	
3)	the process of attempting to directly access one's own internal psychological processes, judgments, perceptions, or states.
4) adaptation	
5)	any process that takes place in the mind
6) educational psychology	
7)	a general psychological approach that views mental life and behavior in terms of active adaptation to environmental challenges and opportunities.
8) approach	
9)	in classical conditioning, a stimulus that does not elicit a response of the sort to be measured as an index of conditioning.
10) superego	

Exercise 8. Write a word in each gap formed from the given one.

To punish, structure, to think, to develop, to found, psychology, immediate, to explain, care, behavior.

1.   Thus, _____ tests are tools that evaluate or measure the _____ characteristics of a subject.

2.   This time his work was _____ verified experimentally.

3.   Who was the _____ of psychology as a scientific discipline?

4.   Functionalism originated in the United States and initially coexisted with _____ .

5.   Carefully consider each _____ and each principle.

6.   He analyzes data _____ before making a decision.

7.   The _____ and behavior of children is assessed annually on a range of indicators.

8.   In order to clarify his point, Ouspensky would often draw geometric lines, planes, cubes and spheres as metaphorical _____ of the human psyche.

9.   When the use of physical _____ children can grow with the physical and psychological diseases.

10.   One technique that seems to help most people is _____ therapy.

Exercise 9. Circle the word that is different.
1.   structuralism/functionalism/behavior/psychoanalysis
2.   thinker/founder/leader/neo-Freudian
3.   id/ego/ego-ideal/superego
4.   therapy/will/perception/memory
5.   technique/theory/method/approach
6.   introspection/self-observation/self-examination/talk therapy

GRAMMAR EXERCISES

Exercise 10. Find the examples of Relative Clause (Defining or non-Defining) in the text and writhe them out.

Exercise 11. Join the sentences using relative pronouns which, who, where.
Example: *Watson set the stage for behaviorism. It soon rose to dominate psychology. – Watson set the stage for behaviorism, which soon rose to dominate psychology.*

1. The laws cannot be so stated, since the particulars themselves are what interests the psychologist. Psychology seeks these laws.

2. I saw a psychologist. He gave an anorexia diagnosis.

3. Neuropsychological testing is used in hospitals, clinics, private practices, and other places. Psychologists work with patients who are suspected of neuropsychological impairment in these places.

4. Meanwhile, women with children are at a rehabilitation centre in Mangystau Province. Psychologists and theologians are working with them there

5. Someone treats her kindly, with love and respect. But she might feel she isn't good enough for this person.

6. Unconscious phantasies play a considerable part in dreams. In my choice of examples for dream-interpretation I have, as far as possible, avoided those dreams.

7. It is said about a person. This person behaves very quietly for not to attract attention, or because of his nature.

8. The process takes place at a deeper level. At this level consciousness bridges invisible dimensional boundaries that reveal the appropriateness of the next moment.

9. These people memorize huge numbers. They always have a developed imagination.

10. This led him to develop his "talking cure". It revolutionized the interaction between patient and therapist.

Exercise 12. Are these relative clauses Defining (D) or Non-Defining (ND).

1. Watson set the stage for behaviorism, which soon rose to dominate psychology.

2. Unlike behaviorism, which focuses only on observable behaviors, cognitive psychology is concerned with internal mental states.

3. Find a counsellor or psychologist who will listen and be helpful.

4. UFHPTI has resident artists who offer art therapy in the main lobby and recently upgraded its recovery room to make it more child friendly.

5. Individuals who participate in Gestalt therapy often become more self-confident and happier as they learn to accept themselves, accept others, and take responsibility for their actions.

6. In general, patients who receive psychotherapy survived longer.

7. I practice existential therapy which is a type of depth psychotherapy.

8. Hypnotherapy is a special branch of psychotherapy, which uses hypnosis as a method to diagnose and cure certain ailments.

9.   As we know, medical research has lent some support to this assumption- for example, in cases where "mental disorders" can be shown to be the consequences of infections, metabolic disorders, or nutritional deficiencies.

10.   The best person to diagnose bipolar disorder is a psychiatrist, a specialist who cares for people with mental health disorders.

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 13. Answer the questions.
1.   What are the main schools of thought in psychology?
2.   What is the first school of thought in psychology?
3.   Which school of thought focused on reducing mental processes down into their most basic elements?
4.   Which school of thought do John Dewey, James Rowland Angell, and Harvey Carr belong to?
5.   When did the Gestalt school of psychology begin?
6.   What did the Gestalt psychologists believe?
7.   When did behaviorism became a dominant school of thought?
8.   What did psychoanalytic school of thought emphasize?
9.   What are three elements of the human mind according to S. Freud?
10.   What are the topics of humanistic psychology?
11.   What are the theories that grew out of the cognitive school of thought?

Exercise 14. Choose a, b or c.
1.   The first school of thought, structuralism was advocated by…
a)   Wilhelm Wundt
b)   Harvey Carr
c)   Max Wertheimer

2.   The structuralist used techniques such as….
a)   operant conditioning
b)   psychoanalysis
c)   introspection

3.   The focus in a functionalist approach is on…
a)   unconscious
b)   understanding the function that the mental states serve

c)   the elements that make up consciousness

4.   Gestalt psychology was a school of psychology based upon the idea that people experience things as…
a)   unified wholes
b)   broken down into their most basic elements
c)   both

5.   Behaviorism suggests that all behavior can be explained by…
a)   environmental causes
b)   inner forces
c)   unconscious mind

6.   One of the important theories within the psychoanalytic school is…
a)   stages of cognitive development
b)   the idea of the conscious and unconscious
c)   hierarchy of needs

7.   Carl Rogers is a thinker of…
a)   Cognitive school of psychology
b)   Gestalt school of psychology
c)   Humanistic school of psychology

8.   According to thinkers of cognitive school of psychology behaviorism failed to account for how …
a)   internal processes impacted behavior
b)   external processes impacted behavior
c)   external processes have more impact on behavior

Exercise 15. Translate the following sentences from Russian into English.
1.   Механизм формирования условных рефлексов проще объяснить на примере того, как образуются у нас страхи и фобии.
2.   Русская школа и бихевиоризм полагают, что роль врождённых форм поведения чрезвычайно мала.
3.   Суть оперантного научения заключается в том, чтобы установить ассоциативную связь между поведением и следствием этого поведения.

4.   Фрейдисты и неофрейдисты объяснили бы это наличием архетипа, который с древних времён запечатлён в нашем сознании и «программирует» на определённое поведение

5.   На моём университетском бейджике написано не "психолог", а "когнитивный нейробиолог".

6.   Известно, что многие современные исследователи считают интроспекцию ненаучным методом психологического исследования.

7.   Иными словами, жизнетворчество – наилучшая форма самореализации.

8.   Психоанализ ставит в центр психологических исследований бессознательные психические процессы и мотивации.

9.   Следует признать, что гуманистическая психология оказалась достаточно чуткой к проблемам своего времени.

10.   Вообще он сторонник эклектического подхода в психотерапии.

Exercise 16. Render the article from Ex.3 on p. 30. Follow the plan in the Appendix 1

TEXT 5.

WHAT WERE STRUCTURALISM VS. FUNCTIONALISM?

PRE-READING

Exercise 1. Study the vocabulary before reading the text.
to break away from – отделиться от
to misrepresent [ˌmɪsˌreprɪˈzent] – искажать, представлять в ложном свете
mentor [ˈmentɔ:(r)] – наставник
reliability [rɪˌlaɪəˈbɪləti] – надежность
reconciliation [ˌrekənsɪliˈeɪʃn] - сопоставление
aspersion [əˈspɜ:ʃnz] – критика, клевета
voluntarism [ˈvɒləntərɪzəm] – волюнтаризм
to scrap [skræp] – забраковать, отменять
to prioritize [praɪˈɒrətaɪz] – относить к числу приоритетных задач
prolific [prəˈlɪfɪk] – результативный, изобилующий
to be traced back to – восходить к

inception [ɪnˈsepʃn] – зарождение

psychological state – психологическое состояние

reinforcement theory [ˌriːɪnˈfɔːsmənt] – теория подкрепления

to pioneer [ˌpaɪəˈnɪə(r)] – положить начало

to make way into - проникнуть

to salivate [ˈsælɪveɪt] – вызвать слюноотделение

positive behavior support – поддержание положительного поведения

mental test – тест интеллекта

core goal [kɔː(r) ɡəʊl] – основная цель

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.
1. When did structuralism and functionalism emerge?
2. What is the difference between them?
3. Who is Wilhelm Wundt?
4. Who are representatives of functionalism?

Exercise 3. Read, translate the article and be ready to do the exercises.
What were structuralism vs. functionalism?
What was structuralism in psychology?

Structuralism emerged as the first school of thought in psychology. Wilhelm Wundt, the founder of the first experimental psychology lab, advocated some of the ideas associated with the structuralist school. Structuralism focused on breaking down mental processes into the most basic components. Researchers tried to understand the basic elements of consciousness using a method known as introspection.

One of Wundt's students, Edward B. Titchener, would later go on to formally establish and name structuralism, although he broke away from many of Wundt's ideas and at times even misrepresented the teachings of his mentor. Wundt's theories tended to be much more holistic than the ideas that Titchener later introduced in the United States.

Strengths of structuralism

Structuralism is important because it is the first major school of thought in psychology. The structuralist school also influenced the development of experimental psychology. While Wundt's work helped to establish psychology as a separate science and contributed methods to experimental psychology, Titchener's development of structuralism helped establish the very first "school" of psychology. Structuralism itself did not last long beyond Titchener's death.

Criticism of structuralism

By today's scientific standards, the experimental methods used to study the structures of the mind were too subjective—the use of introspection led to a lack of reliability in results. Other critics argue that structuralism was too concerned with internal behavior, which is not directly observable and cannot be accurately measured.

What was functionalism in psychology?

Other theories also surfaced to vie for dominance in psychology. In response to structuralism, an American perspective known as functionalism emerged from thinkers such as the evolutionist Charles Darwin and William James. Functionalists sought to explain mental processes in a more systematic and accurate manner. Other important functionalist thinkers included Edward Thorndike, John Dewey, Mary Whiton Calkins, Harvey Carr, Hermann Ebbinghaus, and John Angell.

Rather than focusing on the elements of consciousness, functionalism in psychology focused on the purpose of consciousness and behavior. Functionalism also emphasized individual differences, which had a profound impact on education.

Strengths of functionalism

Functionalism was an important influence on psychology. It influenced the development of behaviorism and applied psychology. Functionalism also influenced the educational system, especially with regards to John Dewey's belief that children should learn at the level for which they are developmentally prepared.

Criticism of functionalism

Functionalism was criticized perhaps most famously by Wundt. "It is literature. It is beautiful, but it is not psychology," he said of functionalist William James' book The Principles of Psychology.

Structuralism vs. functionalism

While these two schools of thought served as the foundation for the future developments of psychology, there were important differences between the two.

Structuralism	Functionalism
Focused on breaking things down to their smallest parts	Focused on how things worked together
Examined the capabilities of different parts of the mind	Examined how the mind functions in different environments
Used introspection to study feelings and sensations	Used objective techniques to explore memories and emotions

Influence on psychology

In 1906, Mary Whiton Calkins published an article in Psychological Review asking for a reconciliation between these two schools of thought. Structuralism and functionalism

were not so different, she argued, since both are principally concerned with the conscious self.

Despite this, each side continued to cast aspersions on the other. William James wrote that structuralism had "plenty of school, but no thought," while Wilhelm Wundt dismissed functionalism as "literature" as unscientific.

Eventually, both of these schools of thought lost dominance in psychology, replaced by the rise of behaviorism, psychoanalysis, humanism, and cognitive psychology through the beginning and middle part of the twentieth century.

The origins of structuralism in psychology

Was Wundt really the founder of this early school of thought? While Wundt is often listed as the founder of structuralism, he never actually used the term. Instead, Wundt referred to his ideas as *voluntarism*. It was his student, Edward B. Titchener, who invented the term *structuralism*.

Though Titchener is usually the one credited with the establishment of structuralism and bringing the ideas to America, the ideas started with Wundt. Titchener actually changed much of what Wundt taught. Wundt believed that the mind could be broken down into structures by classifying conscious experiences into small parts that could be analyzed, similar to other sciences. Titchener decided to scrap Wundt's brand of psychological study because conscious experiences aren't as easy to control in an experiment as behavior is. Rather than focusing on obtaining quantitative measurements, Titchener prioritized observation and analysis.

Introspection: structuralism's main tool

Titchener took Wundt's experimental technique, known as introspection, and used it to focus on the structures of the human mind. Anything that could not be investigated using this technique, Titchener believed, was not in the domain of psychology. Titchener believed that the use of introspection, which utilized observers who had been rigorously trained to analyze their feelings and sensations when shown a simple stimulus, could be used to discover the structures of the mind. He spent the bulk of his career devoted to this task.

Titchener's structuralism

Titchener's structuralism stressed three important tasks in the study of the human mind: 1. To discover how many processes there were, identify the elements of these processes, and explain how they work together. 2.To analyze the laws governing the connections between the elements of the mind. 3. To evaluate the connections between the mind and nervous system.

Titchener's influence

For approximately 20 years, Titchener dominated American psychology. He was also extremely prolific, publishing 216 books and papers during his lifetime. He trained a

number of influential psychologists, supervising the doctoral work of nearly 60 students including Margaret Floy Washburn and Edwin G. Boring. Yet today his work is rarely mentioned outside of a purely historical context. He maintained a powerful hold on American psychology during his lifetime and contributed to psychology becoming a respected branch of the sciences, but his influence began to wane following his death.

Structuralism may have enjoyed a brief period of dominance in psychology, but the school of thought essentially died out following the death of its founder.

The origins of functionalism in psychology

The origins of functionalism are traced back to William James, the renowned American psychologist of the late 19th century. James was heavily influenced by Darwin's theory of evolution, and was critical of the structural approach to psychology that had dominated the field since its inception. James argued that instead of focusing on the specific 'introspective' elements that make up our consciousness, psychology should consider the purpose of consciousness, psychological states, and behavior.

Although James is credited as being the first to advocate for a functional approach to psychology, the school of functionalism itself did not fully emerge until later in the 19th century, when scholars at the University of Chicago began to formalise the theory. It was here that John Dewey, Harvey A. Carr and James Rowland Angell would all develop functionalism, focusing especially on the biological and animal dimensions of learning and behavior. Another group of functionalists would emerge in Columbia University, most notably Edward Thorndike. Thorndike's work on reinforcement theory and behavior analysis provided the basis for the empirical laws that emerged under behaviorism later in the 20th century.

As functional psychology developed, so too did the field of experimental psychology. Most functionalists of the early 20th century also pioneered novel techniques in lab and field analyses of human and animal behavior. The experimental method in psychology has led to major breakthroughs in our understanding of the functional organization of our brains, as psychologists continue to use experiments to manipulate certain variables that may explain our behavior.

Consequences

Functionalism had an important influence on the trajectory of psychology from the 19th century onward. Once functionalism took off, most structuralist ideas – which had previously dominated the field – were disputed and didn't make their way into the modern psychology we know today. Most notably, functionalism led directly to the emergence of behaviorism in the mid 20th century, which views human behavior as a type of 'reflex' in response to external stimuli.

Famous behaviorists including B.F. Skinner and Iain Pavlov based many of their ideas around reinforcement learning and conditioning on the findings of functionalists. You've likely heard of Pavlov's famous classical conditioning experiment in which he conditioned dogs to salivate at the sound of a bell. That probably wouldn't have happened without functionalism, which was the starting point for studies that considered our mental processes and behavior as responses to external stimuli. The field of behaviorism and its practical application in Applied Behavior Analysis (which uses empirical approaches to encourage positive behavior) would go on to become a hugely popular philosophy in clinical psychology, and continues to be used today as an intervention for people with conditions such as autism, dementia and addiction.

Functionalism also had a direct influence on the education system in the US. This was largely due to John Dewey's theory that children should learn at the pace that best suits their level of intellectual development, and that the curriculum should encourage students to draw from their own interests and experiences. Functionalist and behaviorist ideas are also used in special education settings as tools for positive behavior support.

Finally, the experimental tradition that grew up alongside functionalism brought a wide range of research methods that are still used in modern psychology today. These include observation studies, physiological measures, mental tests, and questionnaires.

Controversies

Functionalism is sometimes considered the bridge between early structuralist-based ideas, and modern behaviorism. Naturally, it has received criticism from both schools of thought. At first, structuralists argued that functionalism did not fully define or attempt to understand the mental processes they were dealing with. Instead of trying to explain mental states and behaviors in the context of environmental stimuli, structuralists believed that psychologists should focus on introspection and understanding these aspects of consciousness for what they are. They also argued against the applied nature of functional psychology, believing that it distracted from the core goal of identifying the structures of consciousness.

Behaviorists in the mid-late 20th century would also take issue with some aspects of functionalism. While functionalists believed it was important to accept the role of consciousness and internal cognitions such as pre-existing beliefs, behaviorists were only concerned with the study of human behavior, and rejected any idea that did not view mental states as directly influenced by external stimuli.

(Retrieved from https://www.verywellmind.com/structuralism-and-functionalism-2795248, https://www.verywellmind.com/who-founded-structuralism-2795809)

VOCABULARY EXERCISES

Exercise 4. Complete the table with the appropriate word forms.

NOUN	ADJECTIVE	TRANSLATION
holism		
reliability		
doctor		
influence		
power		
biology		
experiment		
clinic		
intellect		
base		
science		
education		
history		
structure		
function		
environment		

Exercise 5. Give Russian equivalents.

Made an important contribution to, using a method known as, misrepresented the teachings, separate science, lack of, surfaced, had a profound impact on, conscious self, quantitative measurements, bulk of his career, breakthroughs, grew up alongside, applied nature, internal cognition, rejected any idea.

Exercise 6. Give English equivalents.

Основные составляющие сознания, скорее представляли собой, структура разума, внутреннее поведение, слишком увлечен, стремиться к, подчеркнуть индивидуальные особенности, относительно, по своему развитию готовы, пренебрежительно отзываться, которому приписывается, осознанное переживание, в области психологии, регулирующие связи между элементами, ослабевать, критически отзывалться о, новый метод, практическое применение, исследования по данным наблюдений, такими, какими они являются.

Exercise 7. Read the definition and guess the word.

1. _____ - to describe falsely an idea, opinion, or situation, often in order to get an advantage.

2. _____ - a system of scientific investigation, usually based on a design to be carried out under controlled conditions, that is intended to test a hypothesis and establish a causal relationship between independent and dependent variables.

3. _____ - the trustworthiness or consistency of a measure, that is, the degree to which a test or other measurement instrument is free of random error, yielding the same results across multiple applications to the same sample.

4. _____ - to give your full attention to what you are doing or to what is happening.

5. _____ - according to an agreed set of methods or organized plan.

6. _____ - traits or other characteristics by which individuals may be distinguished from one another.

7. _____ - an ability, talent, or facility that a person can put to constructive use.

8. _____ - specific information or a specific past experience that is recalled.

9. _____ - the process or experience of perceiving through the senses.

10. _____ - the system of neurons, nerves, tracts, and associated tissues that, together with the endocrine system, coordinates activities of the organism in response to signals received from the internal and external environments.

Exercise 8. Write a word in each gap formed from the given one.

science, function, to miss, power, holistic, intellect, to represent, biology, to cover, doctor.

1. Of course, diagnostics are important, and we need to be doing research into the _____ basis of mental illness.

2. Having someone to listen empathetically and guide your child toward understanding their anxiety can be _____ treatment.

3. By the beginning of the 20th century, 20 women had earned _____ degrees in psychology.

4. I am more intuitive than _____ .

5. The _____ approach emphasizes learning how to express oneself in everyday situations.

6. Adler argued for _____ , viewing the individual holistically rather than reductively, the latter being the dominant lens for viewing human psychology.

7. Diet before the test can _____ the results.

8. There are very easy ways to show that these claims are simply _____ nonsense.

9. Psychological findings do help explain why people believe or _____ conspiracy theories.

10. Answer to these simple questions and _____ the results.

Exercise 9. Match the words with their opposites.

1.	powerful	a)	to unite
2.	internal	b)	inaccurately
3.	basic	c)	external
4.	to break down	d)	to exclude
5.	long	e)	barely
6.	lack	f)	indirectly
7.	too	g)	plenty
8.	accurately	h)	additional
9.	directly	i)	powerless
10.	to include	j)	short

Exercise 10. Write negative forms of these words in the correct column.

in-	dis-	mis-	un-

Accurately, to miss, directly, to represent, to cover, scientific, important, conscious, formally, reliable, systematic, to behave, famous, capability, usual, similar, easy, to believe.

GRAMMAR EXERCISES

Exercise 11. Look at the bold verbs (to be, to do, to have). Circle the ones which are auxiliary and underline the ones which are main.

1. As functional psychology developed, so too **did** the field of experimental psychology.

2. Structuralism itself **did** not last long beyond Titchener's death.

3. Functionalist and behaviorist ideas **are** also used in special education settings as tools for positive behavior support.

4.   Structuralism and functionalism **were** the two earliest schools of thought in psychology.

5.   Functionalism also emphasized individual differences, which **had** a profound impact on education.

6.   Once functionalism took off, most structuralist ideas – which **had** previously dominated the field – were disputed and didn't make their way into the modern psychology we know today.

Exercise 12. Complete the sentences with the correct form of the auxiliary verb be, do or have.

1.   Research _____ found people lacking mental energy bounced back even when they just looked at pictures of nature.

2.   I like that it _____ written by a psychologist.

3.   How _____ you test your hypothesis?

4.   Some even thought they _____ found it.

5.   However, he _____ analyzing our thoughts.

Exercise 13. Complete the sentences with the correct form of the main verb be, do or have.

1.   The advantage of this hypothesis _____ (to be) that it _____ (to be) relatively easy to test it.

2.   I _____ (to have) three days to decide.

3.   What we _____ (to do) is self-explanatory.

4.   Of course, if we live mostly with positive emotions, we _____ (to be) physically and mentally healthier.

5.   It seems that every psychologist _____ (to have) a different testing approach.

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 14. Answer the questions.

1.   Can you explain the sentence "Functionalism is sometimes considered the bridge between early structuralist-based ideas, and modern behaviorism."?

2.   Who established and named structuralism?

3.   Why is structuralism so important?

4.   What method did structuralism use?

5.   Why was structuralism criticized?

6.	How did functionalists seek to explain mental processes?

7.	What are the strengths of functionalism?

8.	When did structuralism and functionalism lose dominance in psychology?

9.	How many tasks did Titchener's structuralism stress? What are they?

10.	What should psychology consider according to William James?

11.	What did John Dewey, Harvey A. Carr and James Rowland Angell focus on?

Exercise 15. Complete the table.

	Structuralism	Functionalism
Representatives		
They focused on		
They examined		
They used		
Influence on psychology		

Exercise 16. Translate the following sentences from Russian into English.

1.	Кроме того, такой анализ мог значительно исказить данные.

2.	Главная социально-психологическая проблема функционализма – проблема наиболее оптимальных условий социальной адаптации субъектов общественной жизни.

3.	Когда я учился на философском факультете, я интересовался исследованиями памяти.

4.	Сопровождаются ли разные эмоции разными процессами в вегетативной нервной системе?

5.	Как взаимодействуют между собой разные части разума?

6.	Психология исследует человеческую природу; следовательно, этика является прикладной психологией.

7.	Именно с такой направленностью сознания и поведения связан третий, высший уровень нравственной культуры личности.

8.	Современные исследования пытаются повысить надёжность данных интроспекции, совершенствуя методику эксперимента.

9.	За время дошкольного периода второго этапа впервые возникают ростки произвольного положительного поведения.

10.	Во-первых, высокая предсказательная валидность теста интеллекта наблюдается для всех групп профессий без исключения.

Exercise 17. Choose one of the topics to make a report and present it in front of the class.
1. Autism
2. Dementia
3. Addiction

Exercise 18. Render the article from Ex.3 on p. 41. Follow the plan in the Appendix 1

TEXT 6.

WHAT IS BEHAVIORISM?

PRE-READING

Exercise 1. Study the vocabulary before reading the text.
acquired behavior [əˈkwaɪəd] – приобретенное поведение
stimulus [ˈstɪmjələs] – стимул
cognition [kɒgˈnɪʃn] – когнитивная деятельность
conditioning [kənˈdɪʃənɪŋ] - выработка или образование условных реакций
penchant [pɒnʃɒn] – расположенность
measurable science – измеряемая наука
classical conditioning - классическое формирование условных рефлексов
learned behavior – поведение, приобретенное в результате научения
conditioned response – условный рефлекс
naturally occurring – природного происхождения
trigger [ˈtrɪgə(r)] – триггер, некий внешний раздражитель
to elicit – извлекать, выявлять
extinction – затухание
to vanish – исчезать
to elapse [ɪˈlæps] – проходить
behavioral therapy – поведенческая терапия
behavioral intervention – поведенческое вмешательство
discreet trial training [dɪˈskriːt ˈtraɪəl] – обучение методом дискретных проб
one-dimensional approach – одномерный подход

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.

1. What is behaviorism?
2. Who are the main representatives of behaviorism?
3. What contribution did Ivan Pavlov make to behaviorism?
4. What is behavioral therapy?

Exercise 3. Read, translate the article and be ready to do the exercises.

What is behaviorism?

Behaviorism is a theory of learning based on the idea that all behaviors are acquired through conditioning, and conditioning occurs through interaction with the environment. Behaviorists believe that our actions are shaped by environmental stimuli.

