



Level 4 Course Aims and Objectives

2011-2012

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1. METHOD OF ASSESSMENT AND DEADLINES

A number of options have a continuous form of assessment to a maximum of 30% with the degree exam contributing 70%. A summary of these options is below. All other options consist of 100% examination assessment. DEADLINES will be announced when the timetable has been confirmed.

COURSE	TYPE OF COURSEWORK	% OF OPTION	DEADLINE
Advanced Qualitative Methods	Secondary Analysis of Qualitative Data	30%	21 st October
Basics of Joint Attention	Oral Presentation	30%	21 st October
Leadership	CR	30%	21 st October
Psychology of Will	Observational Report and Class Debate	10% 20%	21 st October
Atypical Development	Case Study	30%	25 th November
Forensic Psychology	CR	30%	10 th February
Positive Psychology	Electronic Presentation	30%	10 th February
Sleep & Circadian Timing	Case Study Report	30%	10 th February
Autism Spectrum Disorder	Podcast	30%	17 th February
Adolescent Brain Development	Electronic Presentation	30%	16 th March
Networks of Attention and Working Memory	Oral Presentation	30%	16 th March
Concepts of Empirical Results in Education	Electronic Presentation	30%	23 rd March

2. MODULES EXAMINED IN THE DECEMBER DIET

Most modules are examined in the April/May diet, however those modules which are taught in the first block of the first semester are usually examined in the December diet. This year the modules to be examined in December are:

- Psychology of Abnormality
- Leadership
- Psychology of Will
- Basics of Joint Attention

Note: Advanced Qualitative Methods this year will be examined in the April/May diet.

3. LEVEL 4 COURSE OUTLINES 2011-12

3.1. ADOLESCENT BRAIN DEVELOPMENT (DR M-H GROSBAS)

The aim of this module is to present recent research on adolescent brain development. The purpose is not to cover all issues about adolescence. Instead we will adopt a cognitive neuroscience perspective, and examine how we can use evidence from changes in brain structures to constrain our thinking about cognitive development. From this perspective adolescence can be apprehended as a specific period in the life-span with opportunities but also vulnerabilities. Students will be encouraged to develop critical thinking about implications for social policies, educational and disorders of mental development.

The structure of the course is meant to be interactive and the exact sequence of themes dealt with may change according to students input.

	Lecture Summary	Learning Objectives
1 & 2	Introduction	Students will: <ul style="list-style-type: none"> • identify relevant issues connected with the study of adolescent brain development • be informed about the structure of the course and assessment • choose a subject for their continuous assessment piece of work
3 & 4	Principles of CNS development.	Students will: <ul style="list-style-type: none"> • be able to identify the main landmarks of the human brain development • question the advantages and drawbacks of the different techniques to study brain development • understand the notion of plasticity and be able to describe some examples
5	Specific changes occurring in the adolescent brain.	Student will be able to: <ul style="list-style-type: none"> • explain some basic mechanisms that underline brain development, such as myelination or synaptic pruning, and describe how/when/where they take place during adolescence • describe biochemical and hormonal changes and how they may relate to structural changes • discuss the utility of animal models
6	Social cognitive development. Students will be given examples of structure-function relationships in development for the specific domain of social cognition.	Students will be able to: <ul style="list-style-type: none"> • relate what they have learned regarding brain development, especially in the prefrontal cortex, to changes in social abilities specific to adolescent • recognize the specificity of adolescence, especially regarding the role of peer influence

7 & 8	Developmental disorder emerging during adolescence.	Students will be able to: <ul style="list-style-type: none"> • list a number of disorders for which adolescents are particularly vulnerable and speculate on mechanisms • reflect on the vulnerability to drugs during adolescence
9 & 10	Social Ethical and educational issues	Students will be: <ul style="list-style-type: none"> • encouraged to reflect on the implication and translation of what they have learned about adolescent brain development

References:

General

Developmental Cognitive Neuroscience. Marc H Johnston, Blackwell Publishing.

Adolescent brain development: a period of vulnerabilities and opportunities.

Annals of the New York Academy of Sciences Volume 1021 Issue Adolescent Brain Development: Vulnerabilities and Opportunities , Pages 1 - 469 (June 2004).

Review and opinion articles

Mapping brain maturation and cognitive development during adolescence. T Paus; Trends in Cognitive Sciences Vol 9, 2005, Pages 60-68.

Imaging the developing brain: what have we learned about cognitive development? B.J. Casey , Nim Tottenham, Conor Liston and Sarah Dursto Trends in Cognitive Sciences Vol 9, March 2005, Pages 104-110.

Cognitive and affective development in adolescence. L. Steinberg Trends in Cognitive Sciences, Vol 9, February 2005, Pages 69-74.

Influencing brain networks: implications for education Michael I. Posner and Mary K. Rothbart Trends in Cognitive Sciences, Vol 9, March 2005, Pages 99-103.

Original articles

Brain development during childhood and adolescence: a longitudinal MRI study JN Giedd, J Blumenthal, NO Jeffries, FX - Nature Neuroscience, 2, 1999 pp 861:863.

Development of the adolescent brain: implications for executive function and social cognition. SJ Blakemore, S Choudhury - Journal of Child Psychology and Psychiatry 47:3 (2006), pp 296–312.

Is the course of brain development in schizophrenia delayed? Evidence from onsets in adolescence. Schizophrenia Research, Volume 40, Issue 1, Pages 1-10.

Neural Mechanisms of Resistance to Peer Influence in Early Adolescence Grosbras MH, Jansen M, Leonard G, McIntosh A, Osswald K, Poulsen C, Steinberg L, Toro R, Paus T (2007) Journal of Neuroscience, 27(30) pp 8040-5.

