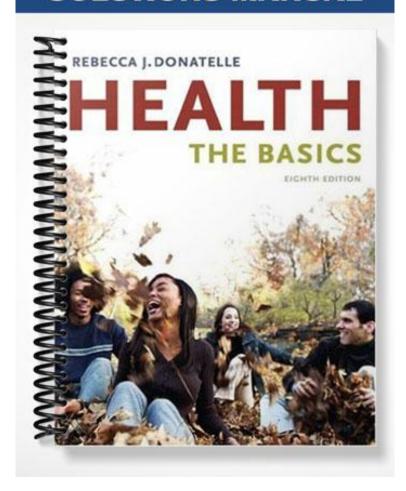
# **SOLUTIONS MANUAL**



# CHAPTER 2 PSYCHOSOCIAL HEALTH

# **OVERVIEW**

Psychosocial health is very important to our appreciation of life and so contributes greatly to our quality of life. Chapter two discusses the intellectual, emotional, social and spiritual qualities of health that make up the very heart of how we perceive all that we experience. This chapter also discusses important issues such as depression and suicide, helping the student to understand when to get help or how to recognize when friends need help.

# LEARNING OBJECTIVES

- 1. Define each of the four components of psychosocial health, and identify the basic traits shared by psychosocially healthy people.
- 2. Learn how internal and external factors affect your psychosocial health; discuss the positive steps you can take to enhance your psychosocial health.
- 3. Discuss the dimension of spirituality and the role it plays in your health and wellness.
- 4. Identify common psychosocial problems, such as anxiety disorders and depression, and explain their causes and treatments.
- 5. Explain the methods of different types of health professionals, and examine how they can play a role in preventing specific types of psychosocial health problems.

# **OUTLINE**

#### I. Defining Psychosocial Health

- A. Psychological health encompasses the mental, emotional, social, and spiritual dimensions of what it means to be healthy. (See Figure 2.1)
  - 1. Many basic elements shared by psychosocially healthy people:
    - a. They feel good about themselves.
    - b. They feel comfortable with other people.
    - c. They control tension and anxiety.
    - d. They meet the demands of life.
    - e. They curb hate and guilt.
    - f. They maintain a positive outlook.
    - g. They value diversity.
    - h. They appreciate and respect nature.
- B. Mental Health describes the "thinking or rational" part of psychological health.
  - 1. Mental health plays a role in the way we think, communicate, express emotion, and feel about ourselves.
  - 2. One can intellectually sort through information and life events, attach meaning, and respond appropriately. This is often referred to as intellectual health—a subset of mental health.
  - 3. Mentally healthy persons are likely to respond to life's challenges constructively.

- C. Emotional Health refers to the "feeling" or subjective part of psychosocial health that includes emotional reactions to life.
  - 1. Emotions are intensified feelings or complex patterns of feelings that we experience.
  - 2. Richard Lazarus identified four types of emotions:
    - a. Emotions resulting from loss, harm, or threats.
    - b. Those resulting from benefits.
    - c. Borderline emotions, such as hope and compassion.
    - d. More complex emotions, such as grief, disappointment, bewilderment, and curiosity.
  - 3. Emotionally healthy people are able to respond in a stable and appropriate manner to upsetting events.
  - 4. Emotional health also affects social health.
- D. Social Health refers to our interactions with others on an individual and group basis, our ability to adapt and use social resources and support when needed.
  - 1. There are two factors that are important to social health:
    - a. Presence of *social bonds* reflects the level of closeness and attachment that we develop with individuals.
    - b. Presence of key *social support* consists of networks or people and services with whom people share ties.
  - 2. Socially healthy people have a wide range of social interactions with family, friends, acquaintances, and individuals with whom they may only occasionally come into contact.
  - 3. Social health also reflects the way we react to others. In most extreme forms, a lack of social health may be represented by aggressive acts of prejudice towards other individuals or groups.
- E. Spiritual Health refers to the personal quest for seeking answers to life's ultimate questions, finding meaning in life's purpose, and seeking a sense of belonging to something greater than the purely physical or personal dimensions of existence.
  - 1. Spirituality addresses four main themes: (See Figure 2.3)
    - a. Interconnectedness—to self, others and a larger meaning or purpose.
    - b. Practice of mindfulness—the ability to be fully present in the moment.
    - c. Spirituality as a part of daily life, articulating your purpose in life, feeling joy, love, peace, and fulfillment. It includes faith, hope and love.
      - i. Faith helps us realize our purpose in life.
      - Hope allows us to look confidently and courageously to ii. the future.
      - iii. Love involves accepting, affirming, and respecting self and others.
    - d. Living in harmony with our community.
    - e. Altruism, the act of giving of oneself or of genuine concern for others, is a key aspect of a spiritually healthy lifestyle.

