

Social Psychology

Social Construction of the Self

Social Comparison Theory

- **social comparison** (Festinger) - people evaluate themselves in relation to others
- **reference groups** - the categories of people to which you see yourself as belonging and to which you habitually compare yourself
- **relative deprivation** - the belief that, no matter how much you are getting in terms of money, status, recognition, etc. it is less than you deserve

Social Identity theory

- our beliefs about the groups to which we belong; our social identity is thus part of our self-concept

Social Perception

The role of schemas

- schemas influence what we pay attention to and what we ignore
- we tend to process information about the other person more quickly if it confirms our beliefs about that person's gender or ethnic group, for example
- schemas influence what we remember about others
- schemas affect our judgement about the behaviour of others
- schemas can create *self-fulfilling prophecies*, leading people to act in ways that bring out in others behaviour that is consistent with first impressions

Attribution theory (Heider)

- is the process of explaining the causes of people's behaviour, including one's own
- our choice of responses helps us to *understand* the other's behaviour, *predict* what will happen in the future, and how to *control* the situation should it happen again
- people tend to attribute behaviour in a particular situation to either *internal* (characteristics of the person), or *external* (situational) causes

Sources of attributions

- Harold Kelly (1973) proposed that to understand another's (known as *actors*) behaviour, you need information about three variables (you become the *observer*):
 1. *Consensus* is the degree to which other people's behaviour is similar to that of the actor's
 - if everyone has a high degree of consensus, you would attribute his behaviour to an internal cause
 2. *Consistency* is the degree to which the behaviour occurs repeatedly in a particular situation

- low consistency suggests that behaviour is due to external causes
3. *Distinctiveness* concerns the extent to which similar stimuli elicit the same behaviour from the actor
- behaviour that is low in distinctiveness is usually attributable to internal causes

	Internal Attribution	External Attribution
Consensus	high	low
Consistency	high	low
Distinctiveness	low	high

The primary (fundamental) attribution error

- refers to a tendency to overattribute the behaviour of others to internal factors
- it may generate overconfidence about impressions of other people
- leads to underestimates of the extent to which another person's behaviour is due to external causes, and thus how much that person's behaviour might vary across situations
- it explains why, despite the fact that situations often influence our behaviours more than traits, most people believe that traits are the major cause of our behaviours

The ultimate attribution error

- positive actions performed by people from a different ethnic or social group are attributed to external causes, while their negative actions are attributed to internal causes

The self-protective functions of social cognition

- **unrealistic optimism** - people tend to believe that positive events are more likely to happen to themselves, and vice versa
- **unique vulnerability** - people tend to judge other's actions as being high risk and believe themselves to be at lower risk
- **self-handicapping strategy** - protects self-esteem by providing a way for one's failings to be attributed to an external cause, not negative internal characteristics

Attitudes

- an attitude is the tendency to respond positively or negatively to a particular object
- they are based on a tendency to behave in an observable way
- they are mutually consistent and internally consistent
- attitudes are evaluative; beliefs are neutral

The structure of attitudes

- consist of 3 components:
 1. cognitive (beliefs)
 2. affective (feelings)
 3. behavioural (actions)
- cognitive theories propose that attitudes consist of evaluations of an object that are stored in memory
 - this suggests that the likelihood of attitude-behaviour consistency depends on:
 - accessibility of evaluations in memory
 - subjective norms
 - perceived control over the behaviour
 - prior direct experience with the attitude object
 - how closely people monitor the behaviour of others

Forming attitudes

- attitudes can be learnt by:
 - classical conditioning
 - operant conditioning
- the *mere-exposure effect* also affects attitudes - all things being equal, attitudes toward an object will become more positive the more frequently people are exposed to it

Changing attitudes

- the effectiveness of persuasive messages in changing attitudes is influenced by:
 1. the characteristics of the person who communicates it
 2. its content – repetition increases the persuasiveness
 3. the audience that receives it
- the **elaboration likelihood model** is based on the premise that persuasive messages can change people's attitudes through one of two routes:
 1. the *peripheral route* - when it is activated, we devote little attention to the central content of the persuasive message and tend to be affected by peripheral *persuasion cues* such as the confidence, attractiveness of the person delivering the method
 2. the *central route* - when activated the content of the message becomes more important

Likelihood of attitude change

- rapid speakers are more persuasive than slow deliberate speakers
- an optimum distance is required between the communicator and recipient
- more distraction leads to a higher chance of being persuaded
- there is an inverted U-shaped relationship between the anxiety level of recipients and the fear content of a message