3.2. ADVANCED QUALITATIVE METHODS IN PSYCHOLOGY (DR K REID - EDUCATION)

The aims of this course are to introduce and equip students with research ready skills in advanced qualitative methods and analysis. The course aims to support students to acquire a critical understanding of core issues in qualitative methods and analysis inclusive of; the role of epistemology, design, data collection techniques, process of analysis, write up considerations and awareness of rigour and quality.

	Lecture Summary	Learning Objectives
1&2	<p>Qualitative Research in Psychology: areas of application</p> <p>What types of research issues best suit qualitative rather than quantitative enquiry.</p> <p>Identifying the epistemological roots of qualitative enquiry</p>	<p>Students will;</p> <ul style="list-style-type: none"> • Summarise the scope of qualitative enquiry in Psychology • Judge the types of research questions that are best suited to qualitative enquiry • Recognise key epistemological questions, including the role of theory in determining methods of data collection and analysis
3&4	<p>Qualitative Research Design; the research question, data collection & preparation techniques, ethics and reflexivity</p>	<ul style="list-style-type: none"> • Identify, select and integrate appropriate data collection methods that best suit the research questions asked • Evaluate their own role as researcher • Identify and take actions to ensure ethical adherence in the research process.
5&6	<p>Approaches to Qualitative research (I)</p> <p>i) Content Analysis ii) Thematic Analysis iii) Grounded Theory Interpretative Phenomenological Analysis (IPA)</p>	<ul style="list-style-type: none"> • Recognise and judge which qualitative approaches exemplify inductive research versus deductive research • Select appropriate method of analysis best suited to research question • Describe methods of analysis particular to Content, Thematic, Grounded Theory and IPA • Evaluate each method of analysis in terms of its intended contribution to research
7&8	<p>Approaches to Qualitative Research (II)</p> <p>i) Discursive Psychology ii) Foucauldian Discourse Analysis (DA) iii) Innovative Techniques</p>	<ul style="list-style-type: none"> • Describe methods of analysis particular to Discursive Psychology, DA and Innovative Techniques • Evaluate each method of analysis in terms of its intended contribution to research

9&10	<p>Contemporary Issues in Qualitative Research</p> <ul style="list-style-type: none"> i) Evaluating quality and rigour ii) Mixed method research iii) Primary and Secondary Data iv) Computer Aided Analysis v) Translating research into practice 	<ul style="list-style-type: none"> • Recognise a range of contemporary issues in qualitative research • Evaluate if and how these issues will impact on research (own and others)
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Core Reading

Smith, J.A. (2008). *Qualitative Psychology. A Practical Guide to Research Methods*. London: Sage

Willig, C. (2008). *Introducing Qualitative Research in Psychology, (Second Edition)*. Berkshire, England: McGraw Hill

Advanced Reading

Yardley, L. (1997). *Material Discourses in Health and Illness*. London: Routledge

Smith, J.A., Flowers, P., & Larkin, M. (2009). *Interpretative Phenomenological Analysis*. London: Sage

Assessment

Coursework worth 30% and Exam worth 70%

3.3. ATYPICAL DEVELOPMENT (DR N STACK - EDUCATION)

Aims

This course aims to provide an analysis of the nature, origins, developmental course and provision for atypical development. It will examine the origins and identification of different forms of atypical development and investigate the psychological and social impact for children. It will critically evaluate theories and research related to the psychological development of children with physical disabilities, developmental psychopathologies and gifted development.

	Lecture Summary	Learning Objectives
1&2	Researching Atypical Development	Students will be able to: <ul style="list-style-type: none"> • identify the different methodological and ethical complexities associated with research into atypical development • evaluate the role of the environment and genetics in atypical development • critically reflect on issues related to identification of, and provision for, children demonstrating an atypical developmental trajectory
3&4	Disability and Developmental Disorders <ul style="list-style-type: none"> • Visual and Auditory Impairments • Developmental Coordination Disorders - Dyspraxia 	Students will be able to: <ul style="list-style-type: none"> • describe the nature of the disability/disorder, assessment, incidence, and causal factors. • summarise what is known about the effect of each disability on the development of motor skills, perception, cognition, communication, emotion and social skills. • critically evaluate the practical and theoretical implications of the experimental findings
5&6	Accelerated Development	Students will be able to: <ul style="list-style-type: none"> • assess the problems of definition and identification of gifted children, particularly gifted underachievers and those with double or multiple exceptionalities • critically evaluate different models of giftedness and talent • utilise the case study methodology for understanding gifted development
7&8	Attachment Disorders	Students will be able to: <ul style="list-style-type: none"> • review different approaches to defining and classifying attachment disorders • evaluate what is known about the etiology, epidemiology, differential

		diagnosis, course and prognosis of attachment disorders <ul style="list-style-type: none"> • describe issues salient to the assessment and treatment of attachment disorders
9&10	ADHD	Students will be able to: <ul style="list-style-type: none"> • provide an overview of ADHD, its history and current controversies • critically review contemporary research on the causes and treatments of ADHD

Reading

Below is a week by week list of recommended reading, this will be supplemented by directed readings of selected journal articles each week.

Week 1

Lewis, V., Kellett, M., Robinson, C., Fraser, S. and Ding, S. (2003) *The Reality of Research with Children and Young People* London: Sage

Greene, S. & Hogan, D. (2005) *Researching children's experience: Approaches and Methods* London: Sage

Week 2

Lewis, V. (2002) *Development and Disability*, (2nd Ed) Blackwell

Hulme, C. & Snowling, M.J. (2008) *Developmental Disorders of Language Learning and Cognition*, Wiley-Blackwell

Week 3

Freeman, J. (2010) *Gifted Lives: What happens when gifted children grow up?* London: Routledge

Gross, M. (2004) *Exceptionally gifted children* London: Routledge

Saunders, C.L. (2003) Case study: A gifted child at risk, *Journal of Secondary Gifted Education*, 14, 2, 100-106

Week 4

Hudson, J.L. & Rapee, R.M. (2005) *Psychopathology and the family* Oxford: Elsevier

Terry M. Levy, T.M. (2000) *Handbook of attachment interventions* San Diego: Academic Press, 2000.