- 2. Research indicates a correlation between certain elements of spirituality and positive health outcomes.
- 3. Spiritual health has taken on greater importance in recent years.

# II. Factors Influencing Psychosocial Health

- A. External influences are those factors that we do not control.
  - 1. Family influences on psychosocial health include family upbringing.
    - a. Healthy, nurturing families produce more well-adjusted adults.
    - b. Families with problems may produce confused adults who have a harder time adapting to life.
  - 2. Influences of the macro environment include safety, access to health services and programs, and socioeconomic status.
- B. Internal factors include hereditary traits, hormonal functioning, physical health, physical fitness level, and certain elements of mental and emotional health.
  - 1. Self-efficacy refers to a person's belief about whether he or she can successfully engage in and execute a specific behavior.
  - 2. Self-esteem refers to one's sense of self respect of self-worth.
  - 3. Learned helplessness is a response to continued failure where people give up and fail to take action to help themselves.
  - 4. It is thought that self-help programs can promote the principle of "learned optimism."
  - 5. Personality is not static; it changes as we move through our lives. The following traits appear to be found in psychosocially healthy people.
    - a. Extroversion
    - b. Agreeableness
    - c. Openness to experience
    - d. Emotional stability
    - e. Conscientiousness
  - 6. Our temperaments change as move through life.
  - 7. Resiliency, or protective factors, describes those traits which protect an individual or community from threat or harm.
    - a. People with assets financial, emotional, spiritual, physical, intellectual, or mental and other positive forces in their lives are more likely to bounce back when facing life's challenges.
  - 8. Flourishing means to live within an optimal range of human functioning one connotes goodness, productivity, growth and resilience.

#### III. Strategies of Enhance Psychosocial Health.

- A. Self-esteem refers to how much one likes oneself and values one's own personal worth as an individual.
  - 1. Self-esteem can be improved in several ways.
    - a. Find a support group.
    - b. Complete required tasks.

- c. Form realistic expectations.
- d. Take/Make time for you.
- e. Maintain physical health.
- f. Examine problems and seeking help if necessary.
- B. Getting adequate sleep can improve psychosocial health.
  - 1. Sleep serves at least two biological processes:
    - a. Conservation of energy, so that we are rested and ready to perform during high-performance daylight hours.
    - b. Restoration, so that neurotransmitters that have been depleted during waking hours can be replenished.
  - 2. The amount of sleep needed depends on many factors.
  - 3. Sleep inertia describes the cognitive impairment, disorientation, and grogginess experienced when a person first gets up in the morning.
  - 4. Insomnia is a common complaint among 20-40% of Americans.
    - a. It is more common among women than men.
    - b. Its prevalence is correlated with age and low socioeconomic status.
  - 5. There are several methods to conquer sleeplessness. (See Table 2.3)
  - 6. Some individuals suffer from sleep apnea which prevents them from getting a good night's sleep. This topic is discussed in Chapter 13.

#### IV. The Mind-Body Connection

- A. Happiness or related mental states such as hopefulness, optimism, and contentment appear to reduce the risk or limit the severity of cardiovascular disease, pulmonary disease, diabetes, hypertension, colds, and other infections.
  - 1. Laughter can promote increases in heart rate, respiration rate, and reduce levels of stress hormones in much the same way as light exercise.
  - 2. Laughter is considered a possible risk reducer for people with hypertension and other forms of CVD.
- B. Subjective well-being (SWB) is that uplifting feeling of inner peace and wonder called happiness which is defined by three central components:
  - 1. Satisfaction with present life
  - 2. Relative presence of positive emotions
  - 3. Relative absence of negative emotions
- C. Scientists suggest that people may be biologically predisposed to happiness, while other psychologists believe that we can develop happiness by practicing positive psychological actions.
- D. People with SWB are typically resilient, are able to look on the positive side, get back on track quickly, and do not despair as deeply over setbacks.
- E. Strategies to help individuals focus on the positive aspects of their life include:
  - 1. Develop gratitude and appreciation for the good things in your life.
  - 2. Use capitalization which refers to the process where we focus on the good things that happen to us and share those things with others.

