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### Important Dates

- ◆ Thanksgiving Break Begins: 11-24-2014
- ◆ Finals: 12-8-2014
- ◆ Spring Semester Begins on: 1-12-2015
- ◆ Drop Deadline: 1-17-2015
- ◆ MLK Day: 1-19-2015
- ◆ Spring Break: 3-9-2015
- ◆ Last Day for W: 3-27-2015
- ◆ April Fool's Day moved to 4-2-2015 due to leap year
- ◆ Easter Holiday: 4-3-2015
- ◆ Fall Registration: 4-14-15



## Mental Health: Then & Now

*Michael Malone*

We always like to talk about the good old days and how things were so much simpler. Some of that may be true unless you happened to need treatment for a mental disorder. Below is a sampling of what you could look forward to in the so-called “good ol’ days” if you were in need of some help.

**Trephination:** Have a headache or signs of mental illness? Let me drill a small hole in your skull and let some CSF (cerebrospinal fluid) leak out. Believed to work by releasing “evil spirits” or by releasing pressure, etc.

**Rotational Therapy:** Simple really: Take a chair and suspend it from the ceiling. Add one in-need patient and spin them like you are on the Wheel of Fortune game show! Problem is it cured nothing and now on top of their disorder, the patient is dizzy and nauseous.

**Insulin Coma Therapy:** Purposely creating a low blood sugar coma was thought to help by drastically changing the insulin levels which would rewire the brain.

**Lobotomy:** This one actually received a Nobel Prize. Taking a sharp instrument and destroying brain tissue in the frontal lobes (via the temples, forehead, or through the eye socket) was meant to reduce symptoms of mental disorders. Of course the damage was irreversible and it also caused loss of personality, intelligence and motor function. Not to mention seizures and incontinence.

**Electro Convulsive Therapy (ECT):** The thought was that using electricity to induce seizure would give the brain’s neurotransmitters a boost and poof mental illness would be a thing of the past. Speaking of the past, a lot of patients reported losing short term and some long term memory functions. This form of therapy is still used today

(although to a much more limited degree), and it is much safer.

Today mental disorders are treated using more humane techniques and tactics.

**Medication:** Like the old saying goes “there’s a pill for that” actually it seems there is. Whether it be a mood suppressor, mood stabilizer, or medication for anti-anxiety, there is a pill to help you feel better without putting you on a spinning chair or jamming a rod through your brain. Of course, there is almost always some unwanted side-effect. So, even this approach has not been perfected yet!

**Counseling:** Either group sessions or one-on-one counseling is used to try and work through the causes of anxiety and depression.

**Exercise:** Like it or not, studies seem to show that exercising can uplift mood while relieving stress and anxiety.

Whether it is through medicine, speaking to a therapist or, even exercise, today’s tactics seem much more humane and effective. But how will today’s approaches be viewed 100 years from now?



## Trip to the Psychology Museum

By Andrea Bracken

There they were, gathered together on a warm autumn morning, ready to travel the hour and forty minutes to Akron, Ohio. It's a Saturday, October 25<sup>th</sup>. Students and faculty of the psychology program journeyed to the *Center for the History of Psychology* at the University of Akron. The travelers climbed into vans driven by Dr. Monda and Dr. Paul.

We made a quick stop to pick up a straggler and witnessed Dr. Paul struggle with backing up a 13-passenger van and turn around (he surprisingly only took two tries). Finally the group took to the open road from Pennsylvania and into the Buckeye State.

The expedition consisted of lively talk about what sights would be seen that day. Uniforms worn during Zimbardo's prison experiment; the shock generator used by Milgram in his famous obedience study; and familiar to any psychology student the world around: Bandura's BoBo doll. We were excited to see them all, and more!

At around 1:30, the group arrived at the museum situated right on Akron's campus. A giant banner decorated the side of the building advertising the efforts of Nicholas A. and Dorothy M. Cummings who founded the museum.

Entering the lobby we saw different psychological artifacts against deep blue walls including a glass case of historical post cards depicting women from various time periods.

*“One gets a true sense of the field through the various displays, the hands-on sensation and perception stations, and letters written by famous people...”*

Deeper into the museum, we had the rare opportunity to see devices come to life which for us, and until now, had only existed in psychology textbooks. Displays included Skinner boxes: One he invented in the 1930s to care for his daughter (the *Air Crib*). The other, a training box used with rats. There was also experimental apparatus to study pitch perception used by Wundt. We saw Tichener's academic robes which he wore during his lectures. So much more!