In simple terms, according to this school of thought, also known as behavioral psychology, behavior can be studied in a systematic and observable manner regardless of internal mental states. Behavioral theory also says that only observable behavior should be studied, as cognition, emotions, and mood are far too subjective.

Strict behaviorists believe that any person—regardless of genetic background, personality traits, and internal thoughts— can be trained to perform any task, within the limits of their physical capabilities. It only requires the right conditioning.

History of behaviorism

Behaviorism was formally established with the 1913 publication of John B. Watson's classic paper, "Psychology as the Behaviorist Views It." It is best summed up by the following quote from Watson, who is often considered the father of behaviorism:

"Give me a dozen healthy infants, well-formed, and my own specified world to bring them up in and I'll guarantee to take any one at random and train him to become any type of specialist I might select—doctor, lawyer, artist, merchant-chief and, yes, even beggar-man and thief, regardless of his talents, penchants, tendencies, abilities, vocations, and race of his ancestors."

Simply put, strict behaviorists believe that all behaviors are the result of experience. Any person, regardless of their background, can be trained to act in a particular manner given the right conditioning.

From about 1920 through the mid-1950s, behaviorism became the dominant school of thought in psychology. Some suggest that the popularity of behavioral psychology grew out of the desire to establish psychology as an objective and measurable science.

During that time, researchers were interested in creating theories that could be clearly described and empirically measured, but also used to make contributions that might have an influence on the fabric of everyday human lives.

Types of behaviorism

There are two main types of behaviorism used to describe how behavior is formed.

Methodological behaviorism

Methodological behaviorism states that observable behavior should be studied scientifically and that mental states and cognitive processes don't add to the understanding of behavior. Methodological behaviorism aligns with Watson's ideologies and approach.

Radical behaviorism

Radical behaviorism is rooted in the theory that behavior can be understood by looking at one's past and present environment and the reinforcements within it, thereby influencing behavior either positively or negatively. This behavioral approach was created by the psychologist B.F. Skinner.

Classical conditioning

Classical conditioning is a technique frequently used in behavioral training in which a neutral stimulus is paired with a naturally occurring stimulus. Eventually, the neutral stimulus comes to evoke the same response as the naturally occurring stimulus, even without the naturally occurring stimulus presenting itself.

Throughout the course of three distinct phases of classical conditioning, the associated stimulus becomes known as the conditioned stimulus and the learned behavior is known as the conditioned response.

Learning through association

The classical conditioning process works by developing an association between an environmental stimulus and a naturally occurring stimulus.

In physiologist Ivan Pavlov's classic experiments, dogs associated the presentation of food (something that naturally and automatically triggers a salivation response) at first with the sound of a bell, then with the sight of a lab assistant's white coat. Eventually, the lab coat alone elicited a salivation response from the dogs.

Factors that impact conditioning

During the first part of the classical conditioning process, known as acquisition, a response is established and strengthened. Factors such as the prominence of the stimuli and the timing of the presentation can play an important role in how quickly an association is formed.

When an association disappears, this is known as extinction. It causes the behavior to weaken gradually or vanish. Factors such as the strength of the original response can play a role in how quickly extinction occurs. The longer a response has been conditioned, for example, the longer it may take for it to become extinct.

Operant conditioning

Operant conditioning, sometimes referred to as instrumental conditioning, is a method of learning that occurs through reinforcement and punishment. Through operant conditioning, an association is made between a behavior and a consequence for that behavior.

This behavioral approach says that when a desirable result follows an action, the behavior becomes more likely to happen again in the future. Conversely, responses followed by adverse outcomes become less likely to reoccur.

Consequences affect learning

Behaviorist B.F. Skinner described operant conditioning as the process in which learning can occur through reinforcement and punishment.[9] More specifically: By forming an association between a certain behavior and the consequences of that behavior, you learn.

For example, if a parent rewards their child with praise every time they pick up their toys, the desired behavior is consistently reinforced and the child will become more likely to clean up messes.

Timing plays a role

The process of operant conditioning seems fairly straightforward—simply observe a behavior, then offer a reward or punishment. However, Skinner discovered that the timing of these rewards and punishments has an important influence on how quickly a new behavior is acquired and the strength of the corresponding response.[9]

This makes reinforcement schedules important in operant conditioning. These can involve either continuous or partial reinforcement.

- **Continuous reinforcement** involves rewarding every single instance of a behavior. It is often used at the beginning of the operant conditioning process. Then, as the behavior is learned, the schedule might switch to one of partial reinforcement.

- **Partial reinforcement** involves offering a reward after a number of responses or after a period of time has elapsed. Sometimes, partial reinforcement occurs on a consistent or fixed schedule. In other instances, a variable and unpredictable number of responses or amount of time must occur before the reinforcement is delivered.

Uses for behaviorism

The behaviorist perspective has a few different uses, including some related to education and mental health.

Education

Behaviorism can be used to help students learn, such as by influencing lesson design. For instance, some teachers use consistent encouragement to help students learn (operant conditioning) while others focus more on creating a stimulating environment to increase engagement (classical conditioning)

Research

One of the greatest strengths of behavioral psychology is the ability to clearly observe and measure behaviors. Because behaviorism is based on observable behaviors, it is often easier to quantify and collect data when conducting research.

Mental health

Behavioral therapy was born from behaviorism and originally used in the treatment of autism and schizophrenia. This type of therapy involves helping people change problematic thoughts and behaviors, thereby improving mental health.

Effective therapeutic techniques such as intensive behavioral intervention, behavior analysis, token economies, and discrete trial training are all rooted in behaviorism. These approaches are often very useful in changing maladaptive or harmful behaviors in both children and adults.

Impact of behaviorism

Several thinkers influenced behavioral psychology. Among these are Edward Thorndike, a pioneering psychologist who described the law of effect, and Clark Hull, who proposed the drive theory of learning.

There are a number of therapeutic techniques rooted in behavioral psychology. Though behavioral psychology assumed more of a background position after 1950, its principles still remain important.

Even today, behavior analysis is often used as a therapeutic technique to help children with autism and developmental delays acquire new skills. It frequently involves processes such as shaping (rewarding closer approximations to the desired behavior) and chaining (breaking a task down into smaller parts, then teaching and chaining the subsequent steps together).

Other behavioral therapy techniques include aversion therapy, systematic desensitization, token economies, behavior modeling, and contingency management.

Criticisms of behaviorism

Many critics argue that behaviorism is a one-dimensional approach to understanding human behavior. They suggest that behavioral theories do not account for free will or internal influences such as moods, thoughts, and feelings.

Freud, for example, felt that behaviorism failed by not accounting for the unconscious mind's thoughts, feelings, and desires, which influence people's actions. Other thinkers, such as Carl Rogers and other humanistic psychologists, believed that behaviorism was too rigid and limited, failing to take into consideration personal agency.

More recently, biological psychology has emphasized the role the brain and genetics play in determining and influencing human actions. The cognitive approach to psychology focuses on mental processes such as thinking, decision-making, language, and problem-solving. In both cases, behaviorism neglects these processes and influences in favor of studying only observable behaviors.

Behavioral psychology also does not account for other types of learning that occur without the use of reinforcement and punishment. Moreover, people and animals can adapt their behavior when new information is introduced, even if that behavior was established through reinforcement.

(Retrieved from https://www.verywellmind.com/behavioral-psychology-4157183)

VOCABULARY EXERCISES

Exercise 4. Give Russian equivalents.

Shaped by environmental stimuli, internal mental states, far too subjective, regardless of genetic background, the fabric of everyday human lives, thereby influencing behavior either positively or negatively, original response, a consequence for that behavior, continuous or partial reinforcement, variable number, change problematic thoughts.

Exercise 5. Give English equivalents.

Личностная черта, взаимодействие с окружающей средой, физические способности, действовать определенным образом, как формируется поведение, нейтральный стимул, условный стимул, это известно как затухание, выработка инструментального условного рефлекса, неблагоприятный исход, подкрепление, использоваться первоначально в лечении, поведенческий анализ, задержка

психического развития, систематическая десенситизация, ситуационное управление, волевые качества, не желать учитывать.

Exercise 6. Match the words with their definitions.

emotion	partial reinforcement
methodological behavior	mood
cognitive process	reinforcement
action	cognition
conditioning	classical conditioning

1.   All forms of knowing and awareness, such as perceiving, conceiving, remembering, reasoning, judging, imagining, and problem solving. Along with affect and conation, it is one of the three traditionally identified components of mind.

2.   any short-lived emotional state, usually of low intensity

3.   a complex reaction pattern, involving experiential, behavioral, and physiological elements, by which an individual attempts to deal with a personally significant matter or event.

4.   the process by which certain kinds of experience make particular actions more or less likely.

5.   a form of behaviorism that concedes the existence and reality of conscious events but contends that the only suitable means of studying them scientifically is via their expression in behavior.

6.   any of the mental functions assumed to be involved in the acquisition, storage, interpretation, manipulation, transformation, and use of knowledge.

7.   a type of learning in which an initially neutral stimulus—the conditioned stimulus (CS)—when paired with a stimulus that elicits a reflex response—the unconditioned stimulus (US)—results in a learned, or conditioned, response (CR) when the CS is presented.

8.   in operant conditioning, a process in which the frequency or probability of a response is increased by a dependent relationship, or contingency, with a stimulus or circumstance.

9.   a self-initiated sequence of movements, usually with respect to some goal. It may consist of an integrated set of component behaviors as opposed to a single response.

10.   in operant or instrumental conditioning, any pattern of reinforcement in which only some responses are reinforced.

Exercise 7. Make up phrases.

	Verb		Noun
1)	to perform	a)	any type of specialist
2)	to become	b)	the response
3)	to establish	c)	contribution
4)	to make	d)	any task
5)	to evoke	e)	an important role
6)	to play	f)	psychology as an objective and measurable science
	Adjective		**Noun**
7)	environmental	g)	capability
8)	behavioral	h)	manner
9)	physical	i)	background
10)	genetic	j)	state
11)	mental	k)	stimuli
12)	observable	l)	psychology

Exercise 8. Study the derivatives of words and translate them.

1. to behave – to misbehave – behaved – behaving – behaver – behavior – behavioral – behaviorally – behaviorism – behaviorist – behavioristic.

2. to measure — to mismeasure – to remeasure – countermeasure – measured – measuredly – measurement – measurer – measureless.

3. to research – researching – researched – researcher – researchable – researchability – unresearched – coresearcher.

4. to develop – to redevelop – to codevelop – developed – developing – development – developmental – developmentally – developmentalism – developer – developable – developability – underdeveloped – overdeveloped – nondevelopment – maldevelopment – predevelopment.

5. to punish – punished – punishing – unpunished – punishment – punishable – punishability – punisher.

6. to educate – to miseducate – to reeducate – educate – educable – education – educational – educative – educator.

7. to adapt – to readapt – adapted – unadapted – adaptedness – adapting – adaptation – adaptive – adapter – adaptable – adaptability – adaption – adaptation – adaptational – adaptive – adaptively – adaptivity – adaptiveness – maladaptive – unadaptable – nonadaptive – preadaptation – coadaptation.

8. psychology – psychological – psychologist – to – psychologize.

9.   conscious – consciousness – preconscious – semiconscious – subconscious – unconscious.

10.   problem – subproblem – problematic – problematical – problematically – problematics – to problematize – problematization – unproblematic.

Exercise 9. Complete the sentences with the appropriate form of the words from exercise 8.

1.   Parents have the opportunity to consult on the issues of child-parent relationship, _____ psychology, or get professional help in solving problems.

2.   Several people suffered physical and psychological _____ .

3.   To resolve the problem, the _____ may suggest various forms of treatment including conditioning, behavior modification, and training.

4.   A psychologist addresses _____ due to our society.

5.   It is a method used to narrow down a very broad field of research into one easily _____ topic.

6.   As a science of the _____ , psychoanalysis is not just a therapeutic method.

7.   As the child grows, families often feel that the most difficult problem is the child's _____ behavior and they may need support managing this.

8.   The centers also provide home visit _____ , online _____ and broadcast _____ .

9.   Lewandowski and Strohmetz review a collection of innovative uses of behavioral _____ in psychology including behavioral traces, behavioral observations, and behavioral choice.

10.   The psychology of inventive creativity is primarily a department of _____ science.

Exercise 10. Find phrasal verbs with particle *up* in the text, write them out and translate into Russian. Are they separable or inseparable? Make sentences with them. If the phrasal verb is separable, give all possible forms.

GRAMMAR EXERCISES

Exercise 11. Look through the text and find the comparative and superlative forms of the adjectives and adverbs.

Exercise 12. Complete the sentences using the forms of appropriate adjectives and adverbs.

1. Psychotherapy research shows that when individuals feel listened to, they tend to listen to themselves _____ (carefully) and to openly evaluate and clarify their own thoughts and feelings.

2. That's right, the "talking cure" works at least as well as anything else and probably _____ (good) for some.

3. She's even _____ (lazy) than me.

4. It's _____ (fast) than cars or public transport and I feel more _____ (free).

5. Girls are also found to attend schools _____ (regularly) than boys.

Exercise 13. Complete the sentences using the super forms of adjectives and adverbs.

1. Ontological anxiety is one of the _____ (interesting) and complicated phenomena and one of the basic concepts of existential psychotherapy.

2. It occurs _____ (quickly) and fully in physically healthy people aged 24 to 40 years.

3. What can be the _____ (good) memory for a scientist who devoted his life to science?

4. Deceit and half-truths were hidden in every family relationship, and her _____ (happy) childhood memories were from outside the home.

5. That's the _____ (bad) behavior in such a situation.

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 14. Answer the questions.
1. What are the strict behaviorists' main ideas?
2. When was behaviorism formally established?
3. Who is the father of behaviorism?
4. Who are the main representatives of behaviorism?
5. When was behaviorism the dominant school of thought in psychology?
6. How many types of behaviorism are there? Describe them.
7. What are the facts that impact conditioning?
8. What is the difference between classical conditioning and operant conditioning?
9. What does continuous reinforcement involve?
10. What does partial reinforcement involve?

11.   What are the behavioral therapy techniques?

12.   What were the blind sides of behaviorism according to some thinkers?

Exercise 15. Say whether the statements are true or false. Give reasons.

1.   Behaviorism is a theory of learning based on the idea that all behaviors are acquired through conditioning.

2.   Behavioral theory says that cognition, emotions, and mood should be studied along with observable behavior.

3.   "Psychology as the Behaviorist Views It." is written by I. Pavlov.

4.   Behaviorism became the dominant school of thought in psychology from about 1920 through the mid-1950s.

5.   Methodological behaviorism states that behavior can be understood by looking at one's past and present environment and the reinforcements within it, thereby influencing behavior either positively or negatively.

6.   Classical conditioning is a technique frequently used in behavioral training in which a neutral stimulus is paired with an environmental stimulus.

7.   Operant conditioning is a method of learning that occurs through reinforcement and punishment.

8.   Skinner discovered that the timing of these rewards and punishments has no influence on how quickly a new behavior is acquired.

9.   One of the greatest strengths of behavioral psychology is the ability to clearly observe and measure behaviors.

10.   Behavioral theories account for free will or internal influences.

Exercise 16. Study the idioms and sayings in English. Translate them or try to find a similar idiom in Russian. Make up situations to illustrate them.

1.   To be on one's best behavior.

2.   To behave like a bank employee.

3.   To behave like a bull in a china shop.

4.   To behave like a child with a new toy.

Exercise 17. Give the examples of the following techniques.

1.   Classical conditioning

2.   Operant conditioning

Exercise 18. Choose one of the topics to make a report and present it in front of the class.

Behavioral therapy techniques:

1. Intensive behavioral intervention
2. Behavior analysis
3. Token economies
4. Discrete trial training
5. Aversion therapy
6. Systematic desensitization
7. Behavior modeling
8. Contingency management

Exercise 19. Render the article from Ex.3 on p. 52. Follow the plan in the Appendix 1

TEXT 7.

WHAT IS GESTALT PSYCHOLOGY?

PRE-READING

Exercise 1. Study the vocabulary before reading the text.

sensation [senˈseɪʃn] – деятельность органа чувств

configuration [kənˌfɪɡəˈreɪʃn] – склад (психики)

holistically [həˈlɪstɪkli] – целостно

prägnanz - прегнантность

proximity [prɒkˈsɪməti] – непосредственность

continuity [ˌkɒntɪˈnjuːəti] – непрерывность

closure [ˈkləʊʒə(r)] – ощущение завершенности

curve [kɜːv] – кривая

bounded – ограниченный

awareness [əˈweənəs] – психическая ориентированность

unfinished business – незаконченное дело

personal responsibility – непосредственная ответственность

anxiety [æŋˈzaɪəti] – тревога

to gain confidence – обрести уверенность

self-efficacy [self ˈefɪkəsi] – самоэффективность

self-kindness – любовь к себе

to be reliant on [rɪˈlaɪənt] – полагаться на, зависеть от

unbiased environment [ʌnˈbaɪəst] – объективная среда

focal [fəʊkl] – центральный, очаговый проб

hierarchy [ˈhaɪərɑːki] – иерархия

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.

1. What is the essence of Gestalt psychology?
2. What does the concept "unfinished business" mean?
3. Who are main representatives of Gestalt psychology?
4. What is Gestalt therapy?

Exercise 3. Read, translate the article and be ready to do the exercises.
What Is Gestalt psychology?

Gestalt psychology is a school of thought that looks at the human mind and behavior as a whole. When trying to make sense of the world around us, Gestalt psychology suggests that we do not simply focus on every small component. Instead, our minds tend to perceive objects as elements of more complex systems.

A core belief in Gestalt psychology is holism, or that the whole is greater than the sum of its parts. This school of psychology has played a major role in the modern development of the study of human sensation and perception. Gestalt is a German word that roughly means "configuration" or the way things are put together to form a whole object.

History of Gestalt psychology

Originating in the work of Max Wertheimer, Gestalt psychology formed in part as a response to the structuralism of Wilhelm Wundt.

While followers of structuralism were interested in breaking down psychological matters into their smallest possible parts, Gestalt psychologists wanted instead to look at the totality of the mind and behavior. Guided by the principle of holism, Wertheimer and his followers identified instances where perception was based on seeing things as a complete whole, not as separate components.

A number of thinkers influenced the development of Gestalt psychology, including Immanuel Kant, Ernst Mach, and Johann Wolfgang von Goethe.

Wertheimer developed Gestalt psychology after observing what he called the phi phenomenon while watching alternating lights on a railway signal. The phi

phenomenon is an optical illusion where two stationary objects seem to move if they are shown appearing and disappearing in rapid succession. In other words, we perceive movement where there is none.

Based on his observations of the phi phenomenon, Wertheimer concluded that we perceive things by seeing the whole perception, not by understanding individual parts. In the example of blinking lights at a train station, the whole we perceive is that one light appears to move quickly between two points. The reality is that two separate lights are blinking rapidly without moving at all.

Influential Gestalt psychologists

Wertheimer's observations of the phi phenomenon are widely credited as the beginning of Gestalt psychology and he went on to publicize the core principles of the field. Other psychologists also had an influence on this school of psychology.

Wolfgang Köhler: Köhler connected Gestalt psychology to the natural sciences, arguing that organic phenomena are examples of holism at work. He also studied hearing and looked at problem-solving abilities in chimpanzees.

Kurt Koffka: Together with Wertheimer and Köhler, Koffka is considered a founder of the field. He applied the concept of Gestalt to child psychology, arguing that infants first understand things holistically before learning to differentiate them into parts. Koffka played a key role in bringing Gestalt principles to the United States.

Principles of Gestalt psychology

Gestalt psychology helped introduce the idea that human perception is not just about seeing what is actually present in the world around us. It is also heavily influenced by our motivations and expectations.

Wertheimer created principles to explain how Gestalt perception functions. Some of the most important principles of Gestalt theory are:

- **Prägnanz**: This foundational principle states that we naturally perceive things in their simplest form or organization.

- **Similarity**: This Gestalt principle suggests that we naturally group similar items together based on elements like color, size, and orientation. An example would be grouping dogs based on whether they are small or large, or if they are big or small.

- **Proximity**: The principle of proximity states that objects near each other tend to be viewed as a group.

- **Continuity**: According to this Gestalt principle, we perceive elements arranged on a line or curve as related to each other, while elements that are not on the line or curve are seen as separate.

- **Closure**: This suggests that elements that form a closed object will be perceived as a group. We will even fill in missing information to create closure and

make sense of an object. An example of this Gestalt psychology principle is using negative space to give the illusion that a particular shape exists when it doesn't.

- **Common region**: This Gestalt psychology principle states that we tend to group objects together if they're located in the same bounded area. (For example, objects inside a box tend to be considered a group.)

Uses for Gestalt psychology

There are several uses for Gestalt psychology today, some of which include those related to therapy, design, product development, and learning.

Gestalt therapy

Gestalt therapy is based on the idea that overall perception depends on the interaction between many factors. Among these factors are our past experiences, current environment, thoughts, feelings, and needs. Gestalt therapy involves key concepts such as awareness, unfinished business, and personal responsibility.

The main goal of Gestalt therapy is to help us focus on the present. While past context is important for viewing yourself as a whole, a Gestalt therapist will encourage you to keep your focus on your present experience.

Research suggests that Gestalt therapy is effective at treating symptoms of depression and anxiety, and it may help people gain confidence and increase feelings of self-efficacy and self-kindness.[8] It is often a helpful way to structure group therapy.

The therapeutic process is reliant on the relationship between the client and therapist. As a client, you must feel comfortable enough to develop a close partnership with your therapist, and they must be able to create an unbiased environment where you can discuss your thoughts and experiences.

Design

Beginning in the 1920s, designers began incorporating Gestalt principles in their work. Gestalt psychology led these designers to believe that we all share certain characteristics in the way we perceive visual objects and that we all have a natural ability to see "good" design.

Designers embraced Gestalt concepts, using our perception of contrast, color, symmetry, repetition, and proportion to create their work. Gestalt psychology influenced other design concepts, such as:

- **Figure-ground relationship**: This describes the contrast between a focal object (like a word, phrase, or image) and the negative space around it. Designers often use this to create impact.

- **Visual hierarchy**: Designers use the way we perceive and group visual objects to establish a visual hierarchy, ensuring that the most important word or image attracts our attention first.

- **Associativity**: This concept involves the principle of proximity. Designers often use this to determine where to place important objects, including text elements such as headlines, captions, and lists.

Product development

Product designers use Gestalt psychology to inform their decisions during the development process. Consumers tend to like products that follow Gestalt principles.

This influence can be seen in the appearance of the products themselves and in their packaging and advertising. We can also see Gestalt principles at work in apps and digital products. Concepts like proximity, similarity, and continuity have become standards of our expected user experience.

Learning and education

The Gestalt Theory of Learning relies on the law of simplicity. In simple terms, it states that each learning stimulus is perceived in its simplest form.

The psychology behind this learning theory states that we use our senses and previous experiences to gain knowledge about the world around us. It also suggests that we learn from the methods by which we are taught, in addition to being impacted by classroom environments and the academic culture.

Impact of Gestalt psychology

Gestalt psychology has largely been subsumed by other types of psychology, but it had an enormous influence on the field. Researchers like Kurt Lewin and Kurt Goldstein were influenced by Gestalt concepts before going on to make important contributions to psychology.[2]

Gestalt theory is also important in that the idea of the whole being different than its parts has influenced our understanding of the brain and social behavior. Gestalt theory still impacts how we understand vision and the ways that context, visual illusions, and information processing impact our perception.

(Retrieved from https://www.verywellmind.com/what-is-gestalt-psychology-2795808)

VOCABULARY EXERCISES

Exercise 4. Study the meaning of the words in the dictionary. Are they synonyms?

Sensation

Feeling

Perception

Sense

Exercise 5. Find the synonyms of the given words in the text.

Plainly, to assemble, to concentrate, total, an adherent, an originator, a child, fundamental, persistence, finish, to rely on, requirement, psychotherapist.

Exercise 6. Match the English and Russian equivalents.

1.	core belief	a)	целостный объект
2.	whole object	b)	сгруппировать элементы
3.	separate component	c)	отдельная деталь
4.	phi phenomenon	d)	основополагающие убеждения
5.	in rapid succession	e)	концентрироваться на настоящем
6.	individual part	f)	эффективный при лечении
7.	is widely credited as	g)	видимое движение
8.	to group items together	h)	отдельный компонент
9.	bounded area	i)	ограниченная область
10.	key concepts	j)	объективная среда
11.	to focus on the present	k)	широко известен, как
12.	to be effective at treating	l)	закон простоты
13.	to gain confidence	m)	ключевые понятия
14.	unbiased environment	n)	обрести уверенность
15.	the law of simplicity	o)	один за другим

Exercise 7. Match the words with their opposites.

1.	complex	a)	exactly
2.	modern	b)	unawareness
3.	roughly	c)	old-fashioned
4.	to put together	d)	whole
5.	a follower	e)	reality
6.	component	f)	self-doubt
7.	awareness	g)	simple
8.	illusion	h)	slow
9.	rapid	i)	a leader
10.	confidence	j)	to take apart

Exercise 8. Make up verb phrases.

1.	to make	a)	the idea
2.	to play	b)	the illusion
3.	to form	c)	principle
4.	to identify	d)	similar items together
5.	to introduce	e)	closure
6.	to create	f)	a major role
7.	to group	g)	elements
8.	to perceive	h)	a whole object
9.	to create	i)	the uses related to therapy
10.	to give	j)	instance
11.	to include	k)	sense
12.	to involve	l)	key concepts

Exercise 9. Match the words with their definitions.

illusion   closure
understanding   To perceive
expectation   motivation
need   Self-effcacy
holism   observation
hearing   Awareness

1.   Any approach or theory holding that a system or organism is a coherent, unified whole that cannot be fully explained in terms of individual parts or characteristics.