- 3. *Know when to say when. Satisfice* is a term describing the ability to know when an outcome is good enough, rather than ideal.
- 4. *Grow a signature strength*. Traits such as wisdom, courage hope, and love are all considered virtues one should work hard to develop.
- F. Maintaining an optimistic mind-set, including expression of emotions and using laughter, is linked to improved immune function.
  - 1. Stressed out people with a strong sense of humor are less depressed.
  - 2. Students who use humor as a coping mechanism are in better moods.
  - 3. Telling a joke, particularly one that involves a shared experience, increases social cohesion.

# V. When Psychological Health Deteriorates

- A. Mental illnesses are disorders that disrupt thinking, feeling, moods, and behaviors and cause a varying degree of impaired functioning in daily life.
  - 1. They can range from mild to severe and can impact the quality of life of those with the illness and those who come in contact with them.
  - 2. It affects all nationalities, ethnicities, and races.
- B. An estimated 26% of Americans aged18 and older suffer from a diagnosed mental disorder each year. Many suffer from more than one at a time.
  - 1. College students face increasing threats from difficulty in relationships, anxiety, depression, sexual assaults, pressures to take drugs, and many social and environmental problems.
  - 2. The National College Health Assessment survey illustrates some of the difficulties college students face today. (See list on pg. 47)

#### VI. Mood Disorders

- A. Depression strikes millions of Americans each year. These numbers are low projections since many more individuals are misdiagnosed, underdiagnosed, not receiving treatment, or not treated with the right therapy. (See Table 2.4)
  - 1. There are two main types of depression.
    - a. Major depressive disorder is a form of chronic mood disorder that interferes with work, study, sleep, eating, relationships, and enjoyment in life.
    - b. People suffering from bipolar disorder, also called manicdepressive illness, often have severe mood swings, ranging from severe highs (mania) to lows (depressions).
    - c. The exact cause of bipolar disorder is unknown but it seems that biological, genetic, and environmental factors are involved in causing episodes of illness.
  - 2. Major depressive disorder is caused by the interaction between biology, learned behavioral responses, cognitive factors, environment, and situational triggers and stressors.
  - 3. The stressors of college life—such as anxiety over relationships, pressure to get good grades and win social acceptance, abuse of

alcohol and other drugs, poor diet, and lack of sleep—can overwhelm even the most resilient students.

- a. Depression on college campuses has become a huge problem.
- b. Most campuses have counseling centers, cultural centers, and other services available; however, many students do not use them because of persistent stigma about going to a counselor.
- c. Nearly 18% of college students indicated that they had felt depressed at some time during the last year.
- d. Moreover, approximately 32% of men and 39% of women on U.S. campuses reported they had felt so depressed that they found it difficult to function one to ten times during the last year.
- e. Students report that stress and depression are among their top five impediments to academic success.
- 4. Women experience depression at nearly two times the rate of men.
  - a. Hormonal changes related to the menstrual cycle, pregnancy, miscarriage, postpartum period, premenopause, and menopause may be factors in this increased rate.
  - b. Also, women face many stressors due to multiple responsibilities such as work, child-rearing, single parenthood, household chores, and caring for older parents.
  - c. New research indicates women have more difficulty obtaining restorative sleep, which may contribute to these problems.
  - d. Researchers have observed gender differences in coping strategies and have proposed that some women's strategies make them more vulnerable to depression.
- 5. Depression in men is often masked by alcohol or drug abuse or by the socially acceptable habit of working excessively long hours.
  - a. Typically, depressed men present not as hopeless and helpless, but as irritable, angry, and discouraged, often personifying a "tough guy" image.
  - b. Depression in men is associated with a higher risk of death by heart disease.
  - c. Men are also more likely to act on suicidal feelings; suicide rates among depressed men are four times those of women.
- 6. There are some differences in the incidence of depression in selected populations.
  - a. Older adults are less likely to be diagnosed and treated.
  - b. There has been a notable increase in depression among children. They pretend to be sick, refuse to go to school, sleep incessantly, engage in self-mutilation, get into trouble with drugs or alcohol, feel misunderstood, and attempt suicide.
- 7. There are several different types of therapy used to treat depression.
  - a. Cognitive therapy aims to help patients look at life rationally and correct habitually pessimistic thought patterns.
  - b. Intrapersonal therapy, sometimes combined with cognitive therapy, also addresses the present but focuses on correcting

- chronic relationship problems.
- c. Antidepressant drugs offer several options for treating depressive disorders.
- d. The most common antidepressants are the selective serotonin reuptake inhibitors (SSRIs), but new drugs with different methods of action have also become available. Care should be taken to fully explore the need for such drugs and their potential side effects before accepting a prescription.