Many of the objects were old, but perfectly preserved in a way that allowed the group to better understand not only the experiments that were conducted in earlier days of psychology, but also what the personal lives of the people behind them were like. One gets a true sense of the field through the various displays, the hands-on sensation and perception stations, and letters written by famous people like Freud, Einstein, and Helen Keller.

Displayed on the walls in the museum were old tests from years past about psychological stability for military purposes, and even a home economics test that was given to young girls. Hands-on exhibits included the Stroop

Task, a timed finger maze, and a weight judging test that has users discover their just noticeable difference (JND) threshold in discriminating weights.

What was maybe my favorite part of the trip was the behind-the-scenes tour. We went back through the offices where the preservation and cataloging work is done on the hundreds of documents, reels of film, and artifacts that call the museum home. One of the main jobs of some of the workers is to digitally preserve the films and documents for historians and researchers to conveniently access and utilize.

The group was shown where works of psychologists are neatly filed in boxes that span and fill an entire storage room. Researchers from all over the world come to Akron, Ohio to find and explore these archives. The head of the museum has noted that many of them come for the research but love to find details about the psychologists' personal lives as they dig through the many boxes.

It's not just articles and papers the museum houses, but also diplomas, graduation gowns, and various other personal mementos from people around the world who have expanded and contributed to the fields of psychology. This could also be seen in the museum's reading room, an area decorated with paintings done by psychologists, and old book shelves filled from top to bottom with books, some from as early as 1533!

The group was able to see many artifacts and original components of very famous experiments, and we all walked away with a renewed interest and understanding of the field of psychology. Please, if you ever get the chance to visit the museum, you should most definitely do so!



## 2014 RMU Creepy Conference Winner! Taleah Scott

The *Creepy Conference* was a fun night where seven people presented different aspects of the paranormal. Topics ranged from scary computer games, to Jack the Ripper. However, I wanted to utilize my psychology knowledge and provide a different perspective on thinking about “spooky” things to the audience. This brings me to the topic that I presented, *Pareidolia*.

Pareidolia refers to our tendency to interpret a vague or ambiguous stimulus as something already known to the observer. For example, interpreting the craters and irregular surfaces of the moon as a face, or the burn marks on a grilled-cheese sandwich as Elvis are examples of pareidolia. This is something that is often overlooked when people talk about paranormal experiences.

Actually, the issue includes non-paranormal experiences. Like when we look at a cloud and see the shapes of animals or people. Random patterns in nature can also seem familiar.



The point I tried to stress the most in my presentation was how easily we see faces, even the designs of several manmade objects seems to look back at us with expressive faces.

**pareidolia**  
/ˌpærɪˈdɔʊliə/

When it comes to shows like *Ghost Hunters*, people tend to make huge stretches so they can “prove” ghostly activity. These types of TV shows seem to have a standard formula: Explore a supposedly haunted area with cameras and assorted electronic gadgetry that is supposedly able to capture ghostly activity; walk around all jumpy-like and nervous while reviewing “evidence” of paranormal activity. The findings usually include bits of faint and unidentified audio (“ghostly voices”), strange anomalies in the thermal camera (“ghostly temperatures”), and unusual shadows or figures (“ghosts”).



The final question that I proposed to the audience was if these patterns in nature and manmade objects mean anything at all or are they just tricks of the mind?

I thoroughly enjoyed the *Creepy Conference*. The many topics were highly interesting and a little scary to think about at times. I felt very happy to have the opportunity to be chosen to speak and it was an honor to be the winner of the night!

### Psi Chi FYI

*Although Psi Chi was started in 1927, it only transitioned from a national honor society to an international honor society in 2009.*

## RMU Psychology Club Update (Diane Gorog)

A new year has brought many great things to psychology club. We have doubled our membership and have offered many great opportunities to develop interest in the world of psychology!

We held our annual Psycho-Social in September which was themed, “Flash back to the 90s” and featured a presentation on *happiness* by Dr. Wheeler.

In another meeting we built towers out of spaghetti and marshmallows to work on team building skills and to identify the “hidden assumptions” we encounter throughout life.

Other meeting topics included a cognitive psychology theme about the processes of working memory of humans vs. primates. Also, we explored the psychological themes behind the film, *Good Will Hunting*.

A few members participated in our annual community service event, *Hike for Hope*, which supported the local horticultural therapy organization known as *Hope Grows*.

Two final events planned for the end of the semester will be a guest speaker talking about professional development in a field of psychology and the second will be a social event to help psychology students to relax before finals roll around.

I hope you can join us to see what psychology club has to offer you! We also plan to have t-shirts (see below) for sale soon!

Interested in joining? Please contact Dr. Monda (monda@rmu.edu)!