Characteristics of message	Characteristics of recipient and likelihood of behaviour change	
	Intelligent	Less intelligent
Explicit		High
Implicit	High	
One-sided communication		High
Two-sided presentation	High	
Repetition	High	High
Delivered by opinion leader	High	High
Interactive personal discussion rather than mass media	High	High

Cognitive Dissonance theory

- Leon Festinger (1957)
- holds that inconsistency between cognitions about attitudes and cognitions about behaviour creates discomfort that often results in tension-reducing attitude change
- the power of cognitive dissonance to change attitudes may be greater in the individualist cultures of Europe and North America - where group rather than individual values and goals are emphasized, behaving at odds with one's personal beliefs may create less discomfort
- cognitive dissonance:
 - is motivating
 - explains behaviour markedly at variance with the initial attitude of an individual
 - is ego-dystonic
- high dissonance is likely when there is:
 - awareness of personal responsibility for the consequences of an action
 - an expected unpleasant consequence of the behaviour for others
 - low pressure to comply with an action
 - high perceived choice between actions
 - high arousal
- cognitive dissonance can be reduced by:
 - justification of effort
 - changing attitudes
 - rationalizing the information creating the dissonance
 - counter-attitudinal advocacy

Self-Perception theory

- Daryl Bem (1967)
- suggests that people sometimes *infer* from their behaviour what their attitudes are, if they are in a position where they are not sure
- seems to apply best when people have no prior attitude

Balance theory (Heider)

- each individual attempts to organize their attitudes, perceptions, and beliefs so that they are in harmony with each other

Measuring attitudes

Thurstone scale

- dichotomous scale indicating agreement/ disagreement with a statement
- it is an equally appearing interval scale
- disadvantages:
 - different response patterns may result in the same mean score
 - setup is unwieldy
 - ranking may be biased

Likert scale

- 5-point interval scale indicating level of agreement
- advantages:
 - increased sensitivity
 - easily administered
- disadvantages:
 - different response patterns may result in the same mean score

Semantic Differential scale

- a bipolar visual analogue scale
- advantages:
 - ease of use
 - good test-retest reliability
- disadvantages:
 - positional response bias
 - no consistent meaning to midpoint mark

Predicting behaviour

- measured attitudes are a poor predictor of behaviour
- individual measures of attitudes correlate poorly
- attitudes based on personal experience predict behaviour strongly
- the more specific the attitude, the more predictable the behaviour

Prejudice and stereotypes

- **stereotypes** are the perceptions, beliefs, and expectations a person has about members of some group
- usually, they involve the false assumption that all members of a group share the same characteristics
- stereotyping often leads to **prejudice**, which is a negative attitude, or a cluster of negative beliefs, toward an individual based simply on his or her membership in some group
- the behavioural component of prejudice involves **discrimination**, which is the differential treatment of individuals who belong to different groups, or negative action towards a minority
- **reverse discrimination** is bending over backwards to be friendly with a minority group member

Motivational theories

- suggest that some people have a need to derogate and dislike others
- prejudice may be especially likely among people whose parents used punishment or harsh words to instill the belief that they must defer to and obey all those with a higher status than themselves
- encourages the development of a cluster of traits called the *authoritarian personality*
- they protect themselves from threat by strongly identifying with their own ethnic, cultural, or social group - their *in-group* - and to reject and dislike people who are members of other groups, or *out-group* members

Cognitive theories

- people categorize others into groups in order to reduce social complexity
- people must use schemas and other cognitive shortcuts to organize and make sense of their social world
- noticeably objective behaviour by even a few members of an easily identified ethnic group may lead people to see and *illusory correlation* between that behaviour and ethnicity
- people may be more likely to recall negative stereotypes when they are in a negative mood

Learning theories

- stereotypes, prejudice, and discriminatory behaviours can be learned from parents, peers, and the media

Reducing prejudice (Cook)

- the *contact hypothesis* proposes that intergroup contact can reduce prejudice and lead to more favourable attitudes towards the stereotyped group
- conditions likely to reduce prejudice:
 1. cooperative effort

2. personal acquaintance
3. equal status
4. exposure to non-stereotypic individuals

Social influence

- *norms* establish the rules for what should and should not be done in a particular situation
- *descriptive norms* indicate what most people do and create pressure to do the same
- *injunctive norms* provide specific information about what others approve or disapprove
 - *reciprocity* is the tendency to respond to others as they have acted toward you
- *deindividuation* is a psychological state in which people temporarily lose their individuality, their normal inhibitions are relaxed, and they may perform aggressive or illegal acts that they would not perform otherwise
- caused by:
 1. the belief that one cannot be held personally accountable for one's actions
 2. a shifting of attention away from internal thoughts and standards and toward the external environment (e.g. standing in robes around a burning cross)