# VII. Anxiety Disorders: Facing Your Fears

- A. Anxiety disorders are the number-one mental health problem in the U.S. People suffering from them are plagued by persistent feelings of threat and anxiety about everyday problems of living. Disorders include:
  - 1. Generalized Anxiety Disorder—excessive worry and anxiety that interferes with normal living
  - 2. Panic attacks—sudden onsets of disabling terror.
  - 3. Specific Phobias—deep persistent fears of objects, activities, or situations.
  - 4. Obsessive-compulsive disorder (OCD)—when people feel compelled to perform rituals over and over again; are fearful of dirt or contamination; have an unnatural concern about order, symmetry, and exactness; or have persistent intrusive thoughts that they can't shake.
  - 5. Social Phobia—characterized by the persistent fear and avoidance of social situations.
- B. There are no clear reasons as to why a person develops an anxiety disorder, but the cause may be biological, environmental, or within cultural and social roles

#### VIII. Seasonal Affective Disorder

- A. A type of depression known as the winter blues.
  - 1. It is associated with reduced exposure to sunlight.
  - 2. It is treated with light therapy, diet change, increased exercise, stress management, sleep restriction, antidepressants, and psychotherapy.

# IX. Schizophrenia

- A. Characterized by the alteration of senses; the inability to sort out incoming stimuli and to make appropriate responses; an altered sense of self; and radical changes in emotions, movements, and behaviors. Victims of this disease may not be able to function in society.
  - 1. Schizophrenia is treatable, but not curable.
  - 2. Treatments include hospitalization, medication, supportive therapy.

#### X. Gender Issues in Psychosocial Health

- A. Gender bias has been shown to influence diagnosis of psychosocial disorders.
- B. Research has shown that the gender of the patient has made a substantial difference in the diagnosis given.
- C. PMS has been provisionally included in the DSM-IV. There is some dispute about whether this is a mental or physical disorder. However, the diagnostic label may further the bias against using women in certain desirable jobs.

# XI. Suicide: Giving Up On Life

- A. Suicide is the second leading cause of death on college campuses, accounting for almost 20% of all suicides.
- B. There are several common warning signs of suicide intent. (See list on pg. 54)
- C. Take action if someone you know threatens suicide. (See list on pg. 54)

#### XII. Seeking Professional Help

- A. There are several types of mental health professionals. (See Table 2.6)
- B. What to expect in therapy:
  - 1. Explain needs, learn fees, and expect to spend an hour during your first
  - 2. The first session includes a personal history and problem identification.
  - 3. Be open and honest in order for them to help.
  - 4. Do not be embarrassed to acknowledge your feelings.
  - 5. Do not expect to be told how to behave.
  - 6. If you don't feel comfortable with the therapist, say so.

# DISCUSSION QUESTIONS

- What is psychosocial health? What indicates that you either are or aren't 1. psychosocially healthy? Why do you think the college environment may provide a real challenge to your psychosocial health?
- 2. Do you know anyone who has high self-esteem? What characteristics does this person possess?
- Why do you think the number of women with depression outnumbers that of men?
- Based on the examples given in the book showing an association between emotions 4. and the immune system, substantiate whether or not you believe in this concept. Describe any situations when you think your emotions affected your health.
- How might you know if a person is clinically depressed or temporarily sad, lonely, unhappy, or moody?

- 6. How have psychosocial disorders been portrayed in movies? What are some specific examples? Do you think the media has helped remove some of the stigma surrounding these disorders?
- 7. What actions could you take if a close friend shows some of the warning signals of suicide?

# STUDENT ACTIVITIES

#### **Individual**:

Make a list of 5 short-term goals to complete by the end of this term. Next to each goal write the percentage (from 1-100%) of self-efficacy you feel toward that goal. If there are any goals with percentages under 80%, rework the goal until you have a high level of self-efficacy toward achievement of the goal.