2.   to be conscious of or recognize through the senses.

3.   a piece of information.

4.   the process of gaining insight about oneself or others or of comprehending the meaning or significance of something, such as a word, concept, argument, or event.

5.   the ability of an organism to sense sound and to process and interpret the sensations to gain information about the source and nature of the sound. In humans, hearing refers to the perception of sound.

6.   the impetus that gives purpose or direction to behavior and operates in humans at a conscious or unconscious level.

7.   a state of tense, emotional anticipation.

8. the act, achievement, or sense of completing or resolving something. In psychotherapy, for example, a client achieves closure with the recognition that he or she has reached a resolution to a particular psychological issue or relationship problem.

9. a false sensory percept.

10. a condition of tension in an organism resulting from deprivation of something required for survival, well-being, or personal fulfillment.

11. an individual's subjective perception of his or her capability to perform in a given setting or to attain desired results.

12. perception or knowledge of something.

Exercise 10. Complete the sentences with the appropriate word from exercise 9.

1. But, don't confuse _____ with self-esteem.

2. Adler argued for _____ , viewing the individual holistically rather than reductively.

3. Possible exceptions may be noted in the Gestalt doctrine of " _____ " and in Thorndike's later assumption of "belongingness."

4. Cognitive symptoms include difficulties attending to and processing of information, in _____ the environment, and in remembering simple tasks.

5. I agree that the best kind of _____ is intrinsic _____ .

6. They may be neglectful or unaware of the child's _____ for affection and discipline.

7. In this sense and respect, perceptual _____ is the arithmetic, but conceptual _____ is the algebra of cognition.

8. He believes that he _____ any information much easier than usual.

9. An example of such theorization can be found in our sensation of _____ .

10. Knowledge of normative periods of development of the child in the systematic _____ of the formation of the psyche will allow the timely detection of the pathology of sensory systems, including visual.

11. There is a principle of psychology: the more _____ you have concerning some event, the more chances of your facing severe disappointment.

12. What we believe real is a simple _____ .

GRAMMAR EXERCISES

Exercise 11. What verb forms (bare infinitive, to+infinitive, or verb+ing) are used in these sentences? Find them in the text.

1.   Research suggests that Gestalt therapy is effective at _____ (treat) symptoms of depression and anxiety.

2.   We can also _____ (see) Gestalt principles at work in apps and digital products.

3.   Koffka played a key role in _____ (bring) Gestalt principles to the United States.

4.   It is often a helpful way _____ (structure) group therapy.

5.   The reality is that two separate lights are blinking rapidly without _____ (move) at all.

6.   Gestalt psychologists wanted instead _____ (look) at the totality of the mind and behavior.

7.   It may _____ (help) people gain confidence and increase feelings of self-efficacy and self-kindness.

8.   As a client, you must feel comfortable enough _____ (develop) a close partnership with your therapist.

9.   Wertheimer's observations of the phi phenomenon are widely credited as the _____ (begin)of Gestalt psychology.

Exercise 12. Complete the sentences with the correct form of verbs in brackets (bare infinitive, to+infinitive, or verb+ing).

1.   Also, green tea has proven to be good at _____ (treat) memory loss caused by psychological disorder or as part of recovery.

2.   And _____ (ask) questions is my job.

3.   In order to prevent this, it is necessary _____ _____ (try, replenish)mental strength.

4.   Love is difficult _____ (define), difficult _____ (measure), and difficult _____ (understand).

5.   They may _____ _____ (avoid, visit) the doctor for fear of learning (learn) bad news.

6.   Well, I don't mind _____ (tell) you.

7.   Psychotherapy is recognized as an inevitable and effective way _____ (treat) mental disorders.

8.   But people who regularly procrastinate often say it affects their lives, and can _____ (make)them _____ (feel) anxiety, guilt and shame.

9.   In the future, the researchers are interested in _____ (look at) schizophrenia mechanisms from a molecular perspective, and in seeing whether novel treatments could _____ (be devised).

10.   If you decide _____ (use) medicine to treat ADHD, you should _____ (discuss) this decision with your child.

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 13. Answer the questions.
1.   How does Gestalt psychology look at the human mind and behavior?
2.   What is a core belief in psychology?
3.   Who is the founder of Gestalt psychology?
4.   Who influenced the development of Gestalt psychology?
5.   What are the important principles Gestalt psychology?
6.   What is the goal of Gestalt therapy?
7.   What fields is Gestalt psychology used in?
8.   Why is Gestalt theory important?

Exercise 14. Say whether the statements are true or false. Give reasons.
1.   According to Gestalt psychologists, the whole is greater than the sum of its parts.
2.   Gestalt is a German word that roughly means "breaking down into small parts".
3.   Gestalt psychology formed in part as a response to the functionalism.
4.   Immanuel Kant, Ernst Mach, and Johann Wolfgang von Goethe were among a number of thinkers influenced the development of Gestalt psychology.
5.   Wertheimer concluded that we perceive things by understanding individual parts.
6.   Kurt Koffka said that infants first understand things holistically.
7.   The principle of proximity states that objects near each other are not viewed as a group.
8.   Gestalt therapy makes people focus on their past and future experience.
9.   The Gestalt Theory of Learning states that each learning stimulus is perceived in its simplest form.

10. Gestalt concepts influenced researchers like Kurt Lewin and Kurt Goldstein.

Exercise 15. Choose one of the topics to make a report and present it in front of the class.

Gestalt therapy techniques:
1. Empty chair
2. Two-chair
3. 'I' statements
4. Confrontation
5. Body language
6. Exaggeration
7. Locating emotions
8. Creative activities

Exercise 16. Render the article from Ex.3 on p. 63. Follow the plan in the Appendix 1

TEXT 8.

WHAT IS PSYCHOANALYSIS?

PRE-READING

Exercise 1. Study the vocabulary before reading the text.

hidden [ˈhɪdn] – скрытый

psychological difficulty – психологическая трудность

utilized [ˈjuːtəlaɪzd] – применяемый

self-examination – самоанализ

catharsis [kəˈθɑːsɪs] – очищение души

to gain insight into – получить ясное представление, разобраться

unconscious drive [ʌnˈkɒnʃəs] – бессознательное стремление

set in stone – не подлежащий изменению

defence mechanism [dɪˈfens mekənɪzəm] – механизм психологической защиты

dream analysis – анализ сновидений

free association – спонтанная ассоциация, вызываемая каким-либо словом

case study – психологическое исследование конкретного объекта

laypeople – непрофессионалы в определенной сфере

scepticism [ˈskeptɪsɪzəm] – скептицизм

repression – вытеснение из сознания

applied psychoanalysis [ˌsaɪkəʊˌænəˈlɪtɪk] – прикладной психоанализ

psychoanalytic therapy [ˌsaɪkəʊˌænəˈlɪtɪk] – психоаналитическая терапия

non-judgmental approach [ˌnɒn ˌdʒʌdʒˈmentl] – безоценочный подход

psychodynamic approach – психодинамический подход

in-depth – глубинный

to instill – внушать

to alleviate [əˈliːvieɪt] - смягчить

muster [ˈmʌstə(r)] – собирать

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.

1.   Who is Sigmund Freud?
2.   What are the main concepts of psychoanalytic theory?
3.   What are id, ego and superego?
4.   Is psychoanalysis used today?

Exercise 3. Read, translate the article and be ready to do the exercises.
What is psychoanalysis?

Psychoanalysis is a method of therapy in which the patient talks about experiences, early childhood, and dreams. Psychoanalysis refers to both a theory and a type of therapy based on the belief that all people possess unconscious thoughts, feelings, desires, and memories.

According to the American Psychoanalytic Association (APA), psychoanalysis can help people understand themselves by exploring their unrecognized impulses hidden in the unconscious.

In psychotherapy, people are able to feel safe as they explore feelings, desires, memories, and stressors that can lead to psychological difficulties. Research has demonstrated that the self-examination utilized in the psychoanalytic process can contribute to long-term emotional growth.

Psychoanalysis theories

Psychoanalysis is based on Freud's theory that people can experience catharsis and gain insight into their state of mind by bringing the content of

the unconscious into conscious awareness. Through this process, a person can find relief from psychological distress.

Psychoanalysis also suggests that:

- A person's behavior is influenced by their unconscious drives.
- Emotional and psychological problems such as depression and anxiety are often rooted in conflicts between the conscious and unconscious mind.
- Personality development is heavily influenced by the events of early childhood (Freud suggested that personality was largely set in stone by the age of five).
- People use defense mechanisms to protect themselves from information contained in the unconscious.

Skilled analysts can help a person bring certain aspects of their unconscious mind into their conscious awareness by using psychoanalytic strategies such as dream analysis and free association.

History of psychoanalysis

Many of Freud's observations and theories were based on clinical cases and case studies. This made his findings difficult to generalize to the larger population. Still, Freud's theories changed how we think about the human mind and behavior and left a lasting mark on psychology and culture.

Freud's theories of psychosexual stages, the unconscious, and dream symbolism are still popular among both psychologists and laypeople, but others view his work with skepticism.

Today, psychoanalysis encompasses:

- Applied psychoanalysis (which applies psychoanalytic principles to the study of art, literature, and real-world settings and situations)
- Neuro-psychoanalysis (which applies neuroscience to psychoanalytic topics such as dreams and repression)
- Psychoanalytic therapy

Although traditional Freudian approaches have fallen out of favor, modern approaches to psychoanalytic therapy emphasize a non-judgmental, empathetic approach.

Psychoanalysis theorists

Sigmund Freud was the founder of psychoanalysis and the psychodynamic approach to psychology. Freud believed that the human mind was composed of three elements: the id, the ego, and the superego.

Other thinkers—including his own daughter, Anna Freud—also left a significant mark on the field. Among the most prominent names in psychoanalysis were Erik Erikson, Erich Fromm, and Carl Jung. Erik Erikson expanded on Freud's theories and

stressed the importance of lifelong growth. Erikson's psychosocial stage theory of personality remains influential today in our understanding of human development. Karl Abraham, Otto Rank, John Bowlby, Melanie Klein, Karen Horney, and Sabina Spielrein were also key contributors to the evolution of psychoanalytic theory.

Key ideas

Psychoanalysis also involves a number of different terms and ideas related to the mind, personality, and treatment.

Case studies

A case study is defined as an in-depth study of one person, group, or event. Some of Freud's most famous case studies include Dora, Little Hans, and Anna O. These cases had a powerful influence on the development of his psychoanalytic theory.

In a case study, the researcher attempts to intensely examine every aspect of an individual's life. By closely studying a person, a researcher can gain insight into how an individual's history contributes to their current behavior.

Although the hope is that the insights gained from a single case study could apply to others, it is difficult to generalize the results, because case studies tend to be highly subjective. In some instances, the factors involved in a particular case are so individualized that they may not apply to others.

The conscious and unconscious mind

The unconscious mind includes all of the things that are outside of our conscious awareness, such as early childhood memories, secret desires, and hidden drives. According to Freud, the unconscious contains things that we might consider to be unpleasant or even socially unacceptable. We bury these things in our unconscious because they might bring us pain or conflict.

While these thoughts, memories, and urges are outside of our awareness, they still influence how we think and behave. In some cases, the things that are outside of our awareness can influence behavior in negative ways and lead to psychological distress.

The conscious mind, on the other hand, includes everything that is inside of our awareness. The contents of the conscious mind are the things we are aware of or can easily bring into awareness.

The id, ego, and superego

Freud believed that an individual's personality had three components: the id, the ego, and the superego. **Id:** the first of the key elements of personality to emerge is known as the id. The id contains all of the unconscious, basic, and primal urges. **Ego:** the second aspect of personality to emerge is known as the ego. This is the part of the personality that must deal with the demands of reality. It helps control the urges of the

id and makes us behave in ways that are both realistic and acceptable. Rather than engaging in behaviors that are designed to satisfy our desires and needs, the ego forces us to fulfill our needs in ways that are socially acceptable and realistic. In addition to controlling the demands of the id, the ego also helps strike a balance between our basic urges, our ideals, and reality. **Superego:** The superego is the final aspect of personality to emerge, and it contains our ideals and values. The values and beliefs that our parents and society instill in us are the guiding force of the superego and it strives to make us behave according to these morals.

The ego's defense mechanisms

Defense mechanisms are strategies that the ego uses to protect itself from anxiety. These defensive tools act as a safeguard to keep unpleasant or distressing aspects of the unconscious from entering our awareness. When something is experienced as overwhelming or even inappropriate, defense mechanisms keep the information from entering our consciousness, which minimizes our distress.

Strengths and weaknesses

Over the course of the early 20th century, the influence of psychoanalysis grew. However, it was not without critics. Despite its flaws, psychoanalysis continued to play a key role in the development of psychology. It influenced our approach to treating mental health conditions and continues to exert an influence on psychology today.

Strengths: 1. Even though most psychodynamic theories did not rely on experimental research, the methods and theories of psychoanalytic thinking contributed to the development of experimental psychology. 2. Many of the theories of personality developed by psychodynamic thinkers, such as Erikson's theory of psychosocial stages and Freud's psychosexual stage theory, continue to influence the field today. 3. Psychoanalysis opened up a new view on mental illness, particularly that talking through problems with a psychoanalytic professional could help alleviate a person's psychological distress.

Weaknesses: 1. Freud's theories overemphasized the unconscious mind, sex, aggression, and childhood experiences. 2. Many of the concepts proposed by psychoanalytic theorists are difficult to measure and quantify. 3. Most of Freud's ideas were based on case studies and clinical observations rather than empirical, scientific research.

Support and criticism

Many of the criticisms of psychodynamic approaches are based on the earlier Freudian approaches to treatment. Many people are skeptical of psychoanalysis because the evidence supporting its effectiveness has often been viewed as weak. One of the critics' main arguments is that it's not as effective as other treatments.

More recently, however, research has demonstrated that this approach can have a number of benefits. One systematic review of previous studies concluded that psychoanalytic therapy was an effective treatment that resulted in the reduction of symptoms and long-term changes that persisted for years after treatment ended.

Psychodynamic therapy could be effective in the treatment of a number of conditions include: depression, eating disorders, somatic disorders, some anxiety disorders.

Another critique is that psychoanalysis often requires an investment of time, money, and effort. Psychoanalysis is also generally a long-term proposition. In the world we live in today, people are usually seeking fast results and approaches that yield an effect in days, weeks, or months. Psychoanalytic therapy typically involves a client and therapist exploring issues over a period of years.

Past and present

Many of Freud's ideas have fallen out of favor in psychology, but that certainly does not mean that his work is without merit. Research also supports at least some of Freud's original ideas.

His approach to therapy (specifically, the suggestion that mental illness was treatable and that talking about problems could bring relief) was a revolutionary concept that changed how we approach the treatment of mental illness.

Psychoanalysis as Freud conceived it might be on the decline, but that does not mean that the psychodynamic perspective has disappeared or that it will be going anywhere soon.

Most psychologists today employ a more eclectic approach to the field of psychology, though there are some professionals who still take a purely psychoanalytical point of view on human behavior.

Some suggest that psychoanalysis has fallen by the wayside as an academic topic within psychology partly because of its failure to test the validity of its therapeutic approach and earlier failures to ground the discipline in evidence-based practices.

(Retrieved from https://www.verywellmind.com/what-is-psychoanalysis-2795246)

VOCABULARY EXERCISES

Exercise 4. Give Russian equivalents.

Unconscious thoughts, hidden in the unconscious, emotional, find relief from psychological distress, are often rooted in conflicts, contained in the unconscious, left a lasting mark, real-world setting, fallen out of favor, psychoanalytic theory,

contributes to their current behavior, highly subjective, socially unacceptable, outside of our awareness, influence behavior in negative ways, primal urges, to fulfill our needs.

Exercise 5. Give English equivalents.

Метод терапии, между сознательным и бессознательным, события раннего детства, вытеснять вещи в бессознательное, приводить к психологическому стрессу, требования реальности, достигать равновесия между, направляющая сила, препятствовать проникновению неприятных и тревожных составляющих из бессознательного в сознание, открыть новый взгляд на, уменьшать эмоциональный стресс человека, уменьшение симптомов.

Exercise 6. Use a monolingual English dictionary and give the definitions of the following words.

Unconscious, conscious, id, ego, superego, conflict, depression, anxiety, neuroscience, memory, desire, urge, stressor, need.

Exercise 7. Complete the second column with derivatives of words and translate them.

Verb	Noun
to believe	
to relieve	
to grow	
to psychoanalyze	
to observe	
Verb	**Noun (a person)**
to contribute	
to found	
to research	
to think	
to analyze	
Adjective	**Negative adjective**
conscious	
pleasant	
acceptable	
Adjective	**Noun**

aware	
anxious	
sceptic	
personal	

Exercise 8. Complete the sentences with the derived words from exercise 7.

Anxious, acceptable, to relieve, sceptic, to research, conscious, aware, psychoanalyze, to found, personal.

1.   The first psychologists, pioneers who developed new directions in_____ were interesting people.

2.   According to this approach, one_____ is identical to_____ in different time, if there is a psychological succession between them.

3.   I am pleased to say that this_____ was replaced by real interest, real work and real cooperation.

4.   It's important to find an_____ treatment that works.

5.   Some people with bipolar disorder have reported that using alternative treatments provides_____ from symptoms.

6.   This quote from George Miller - one of the_____ of cognitive psychology - helps explain this idea.

7.   Psychology_____ have been studying how certain marketing tricks work.

8.   The ego is fully conscious, while the id and superego are _____ .

9.   Most of this is beyond our conscious_____ **.**

10.   It works to suppress all_____ urges of the id and struggles to make the ego act upon idealistic standards rather than upon realistic principles.

GRAMMAR EXERCISES

Exercise 9. Look through the text and find the examples of adverbial clause. Write what type of Adverbial Clause they are (time, reason, purpose, result, contrast, manner, comparison).

Exercise 10. Underline the correct option. Write what type of Adverbial Clause they are (time, reason, purpose, result, contrast, manner, comparison).

1.   The theory of dreams is a turning point in the history of psychoanalysis, *because/so* it was thanks to it that psychoanalysis was able to move to deep psychology.

2. The most important thing here is to remove the taboo on the topic of mental illness *while/so* that people are not afraid to consult a doctor in time for help.

3. No two people will have the exact same experience, *so/because* treatment is always individualised.

4. *As soon as/because* you start talking about your psyche, people get worried because we associate it with our real self, with what we really are.

5. *Although/In order to identify* abnormalities in the psyche, it is necessary to observe a person in a hospital for 30 days.

6. Some psychologists receive special training that allows them to engage in psychotherapy, *although/so* they are not allowed to prescribe medication or apply shock therapy.

7. Vigotsky believed that social reality is historically secondary to nature, and is inseparable from it, *as/while* many psychologists and social theorists of his time did.

8. And *despite/even though* the fact that he left Freud's society because of differences in views and thoughts, Adler and Freud respected each other and drew inspiration from each other's work.

9. In combined treatment, medication can relieve physical symptoms quickly, *while/in order to* psychotherapy allows the opportunity to learn more effective ways of handling problems.

10. *Because/Although* cognitive behavioral therapy focuses on acquiring practical coping skills, many people see positive results quickly.

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 11. Answer the questions.
1. What is psychoanalysis?
2. Whose theory is psychoanalysis based on?
3. What does psychoanalysis encompass today?
4. Who was the founder of psychoanalysis?
5. Who are other thinkers of this school of thought?
6. How many components did individual's personality have according to S. Freud? What are they?
7. What is ego?
8. When did the influence of psychoanalysis grow?
9. What are the strengths of psychoanalysis?
10. Why was psychoanalysis criticized?

Exercise 12. Say whether the statements are true or false. Give reasons.

1.   The self-examination utilized in the psychoanalytic process can contribute to long-term emotional growth.

2.   A person's behavior is influenced by their conscious drives.

3.   Conflicts between the conscious and unconscious mind lead to emotional and psychological problems.

4.   Freud suggested that personality was largely set in stone by the age of 15.

5.   The conscious contains the information people use defense mechanisms to protect themselves from.

6.   Certain aspects of people's unconscious mind are brought into their conscious awareness by means of psychoanalytic strategies such as behavior analysis and introspection.

7.   Sigmund Freud was the founder of psychoanalysis and the psychodynamic approach to psychology.

8.   One of the key contributors to the evolution of psychoanalytic theory is Anna Freud.

9.   The unconscious mind includes all of the things that are contained in our conscious awareness.

10.   Superego is the first of the key elements of personality.

Exercise 13. Complete the sentences.

Unconscious mind	Conscious mind
T_____ , u_____ , or f_____ that are unpleasant, difficult, or even socially unacceptable.	T_____ , f_____ , and u_____ that we are aware of or can easily bring into a_____ .
B_____ because they can bring about pain or conflict.	Not h_____ or suppressed.
Can sometimes be brought into a_____ using certain techniques.	May be influenced by un_____ t_____ , f_____ , or m_____ .

Exercise 14. Find the term according to the definition.

1.   Last part of personality to develop. Develops through socialization. Concerned with morality, right and wrong.

2.   Unconscious. Pleasure-oriented and selfish. Driven by 'pleasure principle'. Insatiable instincts present from birth.

3.   Conscious. Rational, driven by the 'reality principle'. Balances conflicting demands of the Id and Superego.

Exercise 15. Choose one of the topics to make a report and present it in front of the class.
Psychodynamic therapy in treating:
1.   Depression
2.   Eating disorder
3.   Somatic disorder
4.   Anxiety disorder

Exercise 16. Render the article from Ex.3 on p. 73. Follow the plan in the Appendix 1

TEXT 9.

WHAT IS HUMANISTIC PSYCHOLOGY?

PRE-READING

Exercise 1. Study the vocabulary before reading the text.
free will – свободная воля
self-actualization – самосовершенствование
to strive to – преследовать цель
to fulfill potential – реализовать потенциал
dysfunction [dɪsˈfʌŋkʃn] – нарушение нормальной деятельности
dignity – достоинство
innately [ɪˈneɪtli] – врожденно
deviation [ˌdiːviˈeɪʃn] – отклонение
natural tendency – естественное стремление
personal agency – субъектность личности
self-discovery – процесс самопознания
stigma [ˈstɪgmə] – социальное отторжение
unverifiable [ʌnˈverɪfaɪəb(ə)l] – непроверяемый
hard-to-measure – трудноизмеряемый
client-directed approach – подход, ориентированный на потребности клиента

unconditional positive regard – безусловное положительное отношение
self-worth [ˌself ˈwɜːθ] – самооценка
caregiver – лицо, осуществляющее уход или лечение
congruence [ˈkɒŋɡruəns] - конгруэнтность

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.
1.   What is humanistic psychology?
2.   What does humanistic psychology focus on?
3.   Who is Carl Rogers?
4.   What is unconditional positive regard?

Exercise 3. Read, translate the article and be ready to do the exercises.
What is humanistic psychology?

Humanistic psychology is a perspective that emphasizes looking at the whole individual and stresses concepts such as free will, self-efficacy, and self-actualization. Rather than concentrating on dysfunction, humanistic psychology strives to help people fulfill their potential and maximize their well-being.

This area of psychology emerged during the 1950s as a reaction to psychoanalysis and behaviorism, which had dominated psychology during the first half of the century. Humanist thinkers felt that both psychoanalysis and behaviorism were too pessimistic, either focusing on the most tragic of emotions or failing to take into account the role of personal choice.

However, it is not necessary to think of these three schools of thought as competing elements. Each branch of psychology has contributed to our understanding of the human mind and behavior.

Humanistic psychology added yet another dimension that takes a more holistic view of the individual. Humanism is a philosophy that stresses the importance of human factors rather than looking at religious, divine, or spiritual matters. Humanism is rooted in the idea that people have an ethical responsibility to lead lives that are personally fulfilling while at the same time contributing to the greater good of all people. Humanism stresses the importance of human values and dignity. It proposes that people can resolve problems through science and reason. Rather than looking to religious traditions, humanism focuses on helping people live well, achieve personal growth, and make the world a better place.

Uses for Humanistic Psychology

Humanistic psychology focuses on each individual's potential and stresses the importance of growth and self-actualization. The fundamental belief of humanistic psychology is that people are innately good and that mental and social problems result from deviations from this natural tendency.

Humanistic psychology also suggests that people possess personal agency and that they are motivated to use this free will to pursue things that will help them achieve their full potential as human beings.

The need for fulfillment and personal growth is a key motivator of all behavior. People are continually looking for new ways to grow, to become better, to learn new things, and to experience psychological growth and self-actualization.

Some of the ways that humanistic psychology is applied within the field of psychology include:

- **Humanistic therapy**: Several different types of psychotherapy have emerged that are rooted in the principles of humanism. These include client-centered therapy, existential therapy, and Gestalt therapy.

- **Personal development**: Because humanism stresses the importance of self-actualization and reaching one's full potential, it can be used as a tool of self-discovery and personal development.

- **Social change**: Another important aspect of humanism is improving communities and societies. For individuals to be healthy and whole, it is important to develop societies that foster personal well-being and provide social support.

Impact of humanistic psychology

The humanist movement had an enormous influence on the course of psychology and contributed new ways of thinking about mental health. It offered a new approach to understanding human behaviors and motivations and led to the development of new techniques and approaches to psychotherapy.

Some of the major ideas and concepts that emerged as a result of the humanistic psychology movement include an emphasis on things such as: client-centered therapy, free will, fully functioning person, hierarchy of needs, peak experiences, self-actualization, self-concept, unconditional positive regard.