Week 5

Timimi, S. & Leo, J. (2009) *Rethinking ADHD: from brain to culture*, Basingstoke: Palgrave Macmillan

Matson, J.L., Andrasik, F. & Matson, M.L. (2009) *Treating childhood psychopathology and developmental disabilities* New York: Springer

Matson, J.L., Andrasik, F. & Matson, M.L. (2009) *Assessing childhood psychopathology and developmental disabilities* New York, NY: Springer

Assessment - Case Study: (30%) Exam: (70%)

3.4. AUTISM SPECTRUM DISORDERS (DR D SIMMONS)

Aims:

To introduce students to the broad range of current research on autism spectrum disorders (ASDs).

Lecture Summaries:

- 1-2 Definition and diagnosis: Detailed examination of ICD-10 and DSM-IV definitions of autism and related conditions. Overview of diagnostic techniques and instruments (e.g. ADOS, ADI, DISCO).
- 3-4 Psychological Theories of ASD: Detailed critique of historically important Theory of Mind, Weak Coherence and Executive Dysfunction theories of ASD; Discussion of Extreme Male Brain theory and supporting evidence.
- 5-6 Neural Theories of ASD: Detailed critique of current neural theories of ASD (e.g. "Broken mirror" theory, Under- and over-connectivity; Neural noise). Evidence from neuro-imaging studies. (Frank Pollick)
- 7-8 The causes of ASD: Linking up of psychological and neural levels of explanation to evaluate potential causes, focusing on genetic and environmental factors.
- 9-10 The social importance of ASD: Implications of the broader phenotype; Evaluation of potential interventions and therapies; Ethical aspects. What studying ASD can tell us about typical development and social cognition.

By the end of the course students will:

1. be aware of the advantages and disadvantages of current definitions of ASD and diagnostic techniques.
2. be able to critically assess current psychological/cognitive theories of ASD.
3. be able to critically assess current neural theories of ASD.
4. have a detailed knowledge of potential causes of ASD.
5. have a detailed knowledge of the social and scientific importance of ASD.

References

Frith, U. (2003). *Autism: Explaining the Enigma* (2nd ed). WileyBlackwell.

Coleman M. (2005). *The neurology of autism*. OUP.

Bauman M.L. & Kemper, T.L. (2005). *The neurobiology of autism* (2nd revised edition). John Hopkins University Press

McGregor, E., Nunez, M., Cebula, K. & Carlos Gomez, J. (2008) *Autism: An integrated view from neurocognitive, clinical and intervention research*. Blackwell

Various up-to-date review and research articles (main focus)

3.5. BASICS OF JOINT ATTENTION (DR K KESSLER)

The aims of this module are threefold. Firstly students will learn how humans and non-human primates establish a “shared view of the world“ with their conspecifics. Secondly students will engage with recent findings in cognitive neuroscience research related to this topic and will learn how to critically evaluate different neuroimaging paradigms. Thirdly, students will improve their verbal presentation skills by presenting a research article to their peers.

	Lecture Summary	Learning Objectives
1 & 2	Introduction and article selection	Students will: <ul style="list-style-type: none"> select an article that they will present in one of the subsequent lectures
3 & 4	The “Social Perception Network“	Students will: <ul style="list-style-type: none"> become familiar with neurocognitive research on how humans perceive others
5 & 6	The “Mirror Neuron System“	Students will: <ul style="list-style-type: none"> understand which brain areas are thought to mirror action intentions of conspecifics and how this modulates overt behaviour
7 & 8	Processing of biological cues like gaze direction and body language	Students will be able to: <ul style="list-style-type: none"> To be able to critically reflect on the findings that relate to the (cortical) processing of rich and integrated biological cues
9 & 10	How humans and primates imagine the world from another viewpoint	Students will: <ul style="list-style-type: none"> understand and critically evaluate behavioural effects and findings on the neural implementation of perspective taking

References: Selected journal articles.

3.6. COGNITIVE NEUROSCIENCE OF AGEING (DR K KILBORN, DR L MUCKLI, DR G ROUSSELET)

Aims

This course provides an introduction to the field of cognitive ageing, with a particular emphasis on age-related neuronal changes. Examples from the literature will be discussed, showing how the structural and functional alterations of neuronal networks affect cognitive performance in healthy and pathological ageing.

	Lecture Summary	Learning Objectives
1	Introduction to cognitive ageing	Students will: <ul style="list-style-type: none"> be introduced to some typical research questions in the field of cognitive aging
2	Structural changes in the brain	Students will: <ul style="list-style-type: none"> be able to describe some of the main age-related neuronal structural changes
3	Functional brain imaging studies on age related changes in memory and other cognitive functions	Students will be able to: <ul style="list-style-type: none"> highlight examples of current research into age-related changes in brain function
4	Memory, encoding and retrieval	Students will be able to: <ul style="list-style-type: none"> discuss how neuronal inefficiency and behavioral compensation influences brain imaging results
5 - 7	Alzheimer, Dementia and Mild Cognitive Impairment (MCI) - clinical aspects of aging	Students will be able to: <ul style="list-style-type: none"> describe current theories regarding the etiology of age-associated neurodegenerative diseases
8 - 10	Ageing and processing speed	Students will be able to: <ul style="list-style-type: none"> compare different approaches to study age-related changes in visual processing speed describe the main EEG techniques used to study ageing and their limitations discuss the potential relationship between changes in processing speed and changes in neuronal structure

Outline

This course is concerned with the impact of ageing on cognition. As we age, our brains undergo structural and functional changes that impact our capacity to think, remember, and perceive our environment. Although a healthy diet and exercise may help reduce age-related decline in cognitive abilities, these changes are nevertheless inevitable and cover a large spectrum from healthy ageing to extreme cases like Alzheimer disease. Ageing has very specific consequences at the neuronal level, affecting the structure of individual neurons, the way they interact with each other within cortical areas, and at a broader scale, between cortical areas, affecting the dynamic of the entire brain. These neuronal changes have consequences on sensory processes, long-term memory, and executive functions such as attention, short-term memory and decision-making. A key challenge is to identify the neuronal structures and networks that explain age-related changes in a particular task. Several theories might explain how ageing affects cognition, for instance a general slowing of

neuronal processes, functional reorganization with potential compensation strategies, and loss in major communication pathways.