Visit the site for Spirituality & Health: <a href="http://www.spiritualityhealth.com">http://www.spiritualityhealth.com</a> and find out how to improve your own spiritual health. Write a short paragraph critiquing the site.

#### **Community:**

What resources are available on campus for psychosocial health? Visit the counseling center and write a short summary of services available and usage rates.

Find out if mental health services in your community are suffering from budget cuts. What type of city/county legislation is being proposed for mental health?

# Diverse Population/ Non-traditional:

How do people regard the mentally ill in other cultures? Find out if there is the same disproportionate number of women who suffer from depression in other cultures and suggest an explanation.

#### **MEDIA TOOLS**

#### E-THEMES FROM THE NEW YORK TIMES DISCUSSION QUESTIONS

#### LIFTING THE CURTAIN ON DEPRESSION

- 1. Since there seems to be a genetic predisposition to depression for some individuals, do you think this will encourage some individuals suffering from depression to seek help?
- 2. How do you feel about Ketamine, a narcotic better known in nightclubs as "Special K" being used in the treatment of depression?

# STUDY SUGGESTS THAT A NEED FOR PHYSICAL PERFECTION MAY REVEAL **EMOTIONAL FLAWS**

- 1. Do you think that patients desiring cosmetic surgery should meet with a psychologist as part of the medical team?
- 2. Do you agree with Dr. McLaughlin that "an unknown percentage of women undergoing breast augmentation have pre-existing psychiatric problems? Discuss your opinion.

# ABC NEWS LAUNCHER VIDEO DISCUSSION QUESTIONS

#### PSYCHOSOCIAL HEALTH

- 1. Do think that drug companies or the physicians who prescribe antidepressants to adolescents are responsible for the suicides of children taking such drugs?
- 2. Should parents of children taking antidepressants be informed of warning signs to watch for in their children?
- 3. Do you think that antidepressants administered to children should be banned? Why or why not?

# ADDITIONAL REFERENCES

Begley, S. (2007). Train Your Brain: How a New Science Reveals Our Extraordinary Power to Transform Ourselves. New York: Ballantine Books.

Dalai Lama and H.C. Cutler. (1998) The Art of Happiness: A Handbook for Living. New York: Riverhead.

Karren, D.J., Hafen, B.O., Frandsen, K.J., & Smith, N.L., (2006). Mind/Body Health: The Effects of Attitudes, Emotions, and Relationships. San Francisco: Benjamin Cummings

Norem, J. (2002). The *Positive Power of Negative Thinking*. New York: Basics Books.

# FOR FURTHER INFORMATION

American Foundation for Suicide Prevention. http://www.afsp.org

American Psychological Association Help Center, http://www.apahelpcenter.org

Anxiety Disorders Association of America. http://www.adaa.org

National Alliance on Mentally Illness. http://www.nami.org

National Institute of Mental Health (NIMH). http://www.nimh.nih.gov

Mental Health America. http://www.nmha.org

# **MEDIA**

Achieving Psychosocial Health. 28:30 minutes. The second module in the Allyn & Bacon health video series, *Total Health: Achieving Your Personal Best.* This video explores the multidimensional elements of psychosocial health and what individual can do to enhance psychosocial health.

Allyn & Bacon 160 Gould Street Needham, MA 02194-2315

*Mental Illness*. 23 minutes. The most common mental illnesses are described and recent medical advances discussed.

Films for the Humanities P.O. Box 2053
Princeton, NJ 08543-2053
www.films.com
1 (800) 257-5126

Depression and Suicide: You Can Turn Bad Feelings Into Good Ones. 26 minutes. Depression is a serious problem for young people. This film explains causes of depression and ways to prevent feelings of loneliness or sadness from becoming overwhelming.

Document Associates, Inc. 211 East 43rd Street New York, NY 10017

Depression: More Than the Blues. Long-term clinical depression is one of the most crippling conditions, yet it is now treatable. In this film, new techniques for treating the illness are surveyed.

Health EDCO P.O. Box 21207 Waco, TX 76702-1207 www.HealthEdco.com 1 (800) 257-5126

*Self-Esteem and Peak Performance*. Volume 1 and 2. Jack Canfield provides specific skills to build high self- esteem and enjoy peak performance everyday.

Career Track Publications 1775 38th Street Boulder, CO 80301