Motivation and the presence of others

- **social facilitation** describes circumstances in which the mere presence of other people can improve performance
- **social impairment** is the opposite effect
- **arousal** increases the tendency to perform those behaviours that are most *dominant*, and this tendency may help or hinder performance
- when a group performs a task, it is not possible to identify each person's contribution and some people exert less effort than when performing alone - **social loafing**

Conformity and compliance

- when people change their behaviour or beliefs to match those of other members of group, they are said to conform
- **conformity** occurs as a result of unspoken group pressure, real or imagined
- **compliance** occurs when people adjust their behaviour because of a direct request e.g. "please pass the salt"

Why do people conform?

- **public conformity** suggests that people will behave in a way because it is the socially desirable thing to do, even if they have doubts
- **private acceptance** proposes that people will change their minds under the group expectation

When do people conform?

- 1) **Ambiguity of the situation**
 - as the physical reality of a situation becomes less certain, people rely more and more on other's opinions, and conformity to a group norm becomes increasingly likely (e.g. people staring at the top of a building become convinced that there is something to be seen, and persuade others so)
- 2) **Unanimity and Size of the Majority**
 - people experience great pressure to conform as long as the majority is unanimous
 - once unanimity is broken, conformity drops greatly
 - *social impact theory*:
 - holds that a group's impact on an individual depends not only on the group size, but also on how important and close the group is to the person
- 3) **Gender**
 - no difference exists, despite initial experiments finding that women conform more than men

Inducing compliance

- **foot-in-the-door technique** consists of getting people to agree to small requests and then working up to larger ones
- **door-in-the-face procedure** begins with a request for a favour that is likely to be denied - the person making the request then substitutes a lesser request, which was what they really wanted anyway
- the **low-ball approach** involves getting someone to make a commitment (usually oral) and then increase the cost of fulfilling it, often because of an 'error'

Obedience

- the behaviour change comes in response to a *demand* from an authority figure

Factors affecting obedience

- 1) **Prestige**
 - obedience declines when the status of the authority figure declines, although perhaps not as much as expected
- 2) **Presence of others who disobey**

- the presence of others who disobey appears to be the most powerful factor reducing obedience
- 3) **Personality characteristics**
- people high in *authoritarianism* are more likely than others to comply
 - the same tends to be true for people with an external *locus of control*

Aggression

- is an action intended to harm another person

Why are people aggressive?

- Freud proposed that aggression is an instinctive biological urge that builds up in everyone and must at some stage be released - due to *Thanatos*, the death instinct
- some evolutionary psychologists believe that aggression sometimes occurs because it promotes the survival of the aggressor's genes

1) **Genetic and biological mechanisms**

- several parts of the brain influence aggression:
 - amygdala
 - hypothalamus
 - related areas
- damage to these structures may produce *defensive aggression* - heightened aggression to stimuli not usually threatening
- *testosterone* increases or decreases depending on the amount of testosterone in an animal's body

2) **Learning and cultural mechanisms**

- aggressive behaviour is more common in individualist than in collectivist cultures
- immediate reward or punishment can also alter the frequency of aggressive acts

The frustration-aggression hypothesis

- frustration = a condition that occurs when obstacles block the fulfillment of goals
- proposes that frustration always results in a readiness to respond aggressively
 - once this readiness exists, cues in the environment that are associated with aggression will lead a frustrated person to behave aggressively
- the more negative the emotion caused by frustration, the stronger is the readiness to respond aggressively
- aggression is more likely to occur following an unexpected failure than after an expected one

Arousal

- arousal from one experience may carry over to an independent situation, producing what is called **transferred excitation**

- e.g. exercise may increase your likelihood of being aggressive
- it is most likely to produce aggression when the situation contains some reason, opportunity, or target for aggression

Environmental influences on aggression

- aggression and violence are more likely to occur in high temperatures
- air pollution and noise can influence whether a person displays aggression
- crowding tends to create physiological arousal, and cause people to report more negative feelings
- from animal studies, maintaining a distance can inhibit aggression