How to apply humanistic psychology

Some tips from humanistic psychology that can help people pursue their own fulfillment and actualization include: discover your own strengths, develop a vision for what you want to achieve, consider your own beliefs and values, pursue experiences that bring you joy and develop your skills, learn to accept yourself and others, focus on

enjoying experiences rather than just achieving goals, keep learning new things, pursue things that you are passionate about, maintain an optimistic outlook.

One of the major strengths of humanistic psychology is that it emphasizes the role of the individual. This school of psychology gives people more credit for controlling and determining their state of mental health.

It also takes environmental influences into account. Rather than focusing solely on our internal thoughts and desires, humanistic psychology also credits the environment's influence on our experiences.

Humanistic psychology helped remove some of the stigma attached to therapy and made it more acceptable for normal, healthy individuals to explore their abilities and potential through therapy.

Potential pitfalls

While humanistic psychology continues to influence therapy, education, healthcare, and other areas, it has not been without some criticism.

For example, the humanist approach is often seen as too subjective. The importance of individual experience makes it difficult to objectively study and measure humanistic phenomena. How can we objectively tell if someone is self-actualized? The answer, of course, is that we cannot. We can only rely upon the individual's assessment of their experience.

Another major criticism is that observations are unverifiable; there is no accurate way to measure or quantify these qualities. This can make it more difficult to conduct research and design assessments to measure hard-to-measure concepts.

History of humanistic psychology

The early development of humanistic psychology was heavily influenced by the works of a few key theorists, especially Abraham Maslow and Carl Rogers. Other prominent humanist thinkers included Rollo May and Erich Fromm.

In 1943, Abraham Maslow described his hierarchy of needs in "A Theory of Human Motivation" published in *Psychological Review.* Later during the late 1950s, Abraham Maslow and other psychologists held meetings to discuss developing a professional organization devoted to a more humanist approach to psychology.

They agreed that topics such as self-actualization, creativity, individuality, and related topics were the central themes of this new approach. In 1951, Carl Rogers published "Client-Centered Therapy," which described his humanistic, client-directed approach to therapy. In 1961, the *Journal of Humanistic Psychology* was established.

It was also in 1961 that the American Association for Humanistic Psychology was formed and by 1971, humanistic psychology become an APA division.

In 1962, Maslow published "Toward a Psychology of Being," in which he described humanistic psychology as the "third force" in psychology. The first and second forces were behaviorism and psychoanalysis respectively.

Unconditional positive regard in psychology

Unconditional positive regard is a term used by humanist psychologist Carl Rogers to describe a technique used in his non-directive, client-centered therapy. According to Rogers, unconditional positive regard involves showing complete support and acceptance of a person no matter what that person says or does. The therapist accepts and supports the client, no matter what they say or do, placing no conditions on this acceptance. That means the therapist supports the client, whether they are expressing "good" behaviors and emotions or "bad" ones.

What is unconditional positive regard?

"It means caring for the client, but not in a possessive way or in such a way as simply to satisfy the therapist's own needs," explained in Rogers in a 1957 article published in the Journal of Consulting Psychology

Rogers believed that it was essential for therapists to show unconditional positive regard to their clients. He also suggested that individuals who don't have this type of acceptance from people in their lives can eventually come to hold negative beliefs about themselves.

"People also nurture our growth by being accepting—by offering us what Rogers called unconditional positive regard," explains David G. Meyers in his book, "Psychology: Eighth Edition in Modules."

"This is an attitude of grace, an attitude that values us even knowing our failings. It is a profound relief to drop our pretenses, confess our worst feelings, and discover that we are still accepted. In a good marriage, a close family, or an intimate friendship, we are free to be spontaneous without fearing the loss of others' esteem."

Unconditional positive regard and self-worth

Rogers believed that people have a need for both self-worth and positive regard for other people. How people think about themselves and how they value themselves plays a major role in well-being.

People with a stronger sense of self-worth are also more confident and motivated to pursue their goals and to work toward self-actualization because they believe that they are capable of accomplishing their goals.

During the early years, children hopefully learn that they are loved and accepted by their parents and other family members, which contributes to feelings of confidence and self-worth. Unconditional positive regard from caregivers during the early years

of life can help contribute to feelings of self-worth as people grow older. As people age, the regard of others plays more of a role in shaping a person's self-image.

Rogers believed that when people experience conditional positive regard, where approval hinges solely on the individual's actions, incongruence may occur. Incongruence happens when a person's vision of their ideal self is out of step with what they experience in real-life.

Congruent individuals will have a lot of overlap between their self-image and their notion of their ideal self. An incongruent individual will have little overlap between their self-image and ideal self.

Rogers also believed that receiving unconditional positive regard could help people become congruent once more. By providing unconditional positive regard to their clients, Rogers believed that therapists could help people become more congruent and achieve better psychological well-being.

(Retrieved from https://www.verywellmind.com/what-is-humanistic-psychology-2795242, https://www.verywellmind.com/what-is-unconditional-positive-regard-2796005)

VOCABULARY EXERCISES

Exercise 4. Give Russian equivalents.

Maximize their well-being, competing elements, holistic view of the individual, human values, result from deviations from, achieve their full potential, a key motivator, existential therapy, foster personal well-being, peak experiences, gives people more credit for, explore their abilities through therapy, complete support, acceptance of a person, hold negative beliefs, out of step with.

Exercise 5. Give English equivalents.

Игнорируя, личный выбор, этическая ответственность, высшее благо, потребность в, растут в психологическом плане, оказать огромное влияние, основная идея, разработать видение, принимать себя, сохранить в себе оптимистическое видение мира, контролировать свое состояние психического здоровья, устранить некоторые предубеждения, психические проявления, нет точного способа, не устанавливать определенные ограничения, позволить, перестать притворяться, чувство собственного достоинства, одобрение зависит, иметь мало общего между, использовать безусловное положительное отношение к.

Exercise 6. Make compound nouns and adjectives from the given words and translate them into Russian.

giver self analysis worth care discovery human to-measure pit self well self therapy self fall being life hard self psycho self actualization health efficacy behavior client-centered care concept image…real

Exercise 7. Complete the sentences with the compound nouns and adjectives from exercise 6.

1. Your_____ depends on what others think about you.
2. Meditation is an evidence-based way to promote mental_____ .
3. This aspect makes this approach quite similar to the other humanistic approach,_____ .
4. Dance is a powerful tool for_____ accessible to everyone.
5. Your_____ precedes and predicts your levels of effectiveness in every area of your life.
6. Older and white patients benefited more from the increased access to mental_____ than did other patients.
7. Stress is a very difficult area to study because it is_____ psychological and physical responses to stress.
8. Speak and act in ways that gives your children a positive_____ .
9. Since hallucinations appear the individual does not consider visions as_____ facts, he realizes that unhealthy processes occur in his psyche.
10. The researchers recommended assessing_____ mental health soon after their loved one's cancer diagnosis.

Exercise 8. Match the words with their definitions.

1. congruence	a) according to Rogers, an orderly process of client self-discovery and actualization occurs in response to the therapist's consistent empathic understanding of, acceptance of, and respect for the client's frame
2. unconditional positive regard	b) one's view or concept of oneself.
3. client-centered therapy	c) the capacity to develop or come into existence.

4.	feeling	d)	an attitude of caring, acceptance, and prizing that others express toward an individual irrespective of his or her behavior and without regard to the others' personal standards.
5.	self-image	e)	the totality of the individual, consisting of all characteristic attributes, conscious and unconscious, mental and physical.
6.	self	f)	in the humanistic psychology of Abraham Maslow, a moment of awe, ecstasy, or sudden insight into life as a powerful unity transcending space, time, and the self.
7.	peak experience	g)	denoting a capability or characteristic existing in an organism from birth, belonging to the original or essential constitution of the body or mind.
8.	free will	h)	in the phenomenological personality theory of Carl Rogers, (a) the need for a therapist to act in accordance with his or her true feelings rather than with a stylized image of a therapist or (b) the conscious integration of an experience into the self.
9.	potential	i)	the power or capacity of a human being for self-direction.
10.	innate	j)	a self-contained phenomenal experience.

Exercise 9. Make nouns from these words and write them in the correct column. Make any other small changes necessary to form nouns.

-or	-ism	-ity	-ist	-ance/ence	-sion/tion

To deviate, individual, to criticize, to organize, to accept, to actualize, therapy, to behave, to educate, psychology, to divide, responsible, to react, motive, human, to observe, incongruent, motivate, creative, to behave, human, important, confident, associate, to permit.

GRAMMAR EXERCISES

Exercise 10. Look through the text and find the examples of Object Clause.

Exercise 11. Join two sentences using Object Clause. Use conjunctions and connectives in brackets.

1. Psychology is important in helping people adapt to climate change. The organization says this. (-)
2. Symptoms of mental illness are increasing, specifically hyperactivity, aggression, depression and anxiety. Colman and colleagues sought to better understand it. (whether)
3. Is it a mental illness? I have wondered. (if)
4. Low self-worth destroys your confidence and self-belief. We all know this. (that)
5. What would Freud say about it? I wonder it. (what)
6. Why does self-esteem peak in middle age and drop after retirement? The researchers point to a number of theories to explain it. (why)
7. Are mental health problems more common in men or in women? Five years ago we set out to discover it. (whether)
8. There's an important link between heart disease and Alzheimer's Disease. An article in the journal "Dementia and Geriatric Cognitive Disorders" claims this. (-)
9. Their psychotherapy can work even when done over the telephone. They claim it. (that)
10. Psychopathy is associated with robust alterations in the expression of genes and immune response-related molecular pathways. The study shows it. (that)

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 12. Answer the questions.
1. When did humanistic psychology emerge?
2. What does humanism stress?
3. What did humanistic thinkers think of psychoanalysis and behaviorism?

4.   What does humanistic psychology focus on?
5.   What are the ways of humanistic psychology?
6.   What are the tips of humanistic psychology?
7.   What are the weaknesses of humanistic psychology?
8.   Who are the key theorists of humanistic psychology?
9.   When was "Journal of Humanistic Psychology" established?
10.   What is unconditional positive regard?
11.   Who used the term "unconditional positive regard"?
12.   What contributes to feelings of confidence and self-worth?
13.   What is the difference between congruent and incongruent individuals?

Exercise 13. Say whether the statements are true or false. Give reasons.
1.   Humanistic psychology concentrates on dysfunction.
2.   Humanistic psychology emerged as a reaction to psychoanalysis and behaviorism.
3.   Humanist thinkers felt that both psychoanalysis and behaviorism took into account the role of personal choice.
4.   The major idea of humanistic psychology is that people are innately good and that mental and social problems result from deviations from this natural tendency.
5.   According to humanist thinkers, key motivator of all behavior is the need for fulfillment and personal growth.
6.   Humanistic psychology emphasizes the role of behavior.
7.   One of the main strengths of humanist approach is its subjectiveness.
8.   Key theorists of humanistic psychology are Abraham Maslow and Carl Rogers.
9.   Unconditional positive regard involves showing complete support and acceptance of a person only if he observes moral and ethical principles.
10.   Incongruence happens when a person's vision of their ideal self is out of step with what they experience in real-life.

Exercise 14. Translate the following sentences from Russian into English.
1.   Повышение самооценки приведёт к формированию хорошей способности социально адаптироваться.
2.   Каждый человек, по крайней мере потенциально, имеет свободную волю.
3.   Без этого мы никогда полностью не реализуем потенциал разума/тела.

4. Юнг считал, что все люди обладают врождённой способностью генерировать некие символы общего характера, которые назвал архетипами.

5. Вы полностью овладеваете процессами самопознания.

6. Роджерс полагал, что для врача важно показывать безусловное позитивное отношение к своим клиентам.

7. Подлинность, или конгруэнтность является самым важным из трёх условий.

8. Одним из самых популярных методов воздействия на пациента считается клиент-центрированная терапия.

9. Исходя из концепций субъектности личности (область индивидуально-психологических исследований), доминирующей является индивидуальная составляющая.

10. Нельзя решить лишь на основании внешних клинических признаков отклонения поведения, болен девиант психически или нет

Exercise 15. Choose one of the topics to make a report and present it in front of the class.
Humanistic therapy:
1. Person-centered therapy
2. Existential therapy
3. Logotherapy
4. Gestalt therapy
5. Constructivist therapy
6. Narrative therapy
7. Transpersonal psychotherapy
8. Transactional analysis

Exercise 16. Render the article from Ex.3 on p. 83. Follow the plan in the Appendix 1

TEXT 10.

WHAT IS COGNITIVE PSYCHOLOGY?

PRE-READING

Exercise 1. Study the vocabulary before reading the text.

learning – научение, обучаемость

thinking – мышление

to store memory – обогатить память

irrelevant [ɪˈreləvənt] – несоответствующий

choice-based – основанный на выборе

language acquisition – овладение языком

speech perception [ˌdiːviˈeɪʃn] – восприятие речи

traumatic brain injury [trɔːˈmætɪk] – травматическое повреждение мозга

degenerative brain disease [dɪˈdʒenərətɪv] – дегенеративное повреждение мозга

to combat [ˈkɒmbæt] – бороться

thinking pattern [ˈpætn] – склад мышления

phobia [ˈfəʊbɪə] – фобия, невроз страха

rational emotive behavior therapy – рационально-эмоционально-поведенческая терапия

realm [relm] – область действия

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.

1. What do you know about cognitive psychology?
2. What are the key concepts of cognitive psychology?
3. What is rational emotive behavior therapy?
4. What are the disorders that can be treated by means of cognitive behavioral therapy?

Exercise 3. Read, translate the article and be ready to do the exercises.
What is cognitive psychology?

Cognitive psychology involves the study of internal mental processes—all of the workings inside your brain, including perception, thinking, memory, attention, language, problem-solving, and learning.

Cognitive psychology – the study of how people think and process information – helps researchers understand the human brain. It also allows psychologists to help people deal with psychological difficulties.

Findings from cognitive psychology help us understand how people think, including how they acquire and store memories. By knowing more about how these processes work, psychologists can develop new ways of helping people with cognitive problems.

Topics in cognitive psychology

Cognitive psychologists explore a wide variety of topics related to thinking processes. Some of these include:

- Attention – our ability to process information in the environment while tuning out irrelevant details;
- Choice-based behavior – actions driven by a choice among other possibilities;
- Decision-making;
- Forgetting;
- Information processing;
- Language acquisition – how we learn to read, write, and express ourselves.
- Memory;
- Problem-solving;
- Speech perception – how we process what others are saying;
- Visual perception – how we see the physical world around us.

History of cognitive psychology

Although it is a relatively young branch of psychology, it has quickly grown to become one of the most popular subfields. Cognitive psychology grew into prominence between the 1950s and 1970s.

Prior to this time, behaviorism was the dominant perspective in psychology. This theory holds that we learn all our behaviors from interacting with our environment. It focuses strictly on observable behavior, not thought and emotion. Then, researchers became more interested in the internal processes that affect behavior instead of just the behavior itself.

This shift is often referred to as the cognitive revolution in psychology. During this time, a great deal of research on topics including memory, attention, and language acquisition began to emerge.

In 1967, the psychologist Ulric Neisser introduced the term cognitive psychology, which he defined as the study of the processes behind the perception, transformation, storage, and recovery of information.

Current Research in Cognitive Psychology

The field of cognitive psychology is both broad and diverse. It touches on many aspects of daily life. There are numerous practical applications for this research, such as providing help coping with memory disorders, making better decisions, recovering from brain injury, treating learning disorders, and structuring educational curricula to enhance learning.

Current research on cognitive psychology helps play a role in how professionals approach the treatment of mental illness, traumatic brain injury, and degenerative brain diseases.

Thanks to the work of cognitive psychologists, we can better pinpoint ways to measure human intellectual abilities, develop new strategies to combat memory problems, and decode the workings of the human brain—all of which ultimately have a powerful impact on how we treat cognitive disorders.

The field of cognitive psychology is a rapidly growing area that continues to add to our understanding of the many influences that mental processes have on our health and daily lives.

From understanding how cognitive processes change as a child develops to looking at how the brain transforms sensory inputs into perceptions, cognitive psychology has helped us gain a deeper and richer understanding of the many mental events that contribute to our daily existence and overall well-being.

The cognitive approach in practice

In addition to adding to our understanding of how the human mind works, the field of cognitive psychology has also had an impact on approaches to mental health. Before the 1970s, many mental health treatments were focused more on psychoanalytic, behavioral, and humanistic approaches.

The so-called "cognitive revolution" put a greater emphasis on understanding the way people process information and how thinking patterns might contribute to psychological distress. Thanks to research in this area, new approaches to treatment were developed to help treat depression, anxiety, phobias, and other psychological disorders.

Cognitive behavioral therapy and rational emotive behavior therapy are two methods in which clients and therapists focus on the underlying cognitions, or thoughts, that contribute to psychological distress.[4]

What is cognitive behavioral therapy?

Cognitive behavioral therapy (CBT) is an approach that helps clients identify irrational beliefs and other cognitive distortions that are in conflict with reality and then aid them in replacing such thoughts with more realistic, healthy beliefs.

If you are experiencing symptoms of a psychological disorder that would benefit from the use of cognitive approaches, you might see a psychologist who has specific training in these cognitive treatment methods.

These professionals frequently go by titles other than cognitive psychologists, such as psychiatrists, clinical psychologists, or counseling psychologists, but many of the strategies they use are rooted in the cognitive tradition.

Careers in cognitive psychology

Many cognitive psychologists specialize in research with universities or government agencies. Others take a clinical focus and work directly with people who are experiencing challenges related to mental processes. They work in hospitals, mental health clinics, and private practices.

Research psychologists in this area often concentrate on a particular topic, such as memory. Others work directly on health concerns related to cognition, such as degenerative brain disorders and brain injuries.

Treatments rooted in cognitive research focus on helping people replace negative thought patterns with more positive, realistic ones. With the help of cognitive psychologists, people are often able to find ways to cope and even overcome such difficulties.

Reasons to consult a cognitive psychologist

- Alzheimer's disease, dementia, or memory loss
- Brain trauma treatment
- Cognitive therapy for a mental health condition
- Interventions for learning disabilities
- Perceptual or sensory issues
- Therapy for a speech or language disorder

How cognitive psychology differs from other branches of psychology?

Whereas behavioral and some other realms of psychology focus on actions – which are external and observable – cognitive psychology is instead concerned with the thought processes behind the behavior. Cognitive psychologists see the mind as if it were a computer, taking in and processing information, and seek to understand the various factors involved.

(Retrieved from https://www.verywellmind.com/cognitive-psychology-4157181)

VOCABULARY EXERCISES

Exercise 4. Give Russian equivalents.

Internal mental processes, acquire memories, a wide variety of, express ourselves, recovering from brain injury, learning disorders, pinpoint ways, cognitive disorders, overall well-being, identify irrational beliefs, counseling psychologists.

Exercise 5. Give English equivalents.

Справиться с психологическими трудностями, результаты исследований в области когнитивной психологии, люди с когнитивными проблемами, в борьбе с нарушениями памяти, интеллектуальные способности человека, лечить когнитивные расстройства, приток сенсорных чувствительных импульсов, другие когнитивные искажения, заменять на здоровые представления, испытывать симптомы, связанный с психическими проблемами.

Exercise 6. Use a monolingual English dictionary and give the definitions of the following words.

Brain, mental process, visual perception, speech perception, cognitive disorder, well-being, irrational belief.

Exercise 7. Write a word in each gap formed from the given one.

Rational, relevant, to treat, perception, difficult, various, to recover, trauma, intellect, power.

1. Usually this means presenting _____ information rather than symbolic or numeric.
2. Every _____ belief carries a real threat.
3. Our mental health seems to depend on both our ability to activate thoughts relevant to the current task and to suppress the _____ ones - mental noise.
4. This encompasses _____ curiosity in adulthood.
5. The impact of cognitive therapy helps patients to cope effectively with a _____ of emotional phobias.
6. So, difficult situations, loss and failure, but mostly unexpected and _____ psyche stressors can make a person vulnerable and reduce his need for self-discovery and self-affirmation.
7. A brief conclusion: you need slow sleep for physical _____ , fast for mental recovery.

8. Clinical psychology is a branch of psychology concerned with helping people with psychological _____ .

9. I believe that psychotherapy can be a _____ tool toward these goals.

10. Practitioners that deal with patients with anxiety and depressive disorders use a combination of behavioral and cognitive _____ .

Exercise 8. Make up phrases and write down sentences with them.

1.	to process	a)	process
2.	to understand	b)	human intellectual ability
3.	to store	c)	information
4.	thinking	d)	memories
5.	choice-based	e)	new ways
6.	language	f)	the human brain
7.	to develop	g)	depression
8.	to measure	h)	acquisition
9.	to treat	i)	irrational beliefs
10.	to identify	j)	behavior

Exercise 9. Match the words with their opposites.

1.	inside	a)	to disappear
2.	wide	b)	outside
3.	popular	c)	few
4.	to emerge	d)	similar
5.	diverse	e)	to reduce
6.	disorder	f)	unpopular
7.	numerous	g)	particular
8.	to enhance	h)	health
9.	to decode	i)	narrow
10.	overall	j)	to encode

GRAMMAR EXERCISES

Exercise 10. Look at the highlighted verbs. Match them to tenses and forms below.

1. Cognitive psychology **grew** into prominence between the 1950s and 1970s.

2. It **has** quickly **grown** to become one of the most popular subfields.

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3.   This shift **is** often **referred** to as the cognitive revolution in psychology.

4.   Before the 1970s, many mental health treatments **were focused** more on psychoanalytic, behavioral, and humanistic approaches.

5.   Cognitive psychology **involves** the study of internal mental processes.

6.   If you **are experiencing** symptoms of a psychological disorder that **would benefit** from the use of cognitive approaches, you might see a psychologist who has specific training in these cognitive treatment methods.

A)   Present Simple Passive
B)   Present Continuous
C)   Present Simple
D)   Past Simple
E)   Would+infinitive
F)   Present Perfect
G)   Past Simple Passive

Exercise 11. Complete the second sentence so that it means the same as the first.

1.   Jean Twenge studies mental health and social adjustment in young people

Mental health and social adjustment in young people _____ by Jean Twenge. (study)

2.   Bacon and Freud met in 1945.

Bacon and Freud _____ each other since 1945. (know)

3.   It is necessary to visit a mental health professional for a proper diagnosis of borderline personality disorder or not.

You _____ a mental health professional for a proper diagnosis of borderline personality disorder or not. (need)

4.   I can't help someone with a mental illness because I don't have relevant education degrees.

If I _____ relevant education degrees, I _____ someone with a mental illness. (have, help)

5.   You underwent psychotherapy a year ago that's why your mental health is good.

If you _____ psychotherapy your mental health _____ good. (not undergo, not be)

6.   He says it would be good to use cognitive behavioral therapy.

He _____ cognitive behavioral therapy. (suggest, use)

7.   I read non-fiction a lot when I was younger.

I _____ non-fiction a lot when I was younger. (use, read)

8.   It would be good if students studied psychology at school.

Students _____ psychology at school (ought, study)

9.   She started studying the history of psychology two months ago.

She _____ the history of psychology for two months. (study)

10.   What are your plans after graduate?

What _____ you _____ after you graduate? (go)

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 12. Answer the questions.

1.   What does cognitive psychology study?

2.   What are the topics of cognitive psychology?

3.   When did cognitive psychology grow into prominence?

4.   When was the term "cognitive psychology" introduced?

5.   What did cognitive revolution put a greater emphasis on?

6.   What are methods of cognitive psychology?

7.   What is cognitive behavioral therapy?

8.   What do treatments rooted in cognitive research focus on?

9.   What are the reasons to consult a cognitive psychologist?

10.   What do cognitive psychologists compare human brain with?

Exercise 13. Say whether the statements are true or false. Give reasons.

1.   Knowing more about internal mental processes allows to develop new ways of helping people with cognitive problems.

2.   Cognitive psychologists explore a wide variety of topics related to behavior.

3.   The term cognitive psychology was introduced by Ulric Neisser.

4.   Prior to 1950-1970, behaviorism was the dominant perspective in psychology.

5.   Ulric Neisser defined cognitive psychology as the study of the conscious and unconscious mind.

6.   Before the 1970s, many mental health treatments were focused more on cognitive approaches.

7.   Treatments based on cognitive research focus on helping people self-actualize.

8.   Cognitive psychology is concerned with the observable behavior.

Exercise 14. Translate the following sentences from Russian into English.

1.   В основе когнитивной психологии лежит изучение памяти, ощущений, реакций на различные ситуации, познавательные процессы, чувства и так далее.

2.   Когнитивно-поведенческая терапия - самое перспективное направление психотерапии.

3.   Когнитивно-поведенческая терапия – это трансдиагностический подход, который вы можете уверенно применять для лечения тревоги.

4.   Создателем рационально-эмоционально-поведенческой терапии является Альберт Эллис

5.   Снижение интеллекта и проблемы с памятью, появляющиеся у множества людей с возрастом, – настоящая беда нашего времени.

6.   Наконец, применяется техника самовнушения, когда клиент проговаривает новые более рациональные утверждения взамен старых – иррациональных.

7.   Мы также будем идентифицировать триггеры, вызывающие иррациональные мысли, ведущие вас к неправильному и вредному питанию.

8.   С развитием когнитивной психологии человечество получает возможность повышать интеллектуальные способности.

9.   Технику можно применять, например, в случае социофобии, когда человек боится реакции других людей.

Exercise 15. Choose one of the topics to make a report and present it in front of the class.

1.   Essential cognitive behavioral therapy techniques and tools
2.   Essential rational emotive behavioral therapy techniques and tools.

Exercise 16. Render the article from Ex.3 on p. 93. Follow the plan in the Appendix 1

PART 2. PSYCHOTHERAPY

TEXT 1.