References

- Grady, C. L. (2008). Cognitive neuroscience of aging. *Ann N Y Acad Sci*, 1124, 127-144.
- Bennett, P. J., Sekuler, A. B., McIntosh, A. R., & Della-Maggiore, V. (2001). The effects of aging on visual memory: evidence for functional reorganization of cortical networks. *Acta Psychol (Amst)*, 107(1-3), 249-273.
- Betts, L. R., Taylor, C. P., Sekuler, A. B., & Bennett, P. J. (2005). Aging reduces center-surround antagonism in visual motion processing. *Neuron*, 45(3), 361-366.
- Wang, Y., Zhou, Y., Ma, Y., & Leventhal, A. G. (2005). Degradation of signal timing in cortical areas V1 and V2 of senescent monkeys. *Cereb Cortex*, 15(4), 403-408.
- Rousselet, G.A., Husk, J.S., Pernet, C.R., Gaspar, C.M., Bennett, P.J., & Sekuler, A.B. Age-related delay in information accrual for faces: Evidence from a parametric, single-trial EEG approach. *BMC Neuroscience* 10:114, <http://www.biomedcentral.com/1471-2202/10/114/>
- Duan, H., Wearne, S. L., Rocher, A. B., Macedo, A., Morrison, J. H., & Hof, P. R. (2003). Age-related dendritic and spine changes in corticocortically projecting neurons in macaque monkeys. *Cereb Cortex*, 13(9), 950-961.
- D'Esposito, M., Deouell, L. Y., & Gazzaley, A. (2003). Alterations in the BOLD fMRI signal with ageing and disease: a challenge for neuroimaging. *Nat Rev Neurosci*, 4(11), 863-872.
- Craik, F. I., & Bialystok, E. (2006). Cognition through the lifespan: mechanisms of change. *Trends Cogn Sci*, 10(3), 131-138.

3.7. COGNITIVE NEUROSCIENCE: INSIGHTS INTO BRAIN PLASTICITY (DR G THUT)

Aims

This course introduces some of the paradoxical (sometimes productive) neuro-psychological phenomena that have been uncovered by lesions of the central or peripheral nervous system, or by non-invasive (transcranial) brain stimulation. These paradoxical consequences of brain lesions or brain stimulation contrast with the more common functional deficits, and include hyper-attention, an anarchic hand, the experience of leaving one's own body or the integration of phantom limbs into ones own body scheme (to name a few). Each lecture begins with case descriptions of patients with such extraordinary (productive) "deficits" and uses these observations as windows to introduce current concepts in cognitive neuroscience. The lectures explore how these phenomena fit or informed models of cognitive processes in different domains (e.g. attention, motor control, interhemispheric interactions, multisensory integration), and of macroscopic brain organization. These extraordinary observations testify to the brain's complexity and plasticity, which forms the capacity of the brain to reorganize, at the risk of maladaptive changes. This has important implications for neurorehabilitation which will be discussed.

	Lecture Summary	Learning Objectives
1	Introduction to techniques and terminology	Students will be able to: <ul style="list-style-type: none"> explain the principles of non-invasive brain stimulation and uses in cognitive neuroscience and rehabilitation relate them with neuropsychological (lesion studies) and neuroimaging approaches (fMRI) detail the terms needed to understand the literature
2	Blindsight in the cortical blind: - evidence for a multitude of processing streams operating in parallel	Students will be able to: <ul style="list-style-type: none"> describe what blindsight is, when it occurs, and how it can be induced in the sighted explain if and how visual sensations can be experimentally evoked in the blind illustrate and critically assess (via key findings) models of phenomenal (conscious) perception
3	'The man who mistook his wife for a hat' in visual agnosias:	Students will be able to: <ul style="list-style-type: none"> explain models of how object categories are represented in the brain evaluate arguments for and against modular versus distributed representations
4	Hyperattention in hemispatial neglect: - evidence for hemispheric rivalry	Students will be able to: <ul style="list-style-type: none"> describe the productive symptoms (and associated functional loss) in neglect relate the productive symptoms (and losses) to models of neglect and mechanisms of visual attention in the intact brain contrast these symptoms with sensory loss

5	Synesthesia in the healthy population: - evidence for multidirectional crosstalk between areas	Students will be able to: <ul style="list-style-type: none"> • describe forms of synesthesia and their prevalence • detail experimental approaches to assess synesthesia • explain current models (neuroanatomical and acquired)
6	Phantom limb and other functional reorganizations after peripheral injury: - evidence for unmasking of existing connections, formation of new connections and hetero (omni) potentiality of structure	Students will be able to: <ul style="list-style-type: none"> • describe the time-course and extent of functional reorganization after sensory loss/deprivation (e.g. amputation, loss of sight) • relate the above to plastic changes after learning
7	Out-of-body experience during brain stimulation: - evidence for complex interactions within the brain being in a state of dynamic equilibrium with themselves and the environment	Students will be able to: <ul style="list-style-type: none"> • describe out-of-body experiences and associated phenomena • explain models of bodily sensations, body image/scheme and ownership. • discuss approaches of experimentally inducing misperceptions of the body or body parts
8	The alien (anarchic) hand and other signs of hemispheric disconnections: - evidence for local disruption & remote release of function	Students will be able to: <ul style="list-style-type: none"> • describe the alien hand syndrome and other examples of hemispheric disconnection • explain the alien hand with reference to the dual premotor theory • evaluate the above observations in relation to hemispheric specialization, the potential of the brain to reorganize, and of rehabilitation
9	Brain plasticity and rehabilitation techniques: (with an emphasize on rehabilitation in hemispatial neglect)	Students will be able to: <ul style="list-style-type: none"> • list some of the classical approaches in neuro-rehabilitation and evaluate their success • describe modern interventions in neuro-rehabilitation (e.g. non-invasive brain stimulation) • explain their respective rationales based on current knowledge on brain plasticity