Altruism and helping behaviour

- tends to be learnt through positive reinforcement and modelling

Cost-reward theory of helping behaviour

- proposes that people find the sight of a victim distressing and anxiety-provoking, and this experience motivates them to do something to reduce the unpleasant arousal
- the more physiologically aroused bystanders are, the more likely they are to help
- before helping, the bystander evaluates two aspects of the situation - the costs of helping and the costs of not helping
- when the costs of helping and not helping are both high, helping is more likely if:
 1. there is a clear need for help
 2. the presence of others
 - tends to inhibit helping behaviour
 - the *bystander effect* indicates that the more people who witness and emergency, the less likely someone will help
 - the tendency to deny any personal responsibility is known as **diffusion of responsibility**
 - one is more likely to help if there are small children around rather than adults
 3. environmental factors
 - people in urban areas are generally less helpful than those in rural areas
 4. the helper has helped in the past with good outcomes
 5. there is a perception that the positive consequences outweigh the negative ones
 6. the victim is perceived as being not responsible for his predicament
 7. the freedom of the helper is not limited by helping
 8. males are more likely to help – females are likely to receive help more often than males

Empathy-Altruism theory

- maintains that people are more likely to engage in altruistic, or unselfish, helping even if the personal cost is high, if they feel empathy towards the person in need

Evolutionary theory

- views many human social behaviours as echoes of actions that contributed to the survival of our prehistoric ancestors
- *kin selection* may produce genetic benefits for the helper

Personal relationships

- women with more attractive partners are less neurotic
 - there is no such relationship with men
- marital satisfaction is associated with:
 - sexual satisfaction
 - satisfaction with work, income, and leisure activities
- both men and women seek partners with a similar level of attractiveness

Theories of Interpersonal attraction

1. **Equity theory** (Hatfield & Traupmann)
 - a) the cost-benefit ratio of the relationship is felt to be equal for both
2. **Reinforcement theory** (Newcomb)
 - a) reciprocal reinforcement of attractions occurs with rewards in both directions
3. **Proxemics**
 - a) relates to the interpersonal space-body buffer zone
4. **Social exchange** (Homans)
 - a) people prefer relationships that offer optimum cost-benefit ratio

Personal space

- young females interact at a closer distance with males than with other females
- people with type A personality dislike close interaction, and need greater personal space
- females are concerned with invasion of personal space from the front
- males are concerned with invasion of personal space from the side
- violent people are concerned with invasion of personal space from the back

Interpersonal distance (Hull)

- between close friends is 1-3 feet
- for impersonal contact is 4-10 feet
- for physical sport is 0-1.5 feet
- for business contact is 4-10 feet
- for formal contact is greater than 12 feet

Crowding

- social density is the number of people in a given space
- spatial density is the amount of space available for a given number of people
- social density increases as the number of people increases in a given space
- spatial density decreases as the number of people increases in a given space
- increasing social density affects men more than it does women

Group processes

The prisoners dilemma

- when given a choice between cooperation and competition, people often compete with one another
- this is even true when, as in the *prisoners dilemma game*, they receive fewer rewards for competing than for cooperating

Social dilemmas

- in social dilemmas, selfish behaviour that benefits individuals in the short run may spell disaster for the entire group in the long run

Interpersonal conflict

- in *zero-sum games*, competition is inevitable because there can only be one winner
- such situations lead to interpersonal conflict, in which one person believes the other stands in the way of something of value
- methods for managing conflict include:
 - bargaining
 - third-party interventions
 - reminders about broader goals
 - shared identity

Group leadership

- *task-oriented* leaders are most effective when:
 - the task is structured or clear
 - the group is working under time pressure
- *person-oriented* leaders are most effective when:
 - the task is unstructured
 - there are no severe time limitations
- *contingency theories of leadership effectiveness* propose that success depends on the extent to which a leader's style fits the characteristics of the group and its tasks
 - *autocratic* style is more effective for example, in army training
 - *laissez-faire* groups yield greater productivity when a highly original product is required
- a directive leader improves the performance of a group when intellectual ability is less
- in experiments by Lewin, democratic leaders were as equally effective as autocratic leaders
- in the absence of a leader, members in a *laissez-faire* group become aggressive towards each other

Group decisions

- experiments have found that decisions taken by a group are less conservative than those taken individually, even though common sense might suggest the opposite
- group discussion causes members to shift towards a view in the same direction as the initial view

- group polarization occurs when each member wants to outdo the other members
- deindividuation (see below) occurs in groups, and makes people become less responsible for their own actions

Groupthink

- Irving Janis (1989)
- *groupthink* occurs when group members are unable to realistically evaluate the options available to them or to fully consider the potential negative consequences of a contemplated decision
- it is particularly likely when:
 1. the group is isolated from outside influences
 2. the group is working under time pressure or other intense stressors
 3. the leader is not impartial