WHAT IS PSYCHOTHERAPY?

PRE-READING

Exercise 1. Study the vocabulary before reading the text:
umbrella term – обобщающий термин
mental distress – психическое расстройство
psychological technique [tekˈniːk] – психологический прием
verbal technique – вербальный метод
therapeutic relationship – терапевтические отношения
one-on-one – тет-а-тет
to share a goal – иметь общую цель
supportive group – поддерживающая группа
receptive group – восприимчивая группа
jot down [dʒɒt] – кратко записывать
to alter [ˈɔːltə(r)] – внести изменения
maladaptive behavior – неадаптивное поведение
gloomy [ˈgluːmi] – депрессивный
self-exploration – процесс самопознания
transference [ˈtrænsfərəns] – перенос
to delve into [delv] – анализировать
coping strategy [ˈstrætədʒi] – стратегия совладания со стрессом, копинг-стратегия
obsessive-compulsive disorder [əbˌsesɪv kəmˈpʌlsɪv dɪsɔːdə(r)] – обсессивно-компульсивное расстройство
post-traumatic stress disorder [ˌpəʊst trɔːˌmætɪk ˈstres dɪsɔːdə(r)] – посттравматическое стрессовое расстройство
psychotropic [ˌsaɪkəˈtrəʊpɪk] – психотропный

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner:
5. What is psychotherapy?
6. What kind of disorders does psychotherapy help to treat?

7.   What kind of techniques of psychotherapy do you know?

8.   Is psychotherapy effective mode therapy?

Exercise 3. Read, translate the article and be ready to do the exercises.

What is psychotherapy?

Psychology, also known as talk therapy, refers to techniques that help people change behaviors, thoughts, and emotions that cause problems or distress. It is an umbrella term that describes treating psychological disorders and mental distress through verbal and psychological techniques.

During this process, a trained psychotherapist helps the client tackle specific or general problems, such as mental illness or a source of life stress. Depending on the approach used by the therapist, a wide range of techniques and strategies can be used. Almost all types of psychotherapy involve developing a therapeutic relationship, communicating and creating a dialogue, and working to overcome problematic thoughts or behaviors.

Psychotherapy is increasingly viewed as a distinct profession in its own right, but many different types of professionals offer it, including clinical psychologists, psychiatrists, counselors, marriage and family therapists, social workers, mental health counselors, and psychiatric nurses.

Types of psychotherapy

Psychotherapy can take different formats depending on the style of the therapist and the needs of the patient. A few formats that you might encounter include:

Individual therapy, which involves working one-on-one with a psychotherapist.

Couples therapy, which involves working with a therapist as a couple to improve how you function in your relationship.

Family therapy, which centers on improving the dynamic within families and can include multiple individuals within a family unit.

Group therapy, which involves a small group of individuals who share a common goal. (This approach allows members of the group to offer and receive support from others, as well as practice new behaviors within a supportive and receptive group.)

Techniques

When people hear the word "psychotherapy," many imagine the stereotypical image of a patient lying on a couch talking while a therapist sits in a nearby chair jotting down thoughts on a yellow notepad. The reality is that there are a variety of techniques and practices used in psychotherapy.

The exact method used in each situation can vary based upon a variety of factors, including the training and background of the therapist, the preferences of the client, and the exact nature of the client's current problem. Here is a brief overview of the main types of therapy.

Behavioral therapy

When behaviorism became a more prominent school of thought during the early part of the twentieth century, conditioning techniques began to play an important role in psychotherapy.

While behaviorism may not be as dominant as it once was, many of its methods are still very popular today. Behavioral therapy often uses classical conditioning, operant conditioning, and social learning to help clients alter problematic behaviors.

Cognitive behavioral therapy

The approach known as cognitive behavioral therapy (CBT) is a psychotherapeutic treatment that helps patients understand the thoughts and feelings that influence behaviors. CBT is used to treat a range of conditions including phobias, addiction, depression, and anxiety.

CBT involves cognitive and behavioral techniques to change negative thoughts and maladaptive behaviors. The approach helps people to change underlying thoughts that contribute to distress and modify problematic behaviors that result from these thoughts.

Cognitive therapy

The cognitive revolution of the 1960s also had a major impact on the practice of psychotherapy, as psychologists began to increasingly focus on how human thought processes influence behavior and functioning.

For example, if you tend to see the negative aspects of every situation, you will probably have a more pessimistic outlook and a gloomier overall mood.

The goal of cognitive therapy is to identify the cognitive distortions that lead to this type of thinking and replace them with more realistic and positive ones. By doing so, people are able to improve their moods and overall well-being.

Humanistic therapy

Starting in the 1950s, the school of thought known as humanistic psychology began to have an influence on psychotherapy. The humanist psychologist Carl Rogers developed an approach known as client-centered therapy, which focused on the therapist showing unconditional positive regard to the client.

Today, aspects of this approach remain widely used. The humanistic approach to psychotherapy focuses on helping people maximize their potential and stresses the importance of self-exploration, free will, and self-actualization.

Psychoanalytic therapy

While psychotherapy was practiced in various forms as far back as the time of the ancient Greeks, it received its formal start when Sigmund Freud began using talk therapy to work with patients. Techniques commonly used by Freud included the analysis of transference, dream interpretation, and free association.

This psychoanalytic approach involves delving into a person's thoughts and past experiences to seek out unconscious thoughts, feelings, and memories that may influence behavior.

What psychotherapy can help with

Psychotherapy comes in many forms, but all are designed to help people overcome challenges, develop coping strategies, and lead happier and healthier lives.

If you are experiencing symptoms of a psychological or psychiatric disorder, you might benefit from an evaluation by a trained and experienced psychotherapist who is qualified to assess, diagnose, and treat mental health conditions.

Psychotherapy is used to treat a wide range of mental health conditions, including: addiction, anxiety disorders, bipolar disorder, depression, eating disorders, obsessive-compulsive disorder, phobias, post-traumatic stress disorder, substance use disorder.

In addition, psychotherapy has been found to help people cope with the following: chronic pain or serious illnesses, divorce and break-ups, grief or loss, insomnia, low self-esteem, relationship problems, stress.

Benefits

Psychotherapy is often more affordable than other types of therapy and a viable option for those who don't require psychotropic medication.

You can reap the possible benefits of psychotherapy even if you just feel that there is something "off" in your life that might be improved by consulting with a mental health professional.

Notable benefits of psychotherapy include:

- Improved communication skills;
- Healthier thinking patterns and greater awareness of negative thoughts;
- Greater insights about your life;
- Ability to make healthier choices;
- Better coping strategies to manage distress;
- Stronger family bonds.

Effectiveness

One of the major criticisms leveled against psychotherapy calls into question its effectiveness. In one early and frequently cited study, a psychologist named Hans

Eysenck found that two-thirds of participants either improved or recovered on their own within two years, regardless of whether they had received psychotherapy.

However, in numerous subsequent studies, researchers found that psychotherapy can enhance the well-being of clients.

(Retrieved from https://www.verywellmind.com/psychotherapy-4157172)

VOCABULARY EXERCISES

Exercise 4. Give Russian equivalents.

To cause problem, life stress, to develop therapeutic relationship, problematic thoughts, mental health counselor, exact method, variety of factors, social learning, identify the cognitive distortions, overall well-being, to stress the importance, to seek out unconscious thoughts, low self-esteem, viable option.

Exercise 5. Give English equivalents.

Менять поведение, лечение психических расстройств с помощью, решать проблемы, широкое разнообразие приемов, потребности пациента, варьироваться в зависимости от, изменять негативные мысли, способствовать стрессовому переживанию, иметь склонность замечать негативные стороны, анализ явлений переноса, оценить состояние психического здоровья, помогать людям справляться, модель мышления.

Exercise 6. Circle the word or word combination that is different.
1.   Individual therapy/couple therapy/family therapy/cognitive therapy
2.   Classical conditioning/talking cure/operant conditioning/social learning
3.   Grief/insomnia/post-traumatic stress disorder/low self-esteem
4.   Self-exploration/free will/self-actualization/unconscious
5.   Thoughts/feelings/behavior/emotions/mental health

Exercise 7. Write a word in each gap formed from the given one.

Psychotherapy, therapy, problem, to counsel, psychiatry, profession, work, to support, stereotype, anxious.
1.   Prejudice operates mainly through the use of _____ thinking.
2.   Then, after two years working at the clinic and starting college as a psychology major, I was trained as a _____ .

3.   To establish an effective _____ relationship, mental health professionals may consider employing a relaxed pace, open-ended questions, and easy-to-understand language.

4.   I think you are overestimating your _____ mental capabilities.

5.   Being part of a friendly and _____ group can really help you to stay motivated.

6.   Our clinic specializes in _____ disorders and addiction.

7.   The experience of separateness arouses _____ ; it is, indeed, the source of all _____ .

8.   It focuses on changing behaviors which in turn helps to challenge _____ thoughts.

9.   Organizational psychology refers to a specific field of _____ psychology involving human behavior with regard to the workforce.

10. The _____ accepts the client unconditionally, without judgment.

Exercise 8. Find the synonyms of the following words in the text.

Treatment, to overwhelm, competent, idea, to face, person-to-person, to suppose, approach, assortment of, to change, to have a tendency to, explanation, difficulty.

Exercise 9. Match the words with their opposites.

1. to change	a) indistinct
2. trained	b) to worse
3. to overcome	c) original
4. distinct	d) to preserve
5. to improve	e) unreceptive
6. supportive	f) cheerfulness
7. receptive	g) untrained
8. stereotypical	h) optimistic
9. depression	i) to fail
10. pessimistic	j) unsupportive

GRAMMAR EXERCISES

Exercise 10. Find the examples of First Conditional and write them down.

Exercise 11. Complete the First Conditional sentences with your own ideas.

1. If you feel that the problem you are facing interrupts a number of important areas of your life including school, work, and relationships, _____ .

2. If psychotherapy and medications don't work for you, _____ .

3. If_____ psychologists will use cognitive behavioral therapy.

4. If_____ your mental health will grow worse.

5. A person will suffer from drug or alcohol addiction if_____ .

6. If bipolar disorder is not treated,_____ .

7. _____ if mental health issues aren't adequately addressed.

8. A psychiatrist will prescribe antipsychotic drugs if_____ .

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 11. Answer the questions.

1. What does psychotherapy describe?
2. What does psychotherapy involve?
3. What are the types of psychotherapy?
4. What kind of techniques does psychotherapy have?
5. Who began using talk therapy?
6. What disorders are treated by means of psychotherapy?
7. What are the benefits of psychotherapy?

Exercise 12. Choose a,b or c.

1. Psychology is known as
a) talk therapy
b) hypnotherapy
c) dream interpretation

2. Individual therapy involves
a) receiving support from others
b) working with a family unit
c) working one-on-one with a psychotherapist

3. Behavioral therapy often uses
a) changing negative thoughts
b) classical conditioning
c) replacing negative thoughts with more realistic and positive ones

4.   The psychologist Carl Rogers developed an approach known as
a)   psychoanalysis
b)   client-centered therapy
c)   cognitive therapy

5.   The humanistic approach to psychotherapy focuses on helping people
a)   maximize their potential
b)   change their behavior
c)   replace negative thoughts with positive ones

6.   Unconscious thought is one of the key concepts of
a)   psychoanalysis
b)   cognitive psychology
c)   behaviorism

Exercise 13. Translate the following sentences from Russian into English.

1.   Концепция переноса отличает психоанализ от всех других видов современной психотерапии.

2.   Процесс психотерапии временами напоминает детективный роман, временами – археологические раскопки.

3.   Когда человек впервые попадает в кабинет психотерапевта ему сложно сразу рассказать о сокровенном или точно сформулировать запрос.

4.   Согласно современным исследованиям, участие в группах поддержки может помочь справиться с посттравматическим стрессом, депрессией и зависимостями.

5.   Когнитивная терапия также даёт результат при многих других формах тревожности (таких как хроническое беспокойство, фобии, обсессивно-компульсивное расстройство и посттравматическое стрессовое расстройство) и успешно используется при расстройствах личности, таких как пограничное расстройство.

6.   Таким образом, существует множество способов совладания со стрессом, но способствует решению проблемы и адаптации к ситуации активные и функциональные копинг-стратегии.

Exercise 14. Choose one of the topics to make a report and present it in front of the class.
Types of psychotherapy

1.   Individual therapy
2.   Couples therapy
3.   Family therapy
4.   Group therapy

Exercise 15. Render the article from Ex.3 on p. 103. Follow the plan in the Appendix 1

TEXT 2.

HOW NATURE THERAPY NATURE THERAPY HELPS YOUR MENTAL HEALTH

PRE-READING

Exercise 1. Study the vocabulary before reading the text.

nature therapy – природная терапия

ecotherapy [iːkəʊ ˈθerəpi] – экотерапия

to decompress [ˌdiːkəmˈpres] – выходить из стресса

to let off – дать выход своим чувствам

to recharge – перезарядиться

ramification [ˌræmɪfɪˈkeɪʃn] – последствие

mental health malady [ˈmælədi] – проблема с психическим здоровьем

restorative [rɪˈstɒrətɪv] – восстановительный

tranquility [træŋˈkwɪləti] – спокойствие

adventure therapy – приключенческая терапия

animal-assisted therapy – лечение при помощи животных

farming-related therapy – лечение посредством сельскохозяйственной деятельности

wilderness therapy [ˈwɪldənəs] – терапия дикой природой

forest therapy – лесная терапия

mindful practice [ˈmaɪndfl] – осознанная практика

unequivocally [ˌʌnɪˈkwɪvəkəli] – безусловно

psychological marker – психологический маркер

cognitive flexibility – когнитивная гибкость

cognitive performance – когнитивная деятельность

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.

1. What is nature therapy?
2. What sensation do you experience when you are in nature?
3. Does the weather have an effect on your emotions? How?
4. Does nature therapy help be mentally healthy?

Exercise 3. Read, translate the article and be ready to do the exercises.

How nature therapy helps your mental health

It's time to bring nature into our everyday life. While we know intuitively that seeing the birds and squirrels in the local park seems to have a calming effect on us and makes us feel good, empirical evidence is mounting about the benefits of nature therapy.

This article explains what nature therapy involves, how nature therapy can benefit your mental health, and how you can bring nature to your if you happen to be stuck inside.

What is nature therapy?

Nature therapy, which is also called ecotherapy, is based on the concept of using nature to help us heal, especially psychologically. Instead of spending time enjoying and benefiting from the natural environment, we are spending more and more time on screens and online.

We do not spend time outside as much as we did before to decompress, let off steam, or recharge. We may no longer bike through a meadow or play games at the lake, for example, as we did when we were children.

We've replaced those leisurely activities with more time spent on social media and video games. The ramifications are we are a stressed-out society with a variety of mental health maladies.

Green and Blue Therapy

You might hear nature therapy called "green care," "green exercise," or "green therapy." That is because its powerful benefit lies in spending time in green spaces.

But nature therapy also includes time spent near soothing blue oceans, blue rivers, and blue lakes. Being near aquatic environments has a psychologically restorative effect. It puts us in good moods. The color blue also represents calm and tranquility.

The Blue Health project is an organization that has conducted studies about the relationship between blue spaces and health in 18 countries across Europe. After

surveying 18,000 people, researchers discovered that people feel better being near waterways.

In fact, evidence showed a positive association between more exposure to outdoor blue spaces and health, particularly in terms of benefits to mental health and well-being. So, researchers have expanded their notion of ecotherapy to include blue spaces as well.

Nature therapy's various approaches

A host of nature-based therapeutic programs are available to you. There are relaxed approaches like gardening in the backyard, walking in a field of flowers, or floating on a tube in the river.

Nature therapy or ecotherapy can also encompass activities or therapies in which you are formally guided by therapists and trained leaders, too.

Here are some more formalized types of nature therapies:

- Farming-related therapy, which could involve working with crops, often in a community;

- Animal-assisted therapy, which might consist of playing with or training horses or dogs;

- Adventure therapy, which may feature white water rafting or rock climbing;

- Wilderness therapy, which often helps groups of teens and young adults with behavioral issues;

- Forest therapy, also called forest bathing, is a mindful practice in which you use your five senses as you walk through a forest.

The benefits of being in nature

What science is showing is that we can reap the healing powers of Mother Nature and gain a host of mental health benefits. The question is are we partaking in what might be an easy, cost-effective solution to our problems?

The latest research in psychology is furthering our knowledge about how spending time in nature is a low-cost and highly effective way to improve various aspects of our psychological wellness.

Increased happiness

Many books and articles have been published about how to boost happiness. One proven way is by spending more time in nature.

In a review of extensive previous research, Gregory Bratman, PhD, an assistant professor at the University of Washington, helped to chart a course for policymakers. He and his team wanted to create a framework measuring mental health benefits so city planners could incorporate natural settings into their future plans.

In his study, published in Science Advances, Bratman and his colleagues found evidence that contact with nature is associated with many benefits including increases in happiness, a sense of well-being, positive social interactions, and a feeling of meaningfulness in life.

Decreased anxiety, stress and depression

Because anxiety, stress, and depression affect U.S. college students now at alarming rates, another study examined 14 already-published studies involving college-aged adults. Nature-rich environments unequivocally helped reduce mental distress.

The study compared those in urban areas with those in natural environments. What it also revealed was how little time it took to impact these students.

It showed that by spending a minimum of 10 minutes, either sitting or walking in a wide range of natural settings, there was a significant and beneficial impact on the participants' mental health. Scientists used key psychological and physiological markers to measure this.

Uptick in cognitive benefits

Our mind likes it when we spend time in nature. We have better focus, which is also described as sharpened cognition. Another recent study showed that our exposure to natural environments is good for our brain. It improves performance on our working memory, cognitive flexibility, and attentional-control tasks.

How to bring nature indoors

Due to socio-economic reasons, not every group has easy access to green or blue spaces. Furthermore, during inclement weather and cold winter months, even those with the means might not choose to luxuriate in nature. The appeal of a stroll by a river or hike through a nature reserve may not be there.

If you have limited time or access, perhaps an intense work schedule, or are just not comfortable spending prolonged periods of time in the cold, you can still access nature conveniently.

How do we bring nature's benefits inside when we are confined to our homes and workplaces? Here are some easy ways:

Add plants. They not only remove toxins from the air, but research shows that people who spend time around plants have more concern, empathy, and compassion toward others as well as improved relationships.

Decorate with paintings or photographs of nature. Choose pretty landscapes, lush gardens, or natural scenes. In yet another study about the health benefits of nature, researchers found that viewing lovely green scenes resulted in the participants having lower stress levels.

Use soundscapes and download apps of soothing nature sounds. Don't underestimate the power of listening to a waterfall or the sound of rain. The result isn't just enhanced relaxation and a sense of chilling out. Results also include attention restoration and better cognitive performance. In one particular study published in Psychonomic Bulletin & Review participants who listened to nature's sounds, specifically that of the ocean's waves and chirping crickets, performed better on tests than their counterparts who listened to urban sounds like traffic and car horns.

(Retrieved from https://www.verywellmind.com/how-nature-therapy-helps-your-mental-health-5210448)

VOCABULARY EXERCISES

Exercise 4. Give Russian equivalents.
The benefits of nature therapy, to help us heal, in terms of benefits to mental health, to use your five senses, to reap the healing powers, psychological wellness, meaningfulness, at alarming rates, exposure to natural environment, to have compassion for.

Exercise 5. Give English equivalents.
Привносить, оказывать успокаивающее действие на, заменять на, утомленный, оказывать общеукрепляющее действие, придавать бодрое настроение, хорошее самочувствие, уменьшать психическое расстройство, благотворное влияние, кратковременная память, уровень стресса.

Exercise 6. Match the words with their definitions.

animal-assisted therapy	happiness
cognitive flexibility	stress
therapeutic	empathy
wellness	compassion
working memory	relaxation

1.   Having beneficial or curative effects.
2.   understanding a person from his or her frame of reference rather than one's own, or vicariously experiencing that person's feelings, perceptions, and thoughts.
3.   abatement of intensity, vigor, energy, or tension, resulting in calmness of mind, body, or both.

4.	short-term maintenance and manipulation of information necessary for performing complex cognitive tasks such as learning, reasoning, and comprehension.

5.	the therapeutic use of pets to enhance individuals' physical, social, emotional, or cognitive functioning.

6.	a strong feeling of sympathy with another person's feelings of sorrow or distress, usually involving a desire to help or comfort that person.

7.	a dynamic state of physical, mental, and social well-being.

8.	he physiological or psychological response to internal or external stressors.

9.	the capacity for objective appraisal and appropriately flexible action.

10.	an emotion of joy, gladness, satisfaction, and well-being.

Exercise 7. Match the pairs of synonyms.

1.	wellness	a)	ecotherapy
2.	nature therapy	b)	powerful
3.	benefit	c)	healing
4.	restorative	d)	health
5.	therapeutic	e)	restorative
6.	well-being	f)	water
7.	effective	g)	health
8.	aquatic	h)	to reveal
9.	exposure to	i)	contact
10.	to discover	j)	help

Exercise 8. Write a word in each gap formed from the given one.

Intuition, to compress, to charge, to restore, to lead, to interact, meaningful, flexible, to participate, significance.

1.	Individuals who have a history of depression become distressed, they _____ return to automatic cognitive processes that can trigger a depressive episode.

2.	A peak experience is one in which an individual perceives an expansion of themselves, and detects a unity and _____ in life.

3.	An effective _____ also understands psychology.

4.	Just like your phone needs to _____ , you do too.

5.	All this influences the creative self - expression of _____ in art therapy sessions.

6. It may seem strange at first, but writing things down is a great way to _____ and exhale after stress.

7. However, it could soon consume a _____ role in treating schizophrenia.

8. The quicker a person can switch tasks, the greater their cognitive _____ .

9. Sleeping well is a crucial factor contributing to our physical and mental _____ .

10. This influence is realized in different forms of social and psychological _____ .

Exercise 9. Write a compound noun for each definition.

1. a formal type of therapeutic treatment which involves doing outdoor activities in nature is e _____ .

2. an acoustic environment, a virtual/emotional environment created using sound is s _____ .

3. a large area of land, especially in relation to its appearance is l _____ .

4. one that closely resembles another is c _____ .

5. any navigable body of water is w _____ .

6. a yard at the rear of a house is b _____ .

7. a person who decides new policies for a government or organization is p _____ .

8. a basic structure underlying a system, concept, or text is f _____ .

9. the state of being comfortable, healthy, or happy w _____ -_____ .

Exercise 10. What compound adjectives can describe the following?

1. Something that saves money: c_____ -_____ .

2. People are very tense and anxious because of difficulties in their lives: s_____ -_____ .

3. Something that is cheap l_____ -_____ .

4. Something is done, situated, or used out of doors o_____ .

GRAMMAR EXERCISES

Exercise 11. Explain the use of the indefinite and definite articles in the following sentences.

1. Nature therapy, which is also called ecotherapy, is based on **the** concept of using nature to help us heal, especially psychologically.

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2. **The** ramifications are we are **a** stressed-out society with **a** variety of mental health maladies.

3. Being near aquatic environments has **a** psychologically restorative effect.

4. **The** Blue Health project is **an** organization that has conducted studies about **the** relationship between blue spaces and health in 18 countries across Europe.

5. Farming-related therapy, which could involve working with crops, often in **a** community.

6. Forest therapy, also called forest bathing, is **a** mindful practice in which you use your five senses as you walk through **a** forest.

7. **The** question is are we partaking in what might be an easy, cost-effective solution to our problems?

8. In **a** review of extensive previous research, Gregory Bratman, PhD, an assistant professor at **the** University of Washington, helped to chart **a** course for policymakers.

9. In his study, published in Science Advances, Bratman and his colleagues found evidence that contact with nature is associated with many benefits including increases in happiness, **a** sense of well-being, positive social interactions, and **a** feeling of meaningfulness in life.

10. **The** appeal of **a** stroll by **a** river or hike through **a** nature reserve may not be there.

11. If you have limited time or access, perhaps an intense work schedule, or are just not comfortable spending prolonged periods of time in **the** cold, you can still access nature conveniently.

Exercise 12. Put a/an or the.
1. This will create _____ sense of desperation, which is likely to lead to offensive aggression in order to reclaim balance.

2. Experts from the mental hospital of _____ Colorado Mental Health Institute recognized him completely insane but kept him in _____ hospital for only 15 days.

3. As there is _____ physical body there is _____ mental body and _____ energy body.

4. He was _____ first psychologist to investigate learning and memory experimentally.

5. It is often considered _____ mark of _____ severest forms of psychological illness.

6. It should recognize that it is _____ symptom of failed psychotherapy.

7. She has physical therapy, and _____ appointment with _____ psychiatrist on Tuesday. The psychiatrist will make _____ appropriate diagnosis.

8. I really like _____ actor who played the psychiatrist.

9. I also just saw _____ lot of these programs at work on the ground to see who was being helped by nature therapy.

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 13. Answer the questions.
1. What are the other names for "nature therapy"?
2. What is the difference between green and blue therapy?
3. What are the approaches of the nature therapy?
4. What are the advantages of nature therapy?
5. What disorders are treated with nature therapy?
6. What does nature therapy improve?
7. What should you do if you don't have easy access to nature?

Exercise 14. Say whether the statements are true or false. Give reasons.
1. The other name for "nature therapy" is "ecotherapy".
2. We spent more time outside.
3. Green therapy means spending time near soothing blue oceans, blue rivers, and blue lakes.
4. According to the studies conducted by the Blue Health project people feel better being near waterways.
5. Farming-related therapy involves working with crops, often in a community.
6. Scientists used only physiological markers to measure beneficial impact of nature on the participants' mental health.
7. Our exposure to natural environments improves performance on our working memory, cognitive flexibility, and attentional-control tasks.
8. People who spend time around plants have more depression.
9. Participants who listened to nature's sounds performed worse on tests than their counterparts who listened to urban sounds like traffic and car horns.