10	Summary and Synopsis	<p>Students will be able to:</p> <ul style="list-style-type: none"> • cross-link syndromes 2-8 and key findings/approaches on their biological basis • deduce mechanisms of brain plasticity from each example of paradoxical (productive) signs and associated research (lectures 2-8) • evaluate the implications of the above on models of brain organization across different cognitive domains (vision, attention, multisensory integration, motor control) • evaluate the implications of the above on neuro-rehabilitation
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References:

Individual references in form of journal articles will be given at the beginning of the course.

3.8. CONCEPTS AND EMPIRICAL RESULTS IN EDUCATION (DR S DRAPER)

Aims:

This course introduces some of the biggest published effects in teaching methods in higher education, such as Mazur who increased the amount learned on his level 1 course by a factor of nearly 3 times. It then introduces several important educational concepts from the literature applying to HE: Laurillard's model, deep and shallow learning, Perry's model. It requires students to apply these to specific course designs, and use them to critique those designs; but equally, to critique the theories by identifying concerns and issues not covered by the theories.

	Lecture Summary	Learning Objectives
1	Introduction The nature of learning in Higher Education (HE). Learning as a problem-solving activity, a social activity, a social transaction.	Students will: <ul style="list-style-type: none"> be able to discuss the extent to which learning in HE is: <ul style="list-style-type: none"> * a basic mental function * a problem-solving activity * a social transaction
2 & 3	Big empirical results. Mazur's doubling (actually, nearly tripling) of learning gains on his course when he established a new teaching method; Hake's study, Teacher effects and others.	Students will: <ul style="list-style-type: none"> be able to briefly describe and critically comment on some of the biggest educational effects reported; and some of the notable absences of evidence
4 & 5	Perry's model. Deep and Shallow learning.	Students will be able to: <ul style="list-style-type: none"> describe Perry's stage model, and the concept of deep and shallow learning discuss their problems and limitations
6 - 8	Laurillard's model. Peer interaction and catalytic assessment.	Students will be able to: <ul style="list-style-type: none"> describe and illustrate with examples Laurillard's 12 activity model critique Laurillard's 12 activity model discuss the theory behind the effectiveness of peer discussion for learning
9 - 10	Review. The course will be reviewed, discussing the large effects introduced near the start in relation to the theories introduced, and whether large effects are necessarily what is important for theories.	Students will be able to: <ul style="list-style-type: none"> discuss the extent to which any of the theories is complete, the challenges offered by the various other issues covered, and the prospects for an eventual complete, unified theory of learning and teaching in HE

References:

Crouch, C.H. and Mazur, E. (2001), "Peer Instruction: Ten years of experience and results" American Journal of Physics vol.69 no.9 pp.970-977

Top of Form

Bottom of Form

Draper, S.W. (2009a) "Catalytic assessment: understanding how MCQs and EVS can foster deep learning" British Journal of Educational Technology vol.40 no.2 pp.285-293

Draper, S.W. (2009b) "What are learners actually regulating when given feedback?" British Journal of Educational Technology vol.40 no.2 pp.306-315

- Hake,R.R. (1998) "Interactive-engagement versus traditional methods: A six-thousand-student survey of mechanics test data for introductory physics courses" Am.J.Physics vol.66 no.1 pp.64-74
- Howe, C.J., Tolmie, A., and Rogers,C. (1992) "The acquisition of conceptual knowledge in science by primary school children: Group interacting and the understanding of motion down an incline" British Journal of Developmental Psychology vol.10 pp.113-130
- Laurillard, D. (1993, 2002) Rethinking university teaching: A framework for the effective use of educational technology (Routledge: London).
- Marton,F., D.Hounsell & N.Entwistle (1984) (eds.) The experience of learning (Edinburgh: Scottish academic press)
- Perry, W.G. (1968/70) Forms of intellectual and ethical development in the college years (New York: Holt, Rhinehart and Winston)

3.9. CONSCIOUSNESS

This option is run in the School of Humanities, a separate course handbook for this option can be found on the psychology portal and will also be made available to you when you register. You must contact Dr Susan Stuart (Susan.Stuart@glasgow.ac.uk) to confirm your place on this option.

Please note: This option is worth 20 credits, therefore if you chose this option you need only pick **SEVEN** other options to make up your 90 credits.

3.10. fMRI (DR L MUCKLI)

Basics of functional magnetic resonance imaging (fMRI) in Biopsychology.

Aims:

Functional brain imaging has become an essential tool in Biopsychology and Neuroscience that has changed the way we think about the brain today. This course aims to give an in-depth introduction to the basics of functional magnetic resonance imaging (fMRI). The course will cover physical and physiological basics of the fMRI-signal, experimental strategies, and analysis principles.