Deindividuation

- characterized by:
 - reduced self awareness
 - reduced ability to monitor own behaviour
 - increased impulsive behaviour
- anonymity is the most effective factor

Tasks

- on additive tasks, groups fare better than individuals providing that *social loafing* does not occur
- on conjunctive tasks, individuals fare better than groups; performance by groups is determined by the least competent worker
- on disjunctive tasks, performance is determined by the most competent worker
- the strength of any social influence is diluted by the number of people receiving it

Institutions

- institutions have ‘encompassing tendencies’, characterized by four features:
 1. *batch living* – home, work, and play lives are collapsed into one sphere of life
 2. *binary management* – staff and inmates live in different worlds
 3. the *innate role* – taught by a ritualized admission procedure
 4. *institutional perspective* – a view of life which validates the institution’s existence
- *total institutions* (Goffman, 1961, in ‘Asylums’)
 - are organizations in which a large number of like-situated individuals, cut off from the wider social world, together lead an enclosed, formally administered round of life, for example:
 - prisons
 - hospitals
 - monasteries
 - large ships

- the *mortification process* is the process whereby an individual becomes an inhabitant of a total institution
- *social institutions* is an established and sanctioned form of relationship between social beings, for example:
 - church
 - political parties
- according to Goffman, patients were said to show various possible reactions to the *mortification process*, including:
 - withdrawal
 - open rebellion
 - colonization – the patient pretends to show acceptance
 - conversion
 - institutionalization – actual acceptance both outwardly and inwardly
- Institutional Neurosis (Barton, 1959)
- Secondary handicap (Wing, 1978)

The Health-Belief Model

- compliance depends on:
 1. patient's perceived readiness to act
 2. estimation of the costs and benefits of compliance
 3. need of a cue to action, i.e. indication that something is wrong, e.g. perceived severity of illness

Medication Compliance

- is reduced by:
 - prophylactic medication
 - lack of warning symptoms, e.g. hypertension, glaucoma
 - excessive information is provided
 - feelings of lack of control

The Sick Role

- Parsons (1951)
- defined as the role given by society to a sick individual and it carries two rights:
 - exemption from normal responsibilities, such as work
 - exemption from blame for the illness
- and two responsibilities:
 - the wish to recover as soon as possible
 - cooperation with medical investigations and acceptance of medical advice and treatment

The Social Role of the Doctor

- includes:
 - defining illness
 - legitimizing illness
 - imposing an illness diagnosis if necessary
 - offering appropriate help
- doctors therefore control access to the sick role

Illness behaviour

- Mechanic (1978)
- it is a set of stages describing the behaviour adopted by sick individuals
- it involves the manner in which individuals:
 - monitor their bodies
 - define and interpret their symptoms and signs
 - take remedial action
 - utilize sources of help
- illness behaviour includes the following stages:
 1. initially well
 2. symptoms are experienced
 3. the opinion of immediate social contacts is sought

4. contact is made with a doctor
 5. the illness is legitimized by the doctor
 6. the individual adopts the sick role
 7. on recovery the dependent stage of the sick role is given up
 8. a rehabilitation stage is entered if the individual recovers
- the determinants of illness behaviour are:
 1. the visibility and recognizability of symptoms
 2. the extent to which symptoms are seen as being serious
 3. knowledge and cultural understanding of the symptoms
 4. basic needs leading to denial
 5. competition between needs and illness responses
 6. competing interpretations assigned to symptoms
 7. availability and proximity of treatment resources and the costs in terms of time, money, effort, and stigma

Filters to Psychiatric Care (Goldberg & Huxley, 1980)

- social factors:
 - age, sex, ethnic background, socioeconomic status
- service organization and provision:
 - time and location of clinics, length of waiting list
- aspects of the disorder itself:
 - severity
 - chronicity
- these filters include:
 - decision to consult the GP
 - the recognition of the disorder by the GP
 - the decision by the GP as to whether or not to refer the patient to a specialist

Important Social Science reports

Newsom & Newsom (1970)

- pointed to social class differences in family life
- unskilled manual workers:
 - more likely to have strong role segregation between husband and wife
 - stereotype children in terms of gender
 - rely on 'non-verbal' methods for controlling children
- middle-class children:
 - relatively protected in childhood
 - future oriented
 - encouraged to learn communication skills

The Black report (DHSS, 1980)

- risk of death before retirement was 2.5 x greater in social class V than in social class I
- in social class V, the neonatal mortality was twice as high
- 'a consistency of class gradients in mortality throughout the lifetime'