Exercise 15. Translate the following sentences from Russian into English.

1. Садовая терапия – это процесс использования растений и сада для улучшения благосостояния через воздействие на разум, тело и душу человека.

2. Анималотерапия – это особая разновидность психотерапевтической помощи, когда для лечения пациентов используются различные животные: кошки, собаки, лошади, дельфины или даже некоторые насекомые.

3. Многие люди, у кого есть домашние животные, отмечают, что общение с ними поднимает настроение, радует.

4. Лечение с помощью животных используют в качестве вспомогательного лечения при работе с ДЦП, аутизмом, синдромом Дауна, депрессиями и другими расстройствами.

5. Приключенческая терапия имеет отличие от обычного отдыха или физических занятий.

6. В приключенческой терапии должен быть реальный или воспринимаемый психологический или физический риск.

7. Именно здесь, в дикой природе, открываются глубокие инстинктивные состояния родства и близости с окружающим миром.

8. Связь с природой вызывает значительные изменения в мозге человека, которое начинается с расслабления и успокоения нервной системы.

9. Мы будем об этом специально говорить: исследовать его клинические, психопатологические, психологические маркеры.

10. Так называемая лесная терапия доказывает, что пребывание в атмосфере леса оказывает положительное физиологическое и психологическое воздействие на человека.

Exercise 16. Choose one of the topics to make a report and present it in front of the class.

1. Farming-related therapy
2. Animal-assisted therapy
3. Adventure therapy
4. Wilderness therapy
5. Forest therapy

Exercise 18. Render the article from Ex.3 on p. 111. Follow the plan in the Appendix 1

TEXT 3.

HOW FAMILY THERAPY WORKS

PRE-READING

Exercise 1. Study the vocabulary before reading the text.

family therapy – семейная терапия

to manage conflict – справляться с конфликтом

to foster [ˈfɒstə(r)] – воспитывать

family issue – семейная проблема

family systems therapy – системная семейная психотерапия

functional family therapy – функциональная семейная психотерапия

narrative family therapy – нарративная семейная психотерапия

psychoeducation – обучение психологической самопомощи

to utilize [ˈjuːtəlaɪz] – применять

cohesive [kəʊˈhiːsɪv] – целостный, связный

to stick with – предпочитать

to suit needs – соответствовать потребностям

behavioral technique – поведенческая техника

psychodynamic technique – психодинамическая техника

emotional insight – эмоциональной понимание

emotional awareness – эмоциональное сознание

transition – переход из одного состояния в другое

mood disorder – аффективное расстройство

to neglect – пренебрегать

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.

1.   What is family therapy?
2.   What kind of family issues can be solved?
3.   Do you get on well with other members of your family?
4.   Are you a close family?
5.   If you have conflicts in your family, how do you usually manage them?

Exercise 3. Read, translate the article and be ready to do the exercises.

How family therapy works

Family therapy is a type of treatment designed to help with issues that specifically affect families' mental health and functioning. It can help individual family members build stronger relationships, improve communication, and manage conflicts within the family system. By improving how family members interact and relate to one another, family therapy can foster change in close relationships.

Some of the primary goals of family therapy are to create a better home environment, solve family issues, and understand the unique issues that a family might face.

Types of family therapy

There are several types of family therapy. A few that you might encounter include:

Family systems therapy: This type is an approach that focuses on helping people utilize the strengths of their relationships to overcome mental health problems.

Functional family therapy: This is a short-term treatment often utilized for young people experiencing problems with risky behavior, violence, or substance use. It helps teens and families look for solutions while building trust and respect for each individual.

Narrative family therapy: This type encourages family members to each tell their own story to understand how those experiences shape who they are and how they relate to others. By working with this narrative, the person can start to view problems more objectively than just seeing things through their own narrow lens.

Psychoeducation: This type of treatment is centered on helping family members better understand mental health conditions. By knowing more about medications, treatment options, and self-help approaches, family members can function as a cohesive support system.

Supportive family therapy: This type of therapy focuses on creating a safe environment where family members can openly share what they are feeling and get support from their family.

Some therapists may stick with a specific type of family therapy. In contrast, others may take a more eclectic, multimodal approach that incorporates aspects of different types of treatment to suit the needs of the family.

Techniques

The techniques utilized in family therapy typically depend on factors such as the theoretical orientation of the therapist and the specific needs of the family. Some methods that may be utilized include:

Behavioral techniques: These methods often focus on skills training and psychoeducation to help family members address specific problems. For example, modeling and role-playing might be used to help family members resolve communication problems.

Psychodynamic techniques: These methods involve assessing how each family member interprets and responds to the problems they are facing. The therapist works with the family to develop new emotional insights and explore new ways of responding more effectively.

Structural techniques: These methods focus on helping family members with boundaries and power dynamics within the family. Such techniques can help families create new boundaries and establish routines that improve how the family functions.

Techniques used in family therapy focus on improving emotional awareness, assisting with major changes within a family, helping people accept things they cannot control, and improving communication and collaboration.

What family therapy can help with

Family therapy can help people with many different issues. Some of these include: behavioral problems in children or teens, changes within the family, communication problems, death of loved one, divorce, separation, or marital problems, parent-child conflicts, problems between siblings, parenting issues, stressful events or major life transitions, trauma.

Benefits of family therapy

Because this form of treatment addresses communication, family members can learn how to better share their thoughts and needs and resolve conflicts in a way that is less likely to damage relationships.

This type of therapy also focuses on how family members can address an individual family member's difficulties. For example, if one family member has a mental health condition, family therapy can help alter some conditions that sometimes contribute to the problem.

When individuals are affected by mental illness, family members may sometimes lack awareness of how to help. As a result, they may engage in behaviors that maintain or even worsen aspects of the illness.

Family therapy can help members of the family learn more about what they can do to support their family member who has a mental disorder while preserving their own mental well-being.

Effectiveness

Research suggests that family therapy can be effective for a range of purposes. Some supporting evidence includes:

A 2018 review found that family therapy could be useful in treating adult-focused problems, including relationship distress, intimate partner violence, mood disorders, anxiety disorders, psychosis, alcohol issues, and adjustment to chronic physical illness.

A 2019 study found that family therapy helped improve different areas of family functioning to help teens who were experiencing mental health problems.

One 2019 review found that family therapy demonstrated effectiveness in treating conduct problems, emotional problems, eating disorders, somatic problems, and recovery from abuse or neglect. The study also found that it was useful either when utilized independently or as part of a multimodal treatment program.

Further research is needed to better understand how family therapy may be most effective and how it compares to other forms of treatment.

Things to consider

Because family therapy involves talking about emotional problems and conflicts, it can be difficult and upsetting. In some cases, people may initially feel worse before they begin to improve. It is important to remember that a professional therapist is there to help members of the family work through these conflicts and handle the intense emotions that people may experience.

While family therapy can be useful for various issues, that doesn't mean it is right for everyone or every situation. Some other types of treatment that may also be useful include cognitive-behavioral therapy (CBT) or child psychotherapy.

(Retrieved from https://www.verywellmind.com/family-therapy-definition-types-techniques-and-efficacy-5190233)

VOCABULARY EXERCISES

Exercise 4. Read the definition and guess the word.

1. _____ - the occurrence of mutually antagonistic or opposing forces, including events, behaviors, desires, attitudes, and emotions.

2. _____ - a form of psychotherapy that focuses on the improvement of interfamilial relationships and behavioral patterns of the family unit as a whole, as well as among individual members and groupings, or subsystems, within the family.

3. _____ - reliance on or confidence in the dependability of someone or something.

4. _____ - treatment for individuals, couples, or families that helps them reinterpret and rewrite their life events into true but more life-enhancing narratives or stories.

5. _____ - a focus on self-guided, in contrast to professionally guided, efforts to cope with life problems. Self-help can involve self-reliance, in which one addresses such problems on one's own (e.g., by reading self-help books), or it can involve joining with others to address shared concerns together.

6. _____ - an organized set of assumptions or preferences for given theories that provides a counselor or clinician with a conceptual framework for understanding a client's needs and for formulating a rationale for specific interventions.

7. _____ - an awareness of one's own emotional reactions or those of others.

8. _____ - an awareness of one's own emotional reactions or those of others.

9. _____ - an abnormal mental state involving significant problems with reality testing It is characterized by serious impairments or disruptions in the most fundamental higher brain functions—perception, cognition and cognitive processing, and emotions or affect—as manifested in behavioral phenomena, such as delusions, hallucinations, and significantly disorganized speech.

10. _____ - any of a group of disorders that have as their central organizing theme the emotional state of fear, worry, or excessive apprehension.

Exercise 5. Find English equivalents of the following word combinations in the text.

Направленный на помощь, строить отношения, взаимодействовать и относиться друг к другу, главные цели, искать решения, уделять особое значение, комплексная система поддержки, мультимодальный подход, конкретные нужды семьи, решать конкретные проблемы, толковать проблему, внутри семьи, разрушать отношения, сохраняя свое собственное психическое здоровье.

Exercise 6. Match the words with their opposites.

1. to improve	a) safe
2. short-term	b) separated
3. risky	c) marriage
4. violence	d) neglect
5. cohesive	e) to worsen
6. support	f) ineffectively
7. specific	g) kindness
8. effectively	h) enough
9. separation	i) general

10.lack	j) long-term

Exercise 7. Write a word in each gap formed from the given one.

To solve, to narrate, to open, theory, to communicate, to collaborate, emotion, to transit, stress, ill.

1. However people generally adapt well over time to life-changing situations and _____ conditions.

2. Only well-trained, very experienced hypnotherapists treat these clients, and then only in _____ with the client's psychiatrist.

3. Not one work on child psychology can now _____ repeat the disproved truths as if the child were an adult in miniature.

4. Borderline personality disorder is a serious mental _____ less known than schizophrenia or bipolar disorder, but no less common.

5. Contrary to psychologists, psychiatrists focus much more on pharmacological _____ for mental disorders.

6. This is not enough for social adaptation and _____ with other people.

7. Therefore, _____ psychology helps us, in fact, to know ourselves, both internally and externally.

8. Another factor is your _____ state.

9. Adolescent psychology seeks to understand teens and help them make the _____ from child to adult.

10. In fact there's an approach called " _____ therapy," where the whole goal is to retell someone's story.

Exercise 8. Make up verb phrases. Write down your own sentences using the phrases:

1.	to affect	a)	change in close relationships
2.	to build	b)	mental health condition
3.	to manage	c)	families' mental health
4.	to foster	d)	trust
5.	to solve	e)	specific problems
6.	to build	f)	conflicts
7.	to understand	g)	emotional awareness
8.	to get	h)	family issues
9.	to address	i)	support from the family
10.	to improve	j)	stronger relationships

GRAMMAR EXERCISES

Exercise 9. Make questions to the sentences.

General questions:

E.g. It can help individual family members build stronger relationships. – Can it help individual family members build stronger relationships?

1. Family therapy can foster change in close relationships.
2. It helps teens and families look for solutions while building trust and respect for each individual.
3. A 2018 review found that family therapy could be useful in treating adult-focused problems.

Special questions:

E.g. These methods often focus on skills training and psychoeducation. (What) – What do these methods often focus on?

1. It helps teens and families look for solutions while building trust and respect for each individual. (Who)
2. By knowing more about medications, treatment options, and self-help approaches, family members can function as a cohesive support system. (How)
3. A 2019 study found that family therapy helped improve different areas of family functioning to help teens who were experiencing mental health problems. (When)

Tag questions:

E.g. Family therapy involves talking about emotional problems and conflicts. - Family therapy involves talking about emotional problems and conflicts, doesn't it?

1. Family therapy can be useful for various issues.
2. They may engage in behaviors that maintain or even worsen aspects of the illness.
3. Individuals are affected by mental illness.
4. They cannot control some things.

Indirect questions:

E.g. May people initially feel worse before they begin to improve? (Can you tell me…) – Can you tell me if people may feel worse before they begin to improve?

1. Can people start to view problems objectively? (Do you know…)
2. What does supportive family therapy focus on? (I wonder…)
3. What doses family issues include? (Could you tell me…)
4. Does family therapy involve talking about emotional problems and conflicts?

Exercise 10. Order the words to make questions.

1.   Separate/philosophy/did/science/from/when/and/a/become/psychology?

2.   Gestalt/an/psychoanalysis/alternative/therapy/to/conventional/is?

3.   Generally/you/wondered/more/ever/inner/Freud/about/know/do/Jofi Wolf/dogs/of/Lün/if/the/lives/or.

4.   People with mental illness are the most vulnerable people on Earth, are not they?

5.   Not/psychologist/you/do/why/consult?

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 11. Answer the questions.

1. What kind of issues does family therapy treat?
2. What types of family therapy are there?
3. What is narrative family therapy?
4. What does supportive-family therapy focus on?
5. What techniques are utilized in family therapy?
6. What can family therapy help with?
7. What are the benefits of family therapy?
8. Is family therapy effective? Why?

Exercise 12. Say whether the statements are true or false. Give reasons.

1.   Family therapy can foster change in close relationships.

2.   Functional family therapy focuses on helping people utilize the strengths of their relationships to overcome mental health problems.

3.   The type of treatment is centered on helping family members better understand mental health conditions is narrative family therapy.

4.   The main goal of supportive family therapy is creating a safe environment where family members can openly share what they are feeling and get support from their family.

5.   The techniques for family therapy depend on do not depend on specific needs of family.

6.   Behavioral techniques assess how each family member interprets and responds to the problems they are facing.

7.   Structural techniques help family members with boundaries and power dynamics within the family.

8.   Family therapy can help people only with parent-child conflicts.

Exercise 13. Translate the following sentences from Russian into English.

1. Она занимается частной практикой семейной терапии, ведёт группы психологической поддержки, помогает людям в переустройстве их жизни, учит их оставлять позади разногласия и конфликты.

2. Принято считать, что конфликты между родителями и детьми – явление постоянное и «проблема отцов и детей» будет существовать вечно.

3. На отношение родителей к детям влияет достаточное количество времени у взрослых на общение и взаимодействие с детьми (игры, прогулки, совместные дела).

4. Дети выбирают непривычные для них и для родителей «ненормированные» способы поведения, когда они обделены родительским вниманием.

5. Нарративный подход — направление семейной терапии, базирующееся на идее о том, что человек конституирует свою жизнь через историю.

6. В основе нарративной (повествовательной) терапии лежит работа с жизненными историями клиентов.

7. Многие направления семейной психотерапии направлены на работу с родственниками зависимых людей.

8. Одной из задач семейной психотерапии является коррекция детско-родительских отношений.

Exercise 14. Choose one of the topics and make a report, present in the front of the class.

1. Family systems therapy
2. Functional family therapy
3. Narrative family therapy
4. Psychoeducation
5. Supportive family therapy

Exercise 15. Render the article from Ex.3 on p. 121. Follow the plan in the Appendix 1

TEXT 4.

HOW BEHAVIORAL THERAPY WORKS

PRE-READING

Exercise 1. Study the vocabulary before reading the text.

to eliminate – исключать, устранять

action-based – основанный на действии

severity – степень выраженности

cognitive behavioral play therapy – когнитивно-поведенческая игровая терапия

dialectical-behavioral therapy [ˌdaɪəˈlektɪkl] – диалектико-бихевиоральная терапия

social learning theory – теория социального научения

aversive stimulus [əˈvɜːsɪv] – раздражитель, вызывающий негативную реакцию

flooding [ˈflʌdɪŋ] – имплозивная терапия

fear-invoking – вызывающий страх

systematic desensitization [diːˌsensətaɪˈzeɪʃn] – систематическая десенситизация

contingency management [kənˈtɪndʒənsi] – ситуационное управление

extinction – торможение

attention deficient hyperactivity disorder [əˌtenʃn ˈdefɪsɪt ˌhaɪpəræk ˈtɪvəti dɪsɔːdə(r)] – синдром дефицита внимания с гиперактивностью

autism spectrum disorder [ˌɔːtɪzəm ˈspektrəm dɪsɔːdə(r)] – заболевание аутистического спектра

problem-focused – проблемно-ориентированный

action-oriented - ориентированный на действие

Exercise 2. Before reading the text, answer the following questions and discuss them with your partner.

1. What types of behavioral therapy do you know??

2. What is the difference between behavioral therapy and other type of therapy (choose any)?

3. What kind of mental disorders can be treated with behavioral therapy?

Exercise 3. Read, translate the article and be ready to do the exercises.
How behavioral therapy works

Behavioral therapy is a term that describes a broad range of techniques used to change maladaptive behaviors. The goal is to reinforce desirable behaviors and eliminate unwanted ones.

Unlike the types of therapy that are rooted in insight (such as psychoanalytic therapy and humanistic therapies), behavioral therapy is action-based. Because of this, behavioral therapy tends to be highly focused. The behavior itself is the problem and the goal is to teach people new behaviors to minimize or eliminate the issue.

Types of behavioral therapy

There are a number of different types of behavioral therapy. The type of therapy used can depend on a variety of factors, including the condition being treated and the severity of the person's symptoms.

Applied behavior analysis uses operant conditioning to shape and modify problematic behaviors.

Cognitive behavioral therapy (CBT) relies on behavioral techniques, but the difference is that CBT adds a cognitive element, focusing on the problematic thoughts behind behaviors.

Cognitive behavioral play therapy utilizes play to assess, prevent, or treat psychosocial challenges. The therapist may use play to help a child learn how to think and behave differently.

Dialectical behavioral therapy (DBT) is a form of CBT that utilizes both behavioral and cognitive techniques to help people learn to manage their emotions, cope with distress, and improve interpersonal relationships.

Exposure therapy utilizes behavioral techniques to help people overcome their fears of situations or objects. This approach incorporates techniques that expose people to the source of their fears while practicing relaxation strategies. It is useful for treating specific phobias and other forms of anxiety.

Rational emotive behavior therapy (REBT) focuses on identifying negative or destructive thoughts and feelings. People then actively challenge those thoughts and replace them with more rational, realistic ones.

Social learning theory centers on how people learn through observation. Observing others being rewarded or punished for their actions can lead to learning and behavior change.

What are behavioral therapy techniques?

In order to understand how behavioral therapy works, it is important to know more about the basic principles that contribute to behavioral therapy. The techniques

used in this type of treatment are based on the theories of classical conditioning and operant conditioning.

Classical conditioning

Classical conditioning involves forming associations between stimuli. Previously neutral stimuli are paired with a stimulus that naturally and automatically evokes a response. After repeated pairings, an association is formed and the previously neutral stimulus will come to evoke the response on its own.

Classical conditioning is one way to alter behavior. Several different techniques and strategies are used in this approach to therapy.

Aversion therapy: This process involves pairing an undesirable behavior with an aversive stimulus in the hope that the unwanted behavior will eventually be reduced. For example, someone with an alcohol use disorder might take Antabuse (disulfiram), a drug that causes severe symptoms (such as headaches, nausea, anxiety, and vomiting) when combined with alcohol.

Flooding: This process involves exposing people to fear-invoking objects or situations intensely and rapidly. It is often used to treat phobias. During the process, the individual is prevented from escaping or avoiding the situation.

Systematic desensitization: In this technique, people make a list of fears and then learn to relax while concentrating on these fears. Starting with the least fear-inducing item and working their way to the most fear-inducing item, people systematically confront these fears under the guidance of a therapist. Systematic desensitization is often used to treat phobias and other anxiety disorders.

Operant conditioning

Operant conditioning focuses on how reinforcement and punishment can be utilized to either increase or decrease the frequency of a behavior. Behaviors followed by desirable consequences are more likely to occur again in the future, while those followed by negative consequences become less likely to occur.

Behavioral therapy techniques use reinforcement, punishment, shaping, modeling, and related techniques to alter behavior. These methods have the benefit of being highly focused, which means they can produce fast and effective results.

Contingency management: This approach uses a formal written contract between a client and a therapist (or parent or teacher) that outlines behavior-change goals, reinforcements, rewards, and penalties. Contingency contracts can be very effective in producing behavior changes since the rules are spelled out clearly, preventing both parties from backing down on their promises.

Extinction: Another way to produce behavior change is to stop reinforcing behavior in order to eliminate the response. Time-outs are a perfect example of the

extinction process. During a time-out, a person is removed from a situation that provides reinforcement. By taking away what the person found rewarding, unwanted behavior is eventually extinguished.

Behavior modeling: This technique involves learning through observation and modeling the behavior of others. Rather than relying simply on reinforcement or punishment, modeling allows individuals to learn new skills or acceptable behaviors by watching someone else perform those desired skills.

Token economies: This strategy relies on reinforcement to modify behavior. Parents and teachers often use token economies, allowing kids to earn tokens for engaging in preferred behaviors and lose tokens for undesirable behaviors. These tokens can then be traded for rewards such as candy, toys, or extra time playing with a favorite toy.

What behavioral therapy can help with

Behavioral therapy can be utilized to treat a wide range of psychological conditions and disorders, including: bipolar disorder, alcohol and substance use disorders, anxiety, attention-deficit/hyperactivity disorder (ADHD), autism spectrum disorders, borderline personality disorder (BPD), depression, eating disorders, panic disorder, phobias, obsessive-compulsive disorder (OCD).

Behavioral therapy is problem-focused and action-oriented. For this reason, it can also be useful for addressing specific psychological concerns such as anger management and stress management.

Benefits of behavioral therapy

Behavioral therapy is widely used and has been shown to be effective in treating a number of different conditions. Cognitive behavioral therapy, in particular, is often considered the "gold standard" in the treatment of many disorders, and cognitive behavioral play therapy, specifically, can be effective for children where other types of therapy aren't.

In addition, behavioral therapy has been found to help people with the following: communication, coping strategies, healthier thought patterns, self-esteem.

Effectiveness

How well behavioral therapy works depends on factors such as the specific type of treatment used as well as the condition that is being treated.

This does not mean that CBT or other behavioral approaches are the only types of therapy that can treat mental illness. It also doesn't mean that behavior therapy is the right choice for every situation.

Anxiety disorders, including post-traumatic stress disorder (PTSD), panic disorder, obsessive-compulsive disorder (OCD), and phobias, for example, often

respond well to behavioral treatments. However, researchers found that the effectiveness of behavioral therapy, specifically CBT, in the treatment of substance use disorders can vary depending on the substance being misused.

CBT was also shown to have beneficial effects on some symptoms of schizophrenia but showed no benefits on relapse and hospital admission when compared to other forms of treatment.

Things to consider

Behavioral therapy has a number of advantages. However, behavioral approaches are not always the best solution.

It's not enough for complex mental health conditions

When treating certain psychiatric disorders such as severe depression and schizophrenia, behavioral therapy often must be used in conjunction with other medical and therapeutic treatments. Behavioral therapy can help clients manage or cope with certain aspects of these psychiatric conditions, but should not be used alone.

It may not account for underlying problems

Behavioral treatments tend to focus on current problems with functioning and may not fully appreciate or address the underlying factors that are contributing to a mental health problem.

It may not address the whole picture

Behavioral approaches are centered on the individual working to change their behaviors. Some of these approaches, however, often don't address how situations and interpersonal relationships might be contributing to a person's problems.

(Retrieved from https://www.verywellmind.com/what-is-behavioral-therapy-2795998)

VOCABULARY EXERCISES

Exercise 4. Complete the table with the appropriate word forms.

NOUN	ADJECTIVE	TRANSLATION
behavior	behavioral	
desire	desirable	
severity	severe	
problem	problematic	
anxiety	anxious	
emotion	emotive	
benefit	Beneficial	
psychiatry	psychiatric	

Exercise 5. Give Russian equivalents.

Maladaptive behaviors, applied behavior analysis, to manage the emotions, destructive thoughts, to cause severe symptoms, to expose people to fears, negative consequences, psychological concerns, to respond well to behavioral treatments.

Exercise 6. Give English equivalents.

Целый комплекс, выраженность симптомов у человека, улучшать межличностные отношения, преодолеть страх, вызывать реакцию, сочетание нежелательного поведения, противостоять страху, правильный выбор в любой ситуации, оказывать благотворное влияние, не следует использовать в качестве монотерапии.

Exercise 7. Match the words to form compound words. They all have a hyphen. Translate them and make your own sentences.

1.	action-	a)	invoking
2.	fear-	b)	outs
3.	fear	c)	focused
4.	time-	d)	based
5.	behavior	e)	oriented
6.	problem-	f)	change
7.	action-	g)	inducing

Exercise 8. Write a word in each gap formed from the given one.

Wanted, use, like, desirable, adaptive, advantage, to reinforce, to desensitize, previous, severe.

1. Among the most effective psychotherapeutic methods are systematic _____ , paradoxical intention, psychoanalysis, and cognitive behavioral therapy.

2. Antipsychotic drugs attribute such an _____ effect as a violation of the body's ability to regulate temperature.

3. Behaviorism does not account for other types of learning, especially learning that occurs without the use of _____ and punishment.

4. Misuse or abuse of children affects the development of _____ behavior.

5. Harvard biologist Richard Lewontin is equally critical, calling evolutionary psychology "the latest episode in the _____ of biology."

6. As the author of scientific papers in study used some innovative approaches, not _____ used in psychology.

7.   The prognosis for this form of paralysis is usually determined by the _____ of mental disorders and the presence of symptomatic epilepsy.