	Lecture Summary	Learning Objectives
1 - 2	Introduction to functional magnetic resonance imaging (fMRI) History of brain imaging and highlights of today's brain imaging research	Students will be able: <ul style="list-style-type: none"> to highlight conceptual, technical, and methodological precursors of fMRI research to highlight exemplary fMRI studies to discuss experimental design characteristics
3	Physical basics of Magnetic Resonance Imaging (MRI)	Students will be able to <ul style="list-style-type: none"> explain the meaning of the standard MR parameters mentioned in most fMRI studies (i.e. TR, TE, etc)
4	Safety and technical issues	Students will be able to <ul style="list-style-type: none"> name safety concerns of fMRI name the most important components needed for fMRI experiments
5 - 6	Physiological basis of the BOLD signal Different ways to measure brain activity	Students will be able to: <ul style="list-style-type: none"> explain how oxygenated and deoxygenated blood influence the fMRI signal contrast views of how fMRI-signal is presumably linked to neuronal activity explain the temporal dynamics of the fMRI signal
7 - 8	Experimental approaches to modern brain imaging	Students will be able <ul style="list-style-type: none"> to explain some advantages and disadvantages of common experimental designs (block design, event-related, fMRI-adaptation) to explain common analysis strategies (ROI-analysis, whole brain, multivariate, searchlight, retinotopic mapping)
9 - 10	Hands-on statistical analysis of fMRI data	Students will be able <ul style="list-style-type: none"> to use the software BrainTutor to become familiar with the anatomical landmarks of the human cortex to describe the first basic steps of brain imaging analysis

3.11. FORENSIC (DR I BUSHNELL & DR M MARTIN)

	Lecture Summary	Learning Objectives
1 & 2	A brief introduction will be followed by the history of profiling. Differences between the various types, in particular the UK vs US approach will be discussed.	Students will <ul style="list-style-type: none"> • be familiar with the history of profiling • understand the different definitions and approaches • be aware of the use of profiling in various types of crime
3 & 4	Geographical profiling and both qualitative and quantitative aspects will be examined. Techniques such as RIGEL, DRAGNET and CRIMESTAT will be discussed. Offender profiling in UK – Statistical, and US – Behavioural will be compared.	Students will: <ul style="list-style-type: none"> • understand the techniques and systems used in Geographical Profiling • have an understanding of differences between the US and UK approach
5	A critical evaluation of profiling will also include a specific case study.	Students will: <ul style="list-style-type: none"> • be able to evaluate the various techniques and approaches

This section of the module provides an overview of certain important aspects of forensic psychology research and theory and considers their implications for practical application.

	Lecture Summary	Learning Objectives
6 & 7	Lying – understanding the process and various theories and methods of detection.	Students will: <ul style="list-style-type: none"> • be able to demonstrate an understanding of: Ekman's theory Polygraphy methodology and research Statement validity analysis
8	Confessions – why do people confess and what factors lead to false confessions	Students will be able to demonstrate an understanding of: <ul style="list-style-type: none"> • why people confess • theories of why people falsely confess to crimes
9&10	Obtaining accurate information from witnesses	Students will be able to demonstrate an understanding of: <ul style="list-style-type: none"> • the principles of good and bad investigative interviewing approaches • cognitive interviews, their principles and practice

Background text

Howitt, D. (2006). Forensic and criminal psychology. Harlow: Pearson.

3.12. INTERACTION AND COMMUNICATION (PROF S GARROD)

Aims

The course will explore recent research on linguistic communication and interaction. It will consider both one-way communication and two-way communication. It will also explore non-linguistic forms of communication, such as graphical communication and communication with manual gestures. The course will provide a thorough foundation enabling the student to understand specific processes of human communication.

	Lecture Summary	Learning Objectives
1 & 2	These lectures will introduce the student to theories of human communication and how they relate to both interactive and non-interactive communication as well as linguistic and non-linguistic communication	Students will be able to: <ul style="list-style-type: none"> • understand the difference between one-way and two-way communication processes • contrast information transfer and interactive alignment as alternative bases for human communication
3 & 4	These lectures will concentrate on interactive communication and the importance of joint action as a basis of interactive communication.	Students will be able to: <ul style="list-style-type: none"> • appreciate the role of joint action in two-way communication processes • understand how joint action affects language processing
5 & 6	These lectures will review evidence for interactive alignment in communication and consider some of the implications of the interactive alignment account.	Students will be able to: <ul style="list-style-type: none"> • understand some of the basic mechanisms of interactive alignment during linguistic communication.
7	This lecture will discuss how models of human communication can be applied to group decision-making with implications for the effect of group size on decision-making processes.	Students will be able to: <ul style="list-style-type: none"> • understand the relation between communication and group decision-making.
8	This lecture will discuss aspects of non-linguistic communication and introduce Peircqe's theory of signs.	Students will be able to: <ul style="list-style-type: none"> • understand the basic theory of signs and how it relates to both linguistic and non-linguistic communication.
9 & 10	These lectures will review the literature on interactive graphical communication and show how it may tell us various things about the evolution of human communication.	Students will be able to: <ul style="list-style-type: none"> • understand the relationship between different forms of communication. • appreciate some basic properties of the evolution of human communication systems.

Reading:

Background: Clark, H.H. (1996) Using Language. Cambridge, Cambridge University Press.
Advanced: Specific papers will be made available during the course.

3.13. LANGUAGE AND MEANING (DR J BOHAN & DR L MOXEY)

The aim of this course is to develop students understanding of language processing and theories of meaning. Different methodological techniques will be explained and we will consider the different empirical questions these techniques afford. The neurophysiology of language will be discussed and we will consider current explanations of language related components, e.g. N400 and P600. We will also discuss our understanding of shallow processing, pragmatics and framing effects in language comprehension.