## Sad Truths about Depression

*Jordan Neusch*

One out of five people suffer from a mental illness in their lifetime. Depression is one of the most common mental illnesses but is also one of the most misunderstood and stigmatized.

Misinformation and misconceptions about depression are widespread. Perhaps you have heard of, or already hold, one or more of the following incorrect beliefs:

### ***Depression is just about feeling sad.***

Depression is categorized as a mood disorder and one of the most prominent symptoms is a persistent feeling of sadness. However, there are other symptoms also common to depression. Physical symptoms can

include insomnia, changes in appetite, lack of energy, and unexplained pains (such as headaches or backaches). Additional emotional issues are common with depression. These can include lack of pleasure, lack of motivation, feelings of worthlessness, and thoughts of suicide.

### ***Depression will just go away in time.***

Without treatment, depression can last from months to years and become more severe.

Depression has physiological and psychological causes that often require medication or therapy. Feelings of sadness can be normal, but when these feelings last for extended periods of

time or interfere with quality of life, professional help should be sought.

### ***Depression is normal.***

It is normal to feel sad or upset at times. Events such as the death of a loved one, the end of a relationship, diagnoses of illness, can all bring about feelings of sadness. However, it is important to keep in mind that, while sadness is normal, depression is not. If feelings of sadness persist for long periods of time (months) or makes daily life difficult, then it is not normal and may require treatment.

Zeller, P. (2006). Dispelling the top 10 depression myths: Understanding is half the battle. *Vibrant Life*, 22(6), 10-11.

## History of Psychology: Dr. Wendell Johnson

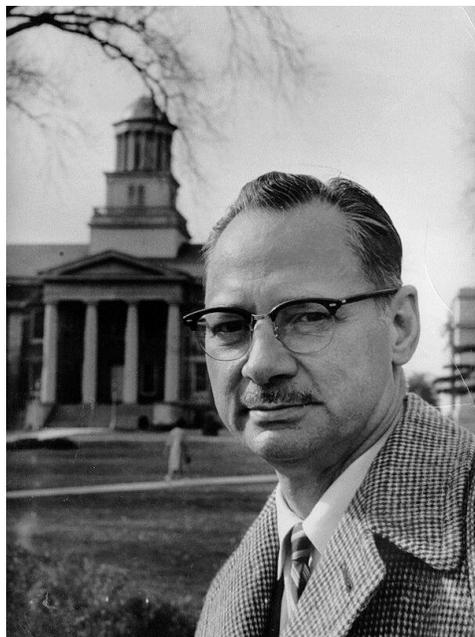
*Randi Jackson*

Dr. Wendell Johnson was an American psychologist, actor, author, and one of the earliest proponents of general semantics. Considered one of the earliest and most influential speech pathologists in the field, he spent most of his life trying to find the cause and cure for *stuttering*.

He played a major role in the creation of the American Speech and Hearing Association. Born in Roxbury, Kansas, on April 16, 1906, he died of a heart attack at his home in Iowa at age 59. He died with a pen in his hand, drafting the entry on speech deficits for the Encyclopedia Britannica.

As a child, Johnson was teased in school because of his stuttering. Nevertheless, he was president of his high school class, valedictorian, and captain of the football, baseball, and basketball teams. He found that humorous conversation and behavior made his stuttering much less painful for him as well as for others. Johnson truly enjoyed people and had an enthusiasm for living, with an unflinching optimistic outlook of life. It is not surprising that for a later period of his life he was president of the Iowa City chapter of Optimists International.

After two years at MacPherson College, Johnson entered the State University of Iowa in 1926, where he won honors in English and Journalism,



and received his B.A. in 1928. In graduate school he studied clinical psychology, focusing on physiology and the emerging field of speech pathology.

Combining his fondness for writing with his personal experiences, Johnson conducted in-depth psychological and physiological analyses of himself as a stutterer for his thesis. In 1930 he expanded and published this work into his first book, *Because I Stutter*. He completed his doctoral degree on the effects of stuttering on personality.

Dr. Johnson is notorious for "*The Monster Study*," an experiment on

stuttering performed with 22 orphan children in 1939. The children were assigned to groups and Tudor gave positive speech therapy to one group, praising the fluency of their speech. For the other group, negative speech therapy was provided where the children were belittled for any speech imperfection they made.

Many normal speaking children who received negative therapy suffered, and some retained speech problems for the rest of their lives. Johnson's peers were horrified at what he'd done simply to prove a hypothesis. The study was kept secret to protect Johnson's reputation given that it was conducted when Nazis were performing inhumane experiments. (Tudor's dissertation is the only official record of the study.)

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