8.   Outside the stage of exacerbation, _____ symptoms are completely absent or mild.

9.   A definite _____ of psycholytic therapy is its theoretical dependence on conventional dynamic psychotherapy.

10.   _____ drug treatment, psychotherapy involves a more active role of the patient in the treatment process.

Exercise 9. Match the words with their opposites.

1.	to minimize	a)	mildness
2.	broad	b)	to maximize
3.	to eliminate	c)	to destroy
4.	severity	d)	to retreat
5.	to cope with	e)	calmness
6.	destructive	f)	constructive
7.	to shape	g)	harm
8.	benefit	h)	narrow
9.	acceptable	i)	to include
10.	anger	j)	unacceptable

GRAMMAR EXERCISES

Exercise 10. What verb forms follow these verbs: gerund, infinitive+to or bare infinitive? Find in the text.

To come, may, to utilize, to involve, to allow, to stop, can, to use, should, to tend, to teach, to learn, to help.

Exercise 11. Complete the sentences. Choose from these verbs (in the correct form: gerund, infinitive+to or bare infinitive)

To prescribe, to become, to treat, to feel, to use (x2), to play, to take (x2), to give up.

6.   Emotional abuse threatens _____ a national illness.

7.   Freud suggested _____ this term even in the complete absence of paralysis, for example, in cases of epilepsy or mental retardation.

8.   Only 18% stated that parents should _____ such childrearing practice.

9.   He needed _____ visits at a psychologist for fifteen months.

10. Typically, healthcare practitioners try to avoid _____ high doses and long-term use of these types of drugs.

11. We also know that if we don't let children _____ , they don't develop well.

12. Never attempt _____ mental illness without professional assistance.

13. Now they hope _____ that finding to develop better medication to treat this problem.

14. I'll keep on _____ care of her.

15. And knowing this, when we find ourselves in situations which make us _____ anxious, angry, afraid, or sad, we can easily diffuse these negative emotions.

COMPREHENSION AND DISCUSSION EXERCISES

Exercise 12. Answer the questions.
1. Give the definition of "behavioral therapy".
2. What is the difference between behavioral therapy and psychoanalysis?
3. What are the types of behavioral therapy?
4. What techniques of behavioral therapy are there?
5. What does classical conditioning involve?
6. What does operant conditioning focus on?
7. What does behavioral therapy treat?
8. Does behavioral therapy have benefits?
9. Is this type of therapy effective? Why?

Exercise 13. Complete the table.

Techniques of behavioral therapy	Key points
Operant conditioning	
Contingency management	
Extinction	
Behavior modeling	
Token economies	
Classical conditioning	
Aversion therapy	
Flooding:	

Systematic desensitization	

Exercise 14. Translate the following sentences from Russian into English.

1. Классической методикой бихевиоральной терапии является десенситизация.

2. Традиционно важным компонентом систематической десенсибилизации является релаксация.

3. Диалектико-поведенческая терапия относится к «третьей волне» когнитивной поведенческой терапии и сочетает в себе стратегии поведенческой терапии и практики осознанности.

4. Имплозивная техника нацелена на работу с памятью человека, его вниманием, восприятием с целью изменить дезадаптивные когнитивные паттерны и нерациональные убеждения.

5. Консультативная диалектическая поведенческая терапия является мировым эталоном оказания помощи людям с пограничным расстройством личности.

6. Суть оперантного научения заключается в том, чтобы установить ассоциативную связь между поведением и следствием этого поведения.

Exercise 15. Choose one of the topics to make a report and present it in front of the class.

Applied behavior analysis
Cognitive behavioral therapy (CBT)
Cognitive behavioral play therapy
Dialectical behavioral therapy (DBT)
Exposure therapy
Rational emotive behavior therapy (REBT)
Social learning theory

Exercise 16. Render the article from Ex.3 on p. 130. Follow the plan in the Appendix 1

SUPPLEMENTARY READING

PART 3. MENTAL DISORDERS

TEXT 1.

WHAT'S AN EATING DISORDER?

Formally classified as "feeding and eating disorders" in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), the term "eating disorders" represents a group of complex mental health conditions that can seriously impair health and social functioning.

Because of the physical nature of their defining symptoms, eating disorders can cause both emotional distress and significant medical complications. They also have the highest mortality rate of any mental disorder.

Types of eating disorders

There are many types of feeding and eating disorders, and they all come with their own defining characteristics and diagnostic criteria. The eating disorders formally recognized by the Diagnostic and Statistical Manual of Mental Disorders (DSM-5) include the following.

Binge eating disorder (BED)

Binge eating disorder, the most recently recognized eating disorder, is the most common. It is characterized by repeated episodes of binge eating—defined as the consumption of a large amount of food accompanied by a feeling of loss of control. It is found in higher rates among people of larger body sizes. Weight stigma is commonly a confounding element in the development and treatment of BED.

Bulimia nervosa (BN)

Bulimia nervosa involves recurrent episodes of binge eating followed by compensatory behaviors, or those designed to make up for the calories consumed. These behaviors may include vomiting, fasting, excessive exercise, and laxative use.

Anorexia nervosa (AN)

Anorexia nervosa is characterized by the restricted intake of food, leading to a lower than expected body weight, fear of weight gain, and disturbance in body image. Many people are unaware that anorexia nervosa can also be diagnosed in individuals with larger bodies. Although anorexia is the eating disorder that receives the most attention, it is actually the least common.

Other specified feeding and eating disorder (OSFED)

Other specified feeding and eating disorder is a catchall category that includes a wide range of eating problems that cause significant distress and impairment but do not meet the specific criteria for anorexia nervosa, bulimia nervosa, or binge eating disorder. OSFED and unspecified feeding or eating disorder (UFED) replaced the eating disorder not otherwise specified (EDNOS) category in previous versions of the DSM.

People diagnosed with OSFED often feel invalidated and unworthy of help, which is not true. OSFED can also be as severe as other eating disorders and include subclinical eating disorders.

Research shows that many people with subclinical eating disorders will develop full eating disorders. Subclinical eating disorders can also describe a phase that many people in recovery pass through on their way to full recovery.

Avoidant/Restrictive food intake disorder (ARFID)

Previously called selective eating disorder, avoidant/restrictive food intake disorder (ARFID) is an eating disorder that involves a restricted food intake in the absence of the body image disturbance commonly seen in anorexia nervosa. It is manifested by persistent failure to meet appropriate nutritional and/or energy needs.

Orthorexia nervosa

Orthorexia nervosa is not an official eating disorder in the DSM-5, though it has attracted a great deal of recent attention as a proposed diagnosis for future editions. It differs from other eating disorders because the unhealthy obsession does not typically come from a desire to lose weight. Further, the focus is not on food quantity but rather food quality.

Orthorexia nervosa is an unhealthy obsession with healthy eating and involves adhering to a theory of healthy eating to the point that one experiences health, social, and occupational consequences.

Other Eating Disorders

In addition to the ones listed above, other eating disorders include: night eating syndrome, pica, purging disorder, rumination disorder.

Symptoms of an eating disorder

Although symptoms of different eating disorders vary greatly, some may indicate a reason to investigate further. What's more, if your thoughts and/or behaviors surrounding food, weight, or body image are causing distress and impacting daily functioning, it's time to seek help.

- Dietary restriction;
- Frequent weight changes or being significantly underweight;
- Negative body image;

- Presence of binge eating;
- Presence of excessive exercise;
- Presence of purging, laxative, or diuretic use;
- Excessive thoughts surrounding food, body image, and weight;

Mental Effects

Eating disorders often occur along with other mental disorders, most often anxiety disorders, including:

- Body dysmorphic disorder (BDD)
- Generalized anxiety disorder (GAD)
- Obsessive-compulsive disorder (OCD)
- Social anxiety disorder (GAD)

Anxiety disorders usually predate the onset of an eating disorder. Often, people with eating disorders also experience depression and score high on measures of perfectionism.

Physical effects

Because sufficient intake of nutritionally balanced foods is essential for regular functioning, eating disorders can significantly affect physical and mental operations. A person does not have to be underweight to experience the medical consequences of an eating disorder. Eating disorders affect every system of the body and can lead to physical health problems like: brain mass loss, cardiovascular problems, gastrointestinal issues (e.g., chronic constipation, gastroesophageal reflux), dental problems, disrupted sleep patterns, fainting spells, hair loss or downy hair all over the body (called lanugo), loss of menstrual period post-puberty (or delayed first period), musculoskeletal injuries and pain, weakened bones.

Diagnosis of eating disorders

Medical physicians or mental health professionals, including psychiatrists and psychologists, can diagnose eating disorders. Often, a pediatrician or primary care doctor will diagnose an eating disorder after noticing symptoms during a regular check-up or after a parent or family member expresses concern over their loved one's behavior.

Although there is no one laboratory test to screen for eating disorders, your doctor can use a variety of physical and psychological evaluations as well as lab tests to determine your diagnosis, including:

- A physical exam, during which your provider will check your height, weight, and vital signs;
- Lab tests, including a complete blood count, liver, kidney, and thyroid function tests, urinalysis, X-ray, and an electrocardiogram;

- Psychological evaluation, which includes personal questions about your eating behaviors, binging, purging, exercise habits, and body image.

There are also multiple questionnaires and assessment tools used to assess a person's symptoms, including:

Eating Disorder Inventory;

SCOFF Questionnaire;

Eating Attitudes Test;

Eating Disorder Examination Questionnaire (EDE-Q).

Who is diagnosed?

Contrary to popular belief, eating disorders do not only affect teenage girls. They occur in people of all genders, ages, races, ethnicities, and socioeconomic statuses. They are, however, more commonly diagnosed in women.

Men are underrepresented in eating disorder statistics—the stigma of having a condition associated primarily with women often keeps them from seeking help and getting diagnosed. Furthermore, eating disorders may also present differently in men.

Eating disorders have been diagnosed in children as young as age 6 and in older adults and seniors. The different ways eating disorders manifest in these populations can contribute to their unrecognizable nature, even by professionals.

While eating disorders affect people of all ethnic backgrounds, they are often overlooked in non-white populations due to stereotyping. The mistaken belief that eating disorders only affect affluent white females has contributed to the lack of public health treatment for others—the only option available to many underserved and marginalized populations.

And although not well-studied, it is postulated that the experience of discrimination and oppression among transgender populations contribute to higher rates of eating and other disorders among transgender individuals.

Causes of eating disorders

Eating disorders are complex illnesses. While we do not definitively know what causes them, some theories exist.

It appears that 50% to 80% of the risk for developing an eating disorder is genetic, but genes alone do not predict who will develop an eating disorder. It is often said that "genes load the gun, but environment pulls the trigger."

Certain situations and events—often called "precipitating factors"—contribute to or trigger the development of eating disorders in those who are genetically vulnerable.

Some environmental factors implicated as precipitants include: abuse, bullying, dieting, life transitions, mental illness, puberty, stress, weight stigma.

It has also become common to blame eating disorders on the media. While media influence is recognized as a complicating factor, it isn't considered an underlying cause of eating disorder development in individuals. Ultimately, a person must also have a genetic vulnerability for eating disorders to develop.

(Retrieved from https://www.verywellmind.com/eating-disorders-4157252)

TEXT 2.

WHAT IS BIPOLAR DISORDER?

Bipolar disorder is a mental health condition defined by periods (better known as episodes) of extreme mood disturbances. Bipolar disorder affects a person's mood, thoughts, and behavior. It is a chronic condition, meaning that it is lifelong. Symptoms can be managed, however, with proper treatment.

There are two main types of bipolar disorders: bipolar I and bipolar II. According to the Diagnostic and Statistical Manual of Mental Disorders, bipolar I disorder involves episodes of severe mania and often depression. Bipolar II disorder involves a less severe form of mania called hypomania.

Symptoms

Despite the major difference when it comes to mania in the two types of bipolar disorder, there are quite a few similarities in symptoms.

Depressive Episodes

In bipolar I disorder, a major depressive episode (one or more) usually occurs, but it is not required. Bipolar II disorder involves one or more major depressive episodes. Both disorders may include periods of euthymia, which is a term used to describe emotionally stable periods.

Common symptoms that occur in a major depressive episode include:

Insomnia or hypersomnia;

Unexplained or uncontrollable crying;

Severe fatigue;

Loss of interest in things the patient enjoys during euthymia.

Mania

Manic episodes last at least seven days. An individual experiencing a manic episode may experience: a marked increase in energy, feelings of euphoria, hallucinations or delusions, less need for sleep.

During a manic episode, individuals may engage in reckless behavior—for example, risky sexual behavior, excessive spending, or impulsive decision-making.

Hypomania

An individual experiencing a hypomanic episode may experience similar symptoms to those of a manic episode, but their functioning won't be markedly impaired. Many individuals who experience hypomania associated with bipolar II enjoy the increased energy and decreased need for sleep.

An episode of hypomania does not escalate to a point that a person needs hospitalization, which may happen with a person experiencing mania—especially if they are becoming a danger to others and/or themselves.

Causes

While the exact cause of bipolar disorder remains unclear, genetics is believed to play a major role. This is evidenced, in part, by studies of twins in which one or both had a bipolar I diagnosis. In 40% of identical twins (those with identical gene sets), both twins were found to have bipolar disorder compared to less than 10% of fraternal twins (who don't share all of the same genes)

Other contributing factors include abnormalities in a person's brain circuitry, irregularities in neurotransmitters, and environmental factors such as childhood trauma or abuse.

Diagnosis

When diagnosing bipolar disorder (regardless of the type), a mental health clinician must rule out other illnesses such as schizoaffective disorder, schizophrenia, delusional disorder, schizophreniform disorder, or other specified or unspecified schizophrenia spectrum and other psychotic disorder that may share similar symptoms.

Bipolar disorder cannot be diagnosed like other illnesses where a blood test, X-ray, or physical exam can provide a definitive diagnosis. The diagnosis is based on a set of criteria that a person must meet in order to be considered bipolar.

An informed diagnosis would likely include specific tests to exclude other physical contributions to the bipolar symptoms. This may involve a drug screen, imaging tests (CT scan or MRI of the brain), electroencephalogram (EEG), and a full battery of diagnostic blood tests. A doctor will also ask you questions, and you should do your best to work closely with a healthcare team to confirm a diagnosis and find the right treatment plan for you.

Treatment

Treatment of bipolar I disorder is highly individualized and based on the types and severity of symptoms a person is experiencing.

Mood stabilizers are the core of the treatment process, and other agents are often used, such as:

- A mood stabilizer, such as lithium;

- Anticonvulsants to stabilize mood swings.

- Antipsychotics to control psychotic symptoms such as delusions and hallucinations, as well as the newer atypical antipsychotics, which have mood-stabilizing properties of their own;

- Antidepressants (less commonly prescribed as they can trigger a manic episode);

- In more severe cases, electroconvulsive therapy (ECT) may be used to help relieve mania or severe depression.

Both types should be properly treated

Since hypomania that occurs in bipolar II is less severe than the mania that occurs in bipolar I disorder, bipolar II is often described as "milder" than bipolar I—but this is not completely accurate. Certainly, people with bipolar I can have more serious symptoms during mania, but hypomania is still a serious condition that can have life-changing consequences and therefore, should be properly addressed.

In addition, research suggests that bipolar II disorder is dominated by longer and more severe episodes of depression. In fact, over time, people with bipolar II become less likely to return to full functioning between episodes.[10]

Proper treatment should be pursued for all types of bipolar disorders, and you should work closely with your healthcare team to figure out the best treatment for you.

Coping

As with many mental health conditions, bipolar disorder is associated with a certain stigma in society, which may make coping with the condition more difficult for you or a loved one.[11] Know that stigma very often develops because of lack of knowledge. Whether or not someone with bipolar faces stigma directly, know that the best way to cope with the condition is to connect with others who are experiencing it and get professional help. You can also fight stigma to help you cope better, and learn more about your rights.

Bipolar disorder in children

Bipolar disorder can occur in kids of any age.[12] It's important for parents and caregivers to be aware of the unique signs—they should pay attention to a child's functioning, feelings, and any family history of the disorder. With a timely diagnosis, a treatment plan for symptom management can be better established.

(Retrieved from https://www.verywellmind.com/bipolar-disorder-overview-378810)

TEXT 3.

WHAT IS BORDERLINE PERSONALITY DISORDER (BPD)?

Borderline personality disorder (BPD) is a serious psychological condition characterized by unstable moods and emotions, relationships, and behavior. During a BPD episode, a person may act impulsively, engage in risky behaviors, switch moods quickly, have higher levels of anger, appear numb, or experience paranoia.

An estimated 1.4% of the adult population has borderline personality disorder, with roughly three-quarters of the diagnoses occurring in women; although, it is suggested that this is due to high rates of misdiagnosis in men.

BPD is one of the many personality disorders recognized by the American Psychiatric Association (APA). It is categorized as a cluster B personality disorder, meaning that someone with this type is more likely to be dramatic, overly emotional, and unpredictable in their thoughts or behaviors.

Personality disorders are psychological conditions that begin in adolescence or early adulthood, continue over many years, and, when left untreated, can cause a great deal of distress. Thankfully, the right treatments can help significantly.

Types of borderline personality disorder

Some experts propose that there are different types or subtypes of BPD. However, they often differ on what these types or subtypes may be.

For example, in one 2017 study, researchers classified BPD patients into three clusters: those with "core BPD" features only, those with "extravert/externalizing" features (histrionic, narcissistic, antisocial), and those with "schizotypal/paranoid" features.

Another study supports the notion of three subtypes of borderline personality but lists them as affect dysregulation (which was associated with co-occurring diagnoses of generalized anxiety and panic disorders), rejection sensitivity, and mentalization failure (the latter of which predicted post-traumatic stress disorder).

A 2015 study of hospitalized BPD patients suggests that there are five subtypes. According to this approach, the different subtypes, in order of their prevalence, are: impulsive (37%), dependent (29%), affective (26%), empty (5%), and aggressive (4%).

Symptoms of Borderline Personality Disorder

Borderline personality disorder can interfere with a person's ability to enjoy life or achieve fulfillment in relationships, work, or school. Because it is a personality disorder, someone may not show signs of BPD until their personality develops, with most diagnoses occurring in patients over 18 years of age.

Symptoms of borderline personality often appear and can create significant problems in the following areas:

Behaviors: BPD is associated with a tendency to engage in risky and impulsive behaviors, such as going on shopping sprees, excessive drug or alcohol use, engaging in promiscuous or risky sex, or binge eating.

Emotions: Emotional instability is a key feature of BPD. Individuals feel like they're on an emotional roller coaster with quick mood shifts (i.e., going from feeling okay to feeling extremely down or blue within a few minutes). Mood changes can last from minutes to days and are often intense. Anger, anxiety, and overwhelming emptiness are common as well.

Relationships: People with borderline personality disorder tend to have intense relationships with loved ones characterized by frequent conflict, arguments, and break-ups. BPD is associated with an intense fear of being abandoned by loved ones. This leads to difficulty trusting others and attempts to avoid real or imagined abandonment, putting a strain on relationships. It's also common for someone with BPD to have a 'favorite person,' or someone they feel they cannot live without.

Self-image: Individuals with BPD have difficulties related to the stability of their sense of self. They report many ups and downs in how they feel about themselves. One moment they may feel good about themselves, but the next they may feel that they are bad or even evil.

Stress-related changes in thinking: Under conditions of stress, people with borderline personality disorder may experience changes in thinking, including paranoid thoughts (for example, thoughts that others may be trying to cause them harm) or dissociation (feeling spaced out, numb, or like they're not really in their body).

Not everyone with BPD experiences every symptom. Some people have a few of these symptoms while others may experience most, if not all of them.

No consensus currently exists about the types of borderline personality disorder as this mental health condition's characteristics can be categorized in several different ways.

Diagnosis of borderline personality disorder

BPD is diagnosed by evaluating an individual's symptoms and reviewing their medical history. A healthcare provider may also perform a physical exam and order lab tests to rule out medical illnesses that might be contributing to the symptoms.

At this time, there is no definitive borderline personality disorder test. Instead, to be diagnosed with BPD, the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM-5) indicates that the individual must experience five or more of the nine symptoms of BPD, which are: efforts to avoid

abandonment, emotional instability, feelings of emptiness, identity disturbances, impulsive behaviors, inappropriate, intense anger, unstable interpersonal relationships, transient paranoid or dissociative symptoms.

Related Conditions

When making their diagnosis, a health provider or therapist will also rule out other mental health conditions that can cause symptoms similar to those experienced with BPD. Conditions related to borderline personality disorder include:

- Bipolar disorder;
- Histrionic personality disorder;
- Narcissistic personality disorder.

Making this differentiation is important to finding the right treatment. For example, when comparing borderline personality disorder vs. bipolar disorder, the mood changes in people with BPD are often shorter in term, while people with bipolar tend to experience mood changes that last days or weeks.

Co-Occurring conditions

It's common for borderline personality disorder to co-occur with certain other mental conditions, sometimes making it more difficult to diagnose. Conditions often co-existing with BPD include: anxiety disorders, bipolar disorder, depression, eating disorders, post-traumatic stress disorder, substance use disorder.

Causes of borderline personality disorder

Like most psychological disorders, the exact cause of BPD is not known. However, there is research to suggest that some combination of nature (biology or genetics) and nurture (environment) is at play.

A few of the proposed causes of borderline personality disorder include:

Brain structure: There is evidence of differences in brain structure and function in individuals with BPD, especially in the parts of the brain that affect impulse control and emotional regulation.8 However, it's unclear if these differences are a result of having BPD or if they are part of the cause.

Genetics: There appears to be a genetic component to borderline personality disorder as it's not uncommon for close family members to have this condition.1

Negative experiences: Many people diagnosed with BPD have experienced childhood abuse, trauma, neglect, or were separated from their caregivers at an early age.9 At the same time, not all people with BPD had one of these childhood experiences, and, conversely, many people who have had them do not develop BPD.

Risk factors for borderline personality disorder

Certain factors may increase your risk of developing BPD. They include:

- Being abandoned during childhood or adolescence;

- Experiencing abuse (sexual, physical, or emotional);
- Having a disruption in your family life;
- Poor communication skills within the family unit.

Treatment for borderline personality disorder

At one time, experts believed that borderline personality was unlikely to respond to treatment. But research has since shown that BPD is very treatable.

Since BPD is associated with risky behaviors, treatment can help curb these behaviors.

Getting help from a mental health professional is critical. With consistent treatment, you can live a better quality of life with fewer symptoms. Find someone who specializes in BPD and can provide treatments targeted to this condition. This is important because, if you aren't getting the right treatment, it may not be as effective.

The usual order of treatment for borderline personality disorder includes psychotherapy, medication, then other treatments.

Psychotherapy

Psychotherapy is the standard treatment for BPD. Depending on your situation, this treatment option may also include the involvement of your family, friends, or caregivers.

Examples of psychotherapy that are often targeted to BPD include:

Dialectical behavior therapy (DBT), a type of cognitive behavioral therapy (CBT) that teaches you how to be present, also providing skills related to coping with stress, emotional regulation, and relationship improvement

Mentalization-based treatment (MBT), which helps someone with borderline personality disorder better recognize how their thoughts and feelings are associated with their behaviors

Group therapy, or engaging in treatment with others who also have BPD, also learning from them and their experiences

Medication

Your mental health professional may recommend that you take medication to help treat certain borderline personality disorder symptoms, such as depression or mood swings.13 Medications prescribed to help treat BPD symptoms often fall into one of the following categories: antidepressants, antipsychotics, anxiolytics (anxiety medications), mood stabilizers.

Other treatments

In times of crisis, hospitalization or more intensive treatments may be necessary for someone with borderline personality disorder. Inpatient treatment for BPD is

common, with roughly 79% of individuals with this condition being hospitalized at least once and 60% having multiple hospitalizations.

Complications of Borderline Personality Disorder

If left untreated, people with BPD have a higher risk of developing depression, also developing other behaviors that can negatively impact their health.

(Retrieved from https://www.verywellmind.com/what-is-borderline-personality-disorder-bpd-425487)

TEXT 4.

WHAT IS NARCISSISTIC PERSONALITY DISORDER (NPD)?

Narcissistic personality disorder (NPD) is an enduring pattern of inner experience and behavior characterized by self-centeredness, lack of empathy, and an exaggerated sense of self-importance.

It is one of several different types of personality disorders recognized by the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), which many mental health professionals use to diagnose this and other disorders.

The disorder causes significant impairments in personality in terms of functioning and is accompanied by several other pathological personality traits. As with other personality disorders, this condition negatively impacts life in various areas, including social, family, and work relationships.

Symptoms of narcissistic personality disorder

Five common signs of narcissism include an inflated sense of self, a constant need for attention, self-centeredness, lack of empathy, and preoccupation with power and success. Some of the symptoms associated with NPD include:

- Belief that one is unique or special and should only associate with other people of the same status;
- Constant need for attention, affirmation, and praise;
- Exaggerated sense of one's own abilities and achievements;
- Exploiting other people for personal gain;
- Feeling envious of others, or believing that others are envious of them;
- Lack of empathy for others;
- Persistent fantasies about attaining success and power;
- Preoccupation with power or success;
- Sense of entitlement and expectation of special treatment.

You may be able to recognize whether someone has NPD by looking for some of these signs. People with narcissistic personality disorder are typically described as arrogant, conceited, self-centered, and haughty. Because they imagine themselves as superior to others, they often insist on possessing items that reflect a successful lifestyle.

Despite this exaggerated self-image, they are reliant on constant praise and attention to reinforce their self-esteem. As a result, those with narcissistic personality disorder are usually very sensitive to criticism, which is often viewed as a personal attack.

Narcissism vs. NPD

Narcissism is a term commonly used to describe those who seem more concerned with themselves than with others.4 But not all people with these traits have a personality disorder. While narcissistic traits may be common at times, such as during adolescence, this does not necessarily mean people will go on to develop NPD.