	Lecture Summary	Learning Objectives
1 & 2	In this introductory lecture we will talk about meaning at different levels of language processing, from word meaning to sentences to larger pieces of text. We will introduce various semantic theories, and discuss how semantic processes might be related to other language understanding processes such as syntax.	Students will be able to: <ul style="list-style-type: none"> explain different theories of meaning and discuss their advantages and disadvantages explain how different levels of semantic analysis are related to one another
3 & 4	Methodology and meaning. How have different methodological techniques contributed to our understanding of language comprehension? These techniques include sentence continuation, reading time, eye tracking and ERP measurements will be reviewed. ERP components relevant to syntactic and semantic processes will be explained.	Students will be able to: <ul style="list-style-type: none"> explain different methodological techniques in language research understand the main language related ERP components, e.g. N400 and P600
5 & 6	ERPs and semantic and syntactic violations. This lecture will explore whether P600 and N400 reflect separable brain processes. Hard-to-detect semantic anomalies challenge this view. Beyond EEGs: new techniques for extracting information from EEG recordings, and time frequency analysis will be considered.	Students will be able to: <ul style="list-style-type: none"> identify ERP correlates of semantic and syntactic violations and explain the significance of these in terms of language processing understand and explain the nature of time frequency analysis and what this might show
7 & 8	What is shallow processing? Language processing is not always complete. Evidence will be presented from both experiments and language corpus' to illustrate this and we will consider the relevance of this to language processing and understanding.	Students will be able to: <ul style="list-style-type: none"> understand the issues involved in shallow processing and explain the experimental evidence illustrating this.

9 & 10	Framing effects and the line between semantics and pragmatics. While much of our language processing involves establishing facts from the information conveyed, linguistic expressions and structures can also convey information about perspective.	Students will be able to: <ul style="list-style-type: none"> • explain the difference between semantic and pragmatic processes with reference to current research .
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References:

- Baker, L., & Wagner, J., L. (1987). Evaluating information for truthfulness: The effects of logical subordination. *Memory and Cognition*, 15, 247-255.
- Barton, S., & Sanford, A.J. (1993). A case study of anomaly detection: Shallow semantic processing and cohesion establishment. *Memory and Cognition*, 21, 477-487.
- Bohan & Sanford (2008). Semantic anomalies at the borderline of consciousness: An eye-tracking investigation. *The Quarterly Journal of Experimental Psychology*. 61 (2), pp 232–239.
- Bornkessel-Schlesewsky, I., Schlewsky, M. (2008). An alternative perspective on “semantic P600” effects in language comprehension. *Brain Research Reviews*, 59, pp 55-73
- Brédart, S., & Modolo, K. (1988). Moses strikes again: Focalisation effect on a semantic illusion. *Acta Psychologica: International Journal of Psychonomics*, 67, 135-144.
- Erickson, T.D., & Mattson, M.E. (1981) From Words to Meaning: A Semantic Illusion. *Journal of Verbal Learning and Behaviour*, 20, 540-551.
- Ferreira, F. (2003). The misinterpretation of noncanonical sentences. *Cognitive Psychology*, 47, 164-203.

3.14. LEADERSHIP (DR I BUSHNELL)

Aims

These lectures explore aspects of research and theory in the area of Leadership with an emphasis on how research can be applied.

	Lecture Summary	Learning Objectives
1 & 2	<p>Leadership - Power and its relationship to leadership</p> <p>Motivating people and leading teams or organisations requires qualities that are either inbuilt or acquired. How have psychologists contributed to an understanding of leadership? Defining leadership and exploring the development of leadership theory. Leaders or leadership? Distinguishing Management from Leadership.</p>	<p>Students will have a credible view about:</p> <ul style="list-style-type: none"> • what leadership is and how it is different from management. • why after thousands of years of interest and very many years of systematic research, we do not appear to be close to really understanding why some people succeed as a leader and others do not? • Whether or not leadership is inborn or can be developed in individuals.
3 - 8	<p>Theoretical approaches to understanding leadership – providing an historical perspective of a variety of theories.</p> <p>Process-focused theories – Michigan and Ohio studies; X-Y-Z theories; Path-Goal; Contingency; New Leadership (Charismatic, Transactional, Transformational)</p> <p>Context theories – Continuum of Leadership Behaviour; Situational Leadership</p>	<p>Students will be able to answer questions about:</p> <ul style="list-style-type: none"> • How people's views of leadership have altered across time and what the main kinds of leadership theories are, along with their strengths and limitations. • What evidence there is that there are specific traits that are universally found in good leaders. • How theories of abnormal personality such as psychopathy may be relevant to leadership. • What is meant by New Leadership approaches and how these theories have been developed and applied to real world situations. • How the situation or context can alter the effectiveness of particular leadership styles.
9 & 10	<p>Leadership and Culture – Global differences in culture and the implications for leadership theory and practice; Onion models; Hofstede; the GLOBE project.</p>	<p>Students will be able to answer questions about:</p> <ul style="list-style-type: none"> • How culture can be measured and categorised and how these categorisations might impact upon leadership. • How different cultures consider leadership and whether effectiveness as a leader can ever be pancultural.

References will be provided in class.

3.15. NETWORKS OF ATTENTION AND WORKING MEMORY (DR K KESSLER)

The aims of this module are threefold. Firstly students will learn how processes of attention and working memory are implemented in the human brain. Secondly students will engage with recent research articles in cognitive neuroscience related to this topic and will learn how to critically evaluate different neuroimaging paradigms. Thirdly, students will improve their verbal presentation skills by presenting a research article to their peers.

	Lecture Summary	Learning Objectives
1 & 2	Introduction to neuroimaging methods and article selection	Students will: <ul style="list-style-type: none"> • become familiar with neuroimaging methods like TMS, MEG/EEG, fMR • select an article that they will present in one of the subsequent lectures
3 & 4	Attention I: The Attentional Blink (AB). Behaviour and evoked response potentials (ERPs).	Students will: <ul style="list-style-type: none"> • understand the AB effect, the cognitive processes, and the evoked brain responses assumed to be involved.
5 & 6	Attention II: Brain networks and the global workspace model of the AB.	Students will: <ul style="list-style-type: none"> • understand which brain areas are thought to subserve attentional processing and what the functional connectivity within these networks could be.
7 & 8	Working Memory I: Segregation into modalities vs. processes and binding mechanisms in the brain.	Students will: <ul style="list-style-type: none"> • be able to critically reflect on the segregation within and the connectivity between brain areas subserving working memory, by taking neurocognitive findings and computational models into account
9 & 10	Working Memory II: Physiologically inspired models of structures and processes.	Students will: <ul style="list-style-type: none"> • understand and critically evaluate physiologically inspired models for the interplay between brain areas and between brain oscillations

References: Selected journal articles

3.16. NEUROPSYCHOLOGICAL DEFICITS (DR M HARVEY)

Aims

The aim of this course is to introduce students to some major neuropsychological disorders and to outline how an understanding of these deficits can inform our understanding of brain function and enlighten cognitive neuroscience. Impairments of higher visual functions such as agnosia, optic ataxia and hemispatial neglect shall be presented in detail and their relevance to models of brain function outlined. Students will also become familiar with cognitive neuropsychological tests.