Diagnosis of narcissistic personality disorder

An official diagnosis can only be made by a qualified mental health professional and requires that the individual show impairments in personality functioning in various domains, including a grandiose sense of self-importance and interpersonal difficulties with attention-seeking, empathy, and intimacy.

Various questionnaires and personality tests may be used to help get greater insight into a person's symptoms. Tests commonly used to diagnose narcissistic personality disorder include the International Personality Disorder Examination (IPDE) and the Narcissistic Personality Inventory (NPI).

Impairments in personality function and expression of personality traits must also be stable over time and across different situations; must not be typical for the individual's culture, environment, or stage of development; and must not be due to the direct influence of substance use or a general medical condition.

Prevalence of NPD

The National Institute of Mental Health suggests that approximately 9.1% of U.S. adults experience at least one type of personality disorder during any given year.2 Older estimates had suggested that as many as 6.2% of American adults experienced narcissistic personality disorder specifically,6 yet more recent figures suggest that prevalence rates may be lower than previously believed.

Estimates suggest that between 0.5% and 5% of adults in the U.S. have narcissistic personality disorder. NPD is more common among men than women.

Narcissistic personality disorder is thought to be less common than other personality disorders such as borderline personality disorder, antisocial personality disorder, and histrionic personality disorder.

Causes of narcissistic personality disorder

While the exact cause is unknown, researchers have identified some factors that may contribute to the disorder. Some early life experiences are thought to contribute to narcissistic personality disorder, including: abuse or trauma, excessive praise, lack of an authentically validating environment, parental overindulgence, unreliable parenting.

Genetics and biology are also thought to play a considerable role, although the exact causes are likely complex and varied.

Types of narcissistic personality disorder

While the DSM-5 does not differentiate between different variations of the condition, there is evidence that the expression of symptoms can vary considerably. Some researchers have suggested that there are at least two distinguishable subtypes of NPD:

Grandiose, overt narcissism is characterized by boldness, arrogance, and grandiose personality traits. People with this type of NPD are more likely to lack empathy, behave aggressively, exploit others, and engage in exhibitionist behaviors.

Vulnerable, covert narcissism is characterized by hypersensitivity and defensiveness. People with this type of NPD may seek approval, but socially withdraw if it is not given. They may also experience low self-esteem.

Other proposed subtypes including hypervigilant and high-functioning narcissism. People with the hypervigilant type are described as who experience shame, excessive sensitivity, and easily hurt feelings. Those with the high-functioning type are described as appearing mostly normal with issues centered on lack of empathy, a sense of entitlement, and self-centeredness.

Types of Narcissism

There are also different types of narcissism that a person may display. The main types of narcissism are overt, covert, antagonistic, communal, and malignant. Displaying one of these types of narcissism does not necessarily mean that a person has narcissistic personality disorder.

Treatment for narcissistic personality disorder

It is important to note that people with this disorder rarely seek out treatment. Individuals often begin therapy at the urging of family members or to treat symptoms that result from the disorder such as depression.

Therapy can be especially challenging for people with NPD, because they are often unwilling to acknowledge the disorder. This difficulty in treatment is often

compounded by the fact that insurance companies tend to pay for short-term treatments that focus only on symptom reduction, not on underlying personality problems.

There are treatments that can help people gain greater insights into their behaviors, establish a more coherent sense of self, and better manage their behaviors. These include:

Individual psychodynamic psychotherapy can be effectively used to treat narcissistic personality disorder, although the process can be potentially difficult and lengthy.

Cognitive behavioral therapy (CBT) is often effective to help individuals change destructive thought and behavior patterns.1 The goal of treatment is to alter distorted thoughts and create a more realistic self-image.

Psychotropic medications are generally ineffective for long-term change but are sometimes used to treat symptoms of anxiety or depression.

(Retrieved from https://www.verywellmind.com/what-is-narcissistic-personality-disorder-2795446)

TEXT 5.

WHAT IS SCHIZOAFFECTIVE DISORDER?

Symptoms of schizoaffective disorder

Symptoms of schizoaffective disorder tend to be severe and vary for each individual. They can be broadly categorized into depressive symptoms, manic symptoms, and schizophrenia symptoms.

Those with bipolar type will experience a manic episode and may also have depressive episodes, while those with the depressive type will only experience the depressive symptoms.

Depressive symptoms

Depressive symptoms of schizoaffective disorder may be psychological or physical. Psychological symptoms include: sadness, feeling worthless, hopelessness, restlessness, lack of energy, loss of interest in usual activities, trouble concentrating, guilt, self-blame.

Physical symptoms can include: poor appetite, weight loss or gain, sleeping too much or too little.

Manic symptoms

People with bipolar type schizoaffective disorder may experience mania, which also has both psychological and physical symptoms.

Psychological symptoms can include: risky or self-destructive behavior (e.g., spending sprees, reckless driving), euphoria, irritable mood, racing thoughts, grandiosity, distractibility.

Physical symptoms may include: increased energy and/or activity (e.g., at work, socially), talking more or faster than usual, reduced need for sleep.

Psychotic symptoms

Like the other groups of symptoms, psychotic symptoms may also be divided into psychological and physical effects.

Psychological symptoms can include: paranoia, delusions, hallucinations, disorganized thinking, impaired communication, lack of emotion in facial expressions and speech (negative symptoms), low motivation (avolition).

Physical symptoms include slow movements or no movement (catatonia) and poor personal hygiene.

While the psychotic symptoms listed above describe how schizoaffective disorder appears to an outsider, it is also helpful to learn what these symptoms feel like to a person with the disorder.

Disorganized thinking

If you are experiencing disorganized thinking, you may feel like your thoughts are fuzzy or everything feels disconnected. When you speak, you may not be able to remember what you were talking about, so it's hard for people to follow what you say. You may also feel like your thoughts are not within your control.

Thinking you are being controlled

You may think you are being controlled by outside forces like aliens, God, or the devil. You may feel someone is inserting thoughts into your head or that your thoughts are being removed. You might also feel like others can hear your thoughts or access them.

Hallucinations

You may hear one or more voices that sound real and seem to come from outside you but that nobody else can hear.[1] You might start to talk to them or do things that they tell you to do. In fact, these voices are created by your brain and are not real.

Delusions

Delusions are things you believe to be true but that are not thought to be real by everyone else.[1] They may begin all of a sudden or form over time. Sometimes they are related to the voices that you hear and seem to explain them in some way.

Most often delusions are paranoid, such that you think people are plotting against you or spying on you. You might choose to avoid those people as it can feel very scary.

Complications of schizoaffective disorder

There are a number of potential complications of having schizoaffective disorder, including: health problems, homelessness, impaired academic and occupational functioning, interpersonal conflicts, poverty, social isolation, substance use, trouble adhering to treatment, unemployment.

Diagnosis of Schizoaffective Disorder

Schizoaffective disorder overlaps with other conditions so it can be difficult to diagnose. Sometimes, it is incorrectly diagnosed as simply bipolar disorder or schizophrenia, which is why it is important for mental health professionals to have a full history of symptoms prior to making a diagnosis.

The first step in diagnosing schizoaffective disorder may be conducting a physical exam to rule out any potential medical contributions to the symptoms. Depending on the suspected diagnosis, this may mean undergoing blood testing and brain imaging.

Next, a psychiatrist or psychologist will conduct a clinical interview to determine whether symptoms meet the criteria outlined in the "Diagnostic and Statistical Manual of Mental Disorders" (DSM-5). This includes a period of major mood disorder (depression or mania) and at least two of the following schizophrenia symptoms (at least one of the first three is required): delusions, hallucinations, disorganized speech, disorganized or catatonic behavior, negative psychotic symptoms.

In addition, delusions or hallucinations most occur for two or more weeks in the absence of a mood episode. The mood symptoms must also be present for most of the duration of the illness.

Causes of schizoaffective disorder

Researchers do not know precisely what causes schizoaffective disorder. However, some propose that it can result from a combination of risk factors that affect brain development prenatally and throughout childhood and adolescence. These include: birth defects, brain chemistry and structure, genetics, life stressors (death in family, loss of job, end of marriage), psychoactive or psychotropic drug use, viral infections including while in the womb.

Related Conditions

People with schizoaffective disorder may also live with overlapping disorders such as attention-deficit hyperactivity disorder, post-traumatic stress disorder (PTSD), anxiety disorders, and substance and alcohol use.

A co-occurring disorder can exacerbate the symptoms of schizoaffective disorder and make a person less likely to follow their treatment plan. This is why proper diagnosis and integrated treatment is essential when it comes to managing and coping with a dual diagnosis.

Schizoaffective disorder is often confused with other mental illnesses, including schizophrenia and bipolar disorder. These are two distinct disorders, however, each with their own diagnostic criteria and treatment. While they do share many symptoms, the main difference is that there is a prominent mood component with schizoaffective disorder.

Treatment of schizoaffective disorder

Treatment can help people with schizoaffective disorder to live a more fulfilling life. Treatment may come in the form of medication, therapy, or hospitalization, depending on the particular symptoms.

Medication

Medications such as mood stabilizers (e.g., lithium), antipsychotics (e.g., paliperidone), and antidepressants (e.g., fluoxetine) may be prescribed for different aspects of schizoaffective disorder. Taking antipsychotic medication will help reduce hallucinations and delusions, lessen disorganized thinking, and soothe agitation.

It's important for people with schizoaffective disorder to continue taking medication even if they feel well, as these medications help to stabilize symptoms and prevent a recurrence of them.

Often, people with schizoaffective disorder need to take medication for the rest of their lives.

Therapy

Therapy such as cognitive-behavioral therapy (CBT), family therapy, group therapy, or skills training may be used to treat schizoaffective disorder.[1]

During therapy, a person with schizoaffective disorder may learn about their illness, set goals, determine how to manage daily issues, develop skills to interact with others, look for a job, and practice life skills like managing finances, home maintenance, and personal grooming.

Family members can participate in therapy to learn how best to support their loved ones.

(Retrieved from https://www.verywellmind.com/what-is-schizoaffective-disorder-4171702)

Plan to render an article.

Useful word combinations for rendering and discussion

1. The headline of the article. The author. The publication data. – Название статьи. Автор. Источник публикации.

The article I'm going to give a review of is taken from… (the website/ scientific journal) — Статья, которую я сейчас хочу проанализировать из…

The headline of the article is — Заголовок статьи…

The author of the article is… — Автор статьи…

It is written by — Она написана …(автором)

Unfortunately, the author of the article is not mentioned. – Автор статьи не упомянут.

The article is written on the 16th of November – Статья написана … (дата)

The article under discussion is … — Статья, которую мне сейчас хочется обсудить…

2. The topic of the article and logical parts.

The topic of the article is… — Тема статьи

The key issue of the article is… — Ключевым вопросом в статье является

The article under discussion is devoted to the problem… - Статья, которую мы обсуждаем, посвящена проблеме…

The article is about… - Статья о …

The article deals (is concerned) with… - В статье рассматривается

The article touches upon the issue of… - В статье затрагивается вопрос о

The purpose of the article is to give the reader some information on… - Цель статьи – дать читателю некоторую информацию о

The aim of the article is to provide the reader with some material on…- Цель статьи – предоставить читателю некоторый материал по

The article under discussion may be divided into several logically connected parts which are…the introduction, the main part and the conclusion —

Статья может быть разделена на несколько логически взаимосвязанных частей, таких как…(вступление, основная часть, заключение).

3. The content of the article. Summary. – Краткое содержание.

The author starts by telling the reader that — Автор начинает, рассказывая читателю, что

The author (of the article) writes (reports, states, stresses, thinks, notes, considers, believes, analyses, points out, says, describes, asserts, mentions, explains, outlines, generalizes, reveals, gives a summary, dwells on, exposes)

that… - Автор (статьи) пишет (сообщает, констатирует, подчеркивает, думает, отмечает, рассматривает, полагает, анализирует, указывает, говорит, описывает, утверждает, упоминает, поясняет, обрисовывает, обобщает, раскрывает, резюмирует, останавливается на , раскрывает), что…

The author draws the reader's attention to… - Автор обращает внимание читателя на

Much attention is given to… - Большое внимание уделяется…

According to … the scientists/ doctor Smith/ the rule/ the results … - Согласно ученым/ доктору Смиту/ правилу/ результатам (когда ссылаемся на кого-то, чьи-то слова или мнения)

The article goes on to say that… - Далее в статье говорится, что

It is reported (shown, stressed) that … - Сообщается (показано, подчеркнуто), что

It is spoken in detail about… - Подробно говорится о…

From what the author says it becomes clear that… - Из того, что говорит автор, становится ясно, что

The fact that … is stressed. - Тот факт, что... подчеркивается, акцентируется.

The article gives a detailed analysis of… - В статье дается подробный анализ

The author gives full coverage to… — Автор полностью охватывает…

The article contains the following facts…./ describes in details… — Статья содержит следующие факты …. / подробно описывает

Further the author reports (reports, states, stresses, thinks, notes, considers, believes, analyses, points out, says, describes, asserts, mentions, explains, outlines, generalizes, reveals, gives a summary, dwells on, exposes) that… / draws reader's attention to...

In conclusion the author writes (reports, states, stresses, thinks, notes, considers, believes, analyses, points out, says, describes, asserts, mentions, explains, outlines, generalizes, reveals, gives a summary, dwells on, exposes) that… / draws reader's attention to...

In conclusion the author says / makes it clear that…/ gives a warning that… — В заключение автор говорит / проясняет, что … / дает предупреждение, что …

The author comes to the conclusion that…- Автор приходит к выводу, что

4. Your opinion (conclusion) – Ваш вывод, мнение, отношение к вопросам, поднимаемой в статье.

Taking into consideration the fact that — Принимая во внимание тот факт, что

The main idea of the article is — Основная идея статьи (послание автора)

In addition… / Furthermore… — Кроме того

On the one hand…, but on the other hand… — С одной стороны …, но с другой стороны …

Back to our main topic… - Вернемся к нашей основной теме

To come back to what I was saying… - Чтобы вернуться к тому, что я говорил

In conclusion I'd like to… — В заключение я хотел бы …

From my point of view…/ In my opinion/ To my mind… — С моей точки зрения …

As far as I can judge/ see/ know/ understand… — Насколько я могу судить/

I fully agree with / I don't agree with -Я полностью согласен с/ - Я не согласен

It is hard to predict the future, but- Трудно предсказать будущее, но...

I have found the article informative/ entertaining/ dull / important / interesting /of great value because … - Я нахожу статью информативной/ развлекательной/ скучной / важной/ интересной/ имеющую большое значение (ценность), потому что…

Rendering an article
Symptoms and Diagnosis of PTSD

By Matthew Tull, PhD Updated on April 20, 2021

Post-traumatic stress disorder (PTSD) occurs after a traumatic event and interferes with a person's ability to function. You may wonder if you or someone you care about has PTSD, and whether you need to get professional help. If you are experiencing symptoms of PTSD, it is important to see a doctor so that you can get the right diagnosis and treatment.

The difference between PTSD and stress

Not everyone who has experienced a traumatic event will develop PTSD. After a traumatic event, it is normal to have strong feelings of anxiety, sadness, or stress. Some people may even experience nightmares, memories about the event, or problems sleeping at night, which are common characteristics of PTSD.

However, these symptoms do not necessarily mean that you have PTSD. Think of it this way: Headaches can be a symptom of a bigger problem, such as meningitis.

However, having a headache does not necessarily mean that you have meningitis. The same is true for PTSD. Many of the symptoms are part of the body's normal response to stress, but having them does not mean that you have PTSD.

DSM-5 Criteria for PTSD

Criterion A: Stressor

Exposure or threat of death, serious injury, or sexual violence in one or more of the following ways:

- You directly experienced the event.
- You witnessed the event happen to someone else, in person.
- You learned of a close relative or close friend who experienced an actual or threatened accidental or violent death.
- You had repeated indirect exposure to distressing details of the event(s). This could occur in the course of professional duties (first responders, collecting body parts, or professionals repeatedly exposed to details of child abuse). This does not include non-work related exposure through electronic media, television, movies, or pictures.

Criterion B: Intrusion symptoms

The traumatic event is persistently re-experienced in one or more of the following ways:

- Recurrent, involuntary, and intrusive memories. Children older than six may express this symptom through repetitive play in which aspects of the trauma are expressed.

- Traumatic nightmares or upsetting dreams with content related to the event. Children may have frightening dreams without content related to the trauma.

- Dissociative reactions, such as flashbacks, in which it feels like the experience is happening again. These may occur on a continuum ranging from brief episodes to complete loss of awareness. Children may re-enact the events in play.

- Intense or prolonged distress after exposure to traumatic reminders.

- Marked physiological reactivity, such as increased heart rate, after exposure to traumatic reminders.

Criterion C: Avoidance

Persistent effortful avoidance of distressing trauma-related reminders after the event as evidenced by one or both of the following:

- Avoidance of trauma-related thoughts or feelings.

- Avoidance of trauma-related external reminders, such as people, places, conversations, activities, objects, or situations.

Criterion D: Negative alterations in mood

Negative alterations in cognition and mood that began or worsened after the traumatic event as evidenced by two or more of the following:

- Inability to recall key features of the traumatic event. This is usually dissociative amnesia, not due to head injury, alcohol, or drugs.

- Persistent, and often distorted negative beliefs and expectations about oneself or the world, such as "I am bad," or "The world is completely dangerous."

- Persistent distorted blame of self or others for causing the traumatic event or for the resulting consequences.

- Persistent negative emotions, including fear, horror, anger, guilt, or shame.

- Markedly diminished interest in activities that used to be enjoyable.

- Feeling alienated, detached or estranged from others.

- Persistent inability to experience positive emotions, such as happiness, love, and joy.

Criterion E: Alterations in arousal and reactivity

Trauma-related alterations in arousal and reactivity that began or worsened after the traumatic event, including two or more of the following:

- Irritable or aggressive behavior
- Self-destructive or reckless behavior
- Feeling constantly "on guard" or like danger is lurking around every corner (hypervigilance)
- Exaggerated startle response
- Problems in concentration
- Sleep disturbance

Criterion F: Duration

Persistence of symptoms in Criteria B, C, D, and E for more than one month.

Criterion G: Functional Significance

Significant symptom-related distress or impairment of different areas of life, such as social or occupational.

Criterion H: Exclusion

The disturbance is not due to medication, substance use, or other illness.

DSM-5 PTSD Diagnosis

In order to be diagnosed with PTSD according to the DSM-5, you need to meet the following:

- Criterion A
- One symptom or more from Criterion B
- One symptom or more from Criterion C
- Two symptoms or more from Criterion D
- Two symptoms or more from Criterion E
- Criterion F
- Criterion G
- Criterion H

Changes in Diagnostic Criteria

There are a few changes in the latest version of the DSM regarding PTSD diagnosis.3

Key changes include:

- More clearly defining what kind of events are considered traumatic in Criterion A
- Adding a fourth type of exposure in Criterion A

- Increasing the number of symptom groups from three to four by separating avoidance symptoms into their own group (Criterion C)
- Increasing the number of symptoms from 17 to 20
- Changing the wording of some of the symptoms from DSM-IV
- Adding a new set of criteria for children aged 6 or younger
- Eliminating the "acute" and "chronic" specifiers
- Introducing a new specifier "with dissociative symptoms"

Other diagnostic tools

In addition to using the DSM-5 manual to assess for PTSD criteria, a medical professional will likely want to complete a physical examination to check for medical problems that could be contributing to or causing symptoms.

A psychological evaluation is likely to be recommended, which allows for you to openly discuss with your provider some of the events that have led to you experiencing these symptoms. During this evaluation, you would share with a provider signs and symptoms you're experiencing, as well as the duration and level of intensity of these.

This collective information can help medical providers and mental health professionals gain an understanding of your treatment needs and provide you with an appropriate level of care.

Related Conditions

Although the hallmark of post-traumatic stress disorder is having experienced or witnessed a traumatic event, there are a variety of distressing symptoms that someone with PTSD will experience after the event.

Understanding that some of these symptoms may overlap with other mental health conditions, it is important that a thorough evaluation is done to make sure the diagnosis of PTSD is accurate.

Other conditions that could be discussed or explored with your health care provider, due to the symptoms you might be experiencing, could include things like: obsessive-compulsive disorder, acute stress disorder, adjustment disorder, panic disorder, generalized anxiety disorder, major depression, substance abuse, eating disorders.

Again, because some of the distressing symptoms can overlap a bit with other mental health conditions, it is important to talk with a qualified professional to make

sure you receive an accurate diagnosis and are provided with appropriate resources for care and treatment.

Being honest and open with your provider about the symptoms you have been experiencing is critical to helping them understand what is happening for you and to establish the right path for your healing.

(Retrieved from https://www.verywellmind.com/requirements-for-ptsd-diagnosis-2797637)

1. The headline of the article. The author. The publication data.

The article I'm going to give a review of is taken from the website for psychology articles (verywellmind.com.).

The headline of the article is "Symptoms and Diagnosis of PTSD".

It is written by PhD Matthew Tull.

The article is written on the 20th of April in 2021.

2. The topic of the article and logical parts.

The topic of the article is post-traumatic stress disorder.

The purpose of the article is to give the reader some information on criteria for PTSD and PTSD diagnosis.

The article under discussion may be divided into several logically connected parts which are the introduction, the main part and the conclusion. The introduction gives general information about PTSD and the difference between this disorder and stress. Criteria for PTSD and diagnosis are described in the main part. In conclusion the author tells us about the related conditions that can be experienced after a traumatic event.

3. The content of the article. Summary.

The author starts by telling the reader that PTSD is caused by traumatic event.

The author draws reader's attention to the fact that if a person experiences symptoms of PTSD he should have professional help. It is also important to draw a distinction between PTSD and stress.

Much attention is given to criteria for PTSD.

According to DSM there are several criteria for PTSD which are called criterion A – stressor, criterion B – intrusion symptoms, criterion C – avoidance, criterion D – negative alterations in mood, criterion E – alterations in arousal and reactivity, criterion F – duration, criterion G – functional significance, criterion H – exclusion.

The article goes on to say that stressor includes exposure or threat of death, serious injury, or sexual violence which can be experienced by a person, or a person witnesses the event happen to someone else, learns of a close relative or friend who experienced such event(s), faces to the event(s) in the course of professional duties. It is reported that there are intrusion symptoms of PTSD such as recurrent, involuntary, and intrusive memories; traumatic nightmares or upsetting dreams with content related to the event; dissociative reactions, such as flashbacks, in which it feels like the experience is happening again; intense or prolonged distress after exposure to traumatic reminders; marked physiological reactivity, such as increased heart rate, after exposure to traumatic reminders. Criterion C, which is avoidance, includes persistent effortful avoidance of distressing trauma-related reminders (related thoughts or feelings, or

related external reminders, such as people, places, conversations, activities, objects, or situations) after the event. Negative alterations in cognition and mood that began or worsened after the traumatic event, e.g., ersistent, and often distorted negative beliefs and expectations, persistent negative emotions, including fear, horror, anger, guilt, or shame etc., belong to criterion D. Trauma-related alterations in arousal and reactivity that began or worsened after the traumatic event, e.g., irritable or aggressive behavior, self-destructive or reckless behavior, present criterion E. Criterion F is persistence of symptoms in Criteria B, C, D, and E for more than one month. Criterion G includes significant symptom-related distress or impairment of different areas of life, such as social or occupational. Criterion H represents the disturbance is not due to medication, substance use, or other illness.

It is spoken in detail about PTSD diagnosis. In order to be diagnosed with PTSD according to the DSM-5, a person needs to meet the following: criterion A, one symptom or more from criterion B, one symptom or more from criterion C, two symptoms or more from criterion D, two symptoms or more from criterion E, criterion F, criterion G, criterion H. The fact that there are a few changes in the latest version of the DSM regarding PTSD diagnosis is stressed. Key changes are more clearly defining what kind of events are considered traumatic in criterion A; adding a fourth type of exposure in criterion A; increasing the number of symptom groups from three to four by separating avoidance symptoms into their own group (criterion C); increasing the number of symptoms from 17 to 20; changing the wording of some of the symptoms from DSM-IV; adding a new set of criteria for children aged 6 or younger; eliminating the "acute" and "chronic" specifiers; introducing a new specifier "with dissociative symptoms".

Further the author draws the reader's attention to that there are other diagnostic tools such as physical examination and psychological evaluation.

The author comes to the conclusion that there are a variety of distressing symptoms that someone with PTSD will experience after the event such as obsessive-compulsive disorder, acute stress disorder, panic disorder etc. It is important to talk with a qualified professional to make sure you receive an accurate diagnosis because some of the distressing symptoms can overlap a bit with other mental health conditions.

4. Your opinion (conclusion)

Taking into consideration the fact that PTSD is a common disorder and must be corrected this article is currently important.

The main idea of the article is describing criteria for PTSD which is crucial in diagnosing of PTSD.

In addition, some facts about PTSD diagnosis are given.

Back to our main topic it is also important to draw a distinction between PTSD and other mental disorders.

From my point of view the article is easy to understand. The information is well-structured and well-ordered. The vocabulary is vivid and has a lot of terms.

I fully agree with the fact that a person should have professional help if he is experiencing the symptoms of PTSD, and the diagnosis must be accurate in order to be properly treated.

I have found the article of great value because PTSD is a serious mental illness. It is not acceptable to self-medicate because it can lead to after-effects.

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Кондратьева Ирина Германовна
Абдуллина Лилия Ильдаровна

ENGLISH FOR STUDENTS OF PSYCHOLOGY

Учебное пособие