Course content

The course will start with an outline of the major models of brain function, introducing the idea of parallel processing. These models will then be critically evaluated by the students and subsequently students will be introduced to several impairments of higher visual functions (i.e. agnosia, hemispatial neglect, blindsight). Importantly, the emphasis of the course will be on just how these neuropsychological deficits can inform our understanding of brain processes in the healthy brain and thus inform cognitive neuroscience. Finally students will be encouraged to present some topical research papers furthering the content and theoretical concepts of the previously discussed topics.

	Lecture Summary	Learning Objectives
1 & 2	Vision for Perception and Action.	Students will be able to: <ul style="list-style-type: none"> • understand prominent models of brain function • critically evaluate the strengths and weaknesses of such models
3 & 4	Blindsight Balint's Syndrome	Students will be able to: <ul style="list-style-type: none"> • evaluate evidence for and against blindsight, optic ataxia • critically assess the different models/level of explanation of the phenomena
5 & 6	Visual Agnosia.	Students will be able to: <ul style="list-style-type: none"> • discuss the symptoms in relation to brain function • reflect critically on the models of vision presented and discuss alternatives
7 & 8	Hemispatial neglect	Students will: <ul style="list-style-type: none"> • be able to describe the disorder and the changing interpretations over time • be encouraged to evaluate the different interpretations of the syndrome
9 & 10	Student Evaluation	Students will be able to: <ul style="list-style-type: none"> • give presentations based on the previous modules • critically discuss findings

References:

- Milner, AD and Goodale, MA (2006). *The Visual Brain in Action*. Oxford University Press.
- Pisella, L., Binkofski, F., Lasek, K., Tonid, I., Rossetti, Y. (2006) No double-dissociation between optic ataxia and visual agnosia: Multiple sub-streams for multiple visuo-manual integrations. *Neuropsychologia*, 44, 2734-2748
- Luauté J, Halligan P, Rode G., Rossetti Y. & Boisson D (2006). Visuo-spatial neglect: a systematic review of current intervention and their effectiveness. *Neuroscience and Biobehavioral Reviews* 30, 961-982.

Harvey, M and Milner, AD (1995). Balint's patient. *Cognitive Neuropsychology*, 12, 261-281.

3.17. POSITIVE PSYCHOLOGY (DR S DRAPER)

Aims:

To introduce the field of positive psychology. To focus on the cases where practical exercises for individuals have been shown empirically to increase well-being. To develop critical thinking by addressing the nexus of self-help and empirical psychological science.

Overall outline:

This course introduces the relatively new field of positive psychology. It will focus on the cases where practical exercises for individuals have been shown empirically to increase well-being, and develop critical thinking by addressing the nexus of self-help and empirical psychological science. In fact many of the practical interventions are susceptible to more interpretations than the one given by their originators, and conversely, some themes reappear in different ways. For instance, there is work showing that writing about traumatic events can improve well-being; that writing about positive events can do so; and perhaps that just reflective writing is what improves well-being. Topics will include gratitude, both counting your blessings, and writing gratitude letters to others; exercises to counteract our tendency to leap from an event to a single (often the worst case) interpretation and prediction of its effects: both actively counter-reasoning, and accepting feelings without taking them as valid inferences about the world; the way happiness depends not only on pleasure but also on meaningfulness; and the way it depends on time affluence not material riches.

	Lecture Summary	Learning Objectives
1 & 2	Introduction: what is positive psychology. Does bad outweigh good? Happiness lies at the intersection between pleasure and meaning.	For each topic (Learned optimism, gratitude, flow, mindfulness, etc.), students will be able to: <ul style="list-style-type: none"> discuss each specific exercise critically with respect to the evidence of its efficacy, and alternative accounts of why it may be effective discuss each underlying theme that reappears under different guises: e.g. instant catastrophic reasoning, reflective writing, whether bad outweighs good
3 & 4	Learned optimism. Happiness is strongly dependent on our state of mind, not on external factors.	
5 & 6	Gratitude. Counting your blessings.	
7 & 8	Flow (Csikszentmihályi)	
9 & 10	Mindfulness (meditation)	

References:

Baumeister, R.F., Bratslavsky, E., Finkenauer, C., & Vohs, K.D. (2001) "Bad is stronger than good" *Review of General Psychology*, 5, 323-370

Bower, J.E., Low, C.A., Moskowitz, J.T., Sepah, S. & Epel, E. (2008) "Benefit Finding and Physical Health: Positive Psychological Changes and Enhanced Allostasis" *Social and Personality Psychology Compass* vol.2 no.1 pp.223–244,

- Emmons,R.A. & McCullough,M.E. 2003. "Counting Blessings Versus Burdens: An Experimental Investigation of Gratitude and Subjective Well-Being in Daily Life" *Journal of Personality and Social Psychology* Vol. 84, No. 2, pp.377–389
- Lyubomirsky, S., Sheldon, K.M., & Schkade, D. (2005) Pursuing happiness: the architecture of sustainable change. *review of general psychology*, vol.9 no.2 pp.111-131
- Schwartz, B. et al (2002) Maximising versus Satisficing: happiness is a matter of choice. *journal of Personality and Social Psychology* , Vol. 83, No. 5, 1178 –1197
- Smith WP, Compton WC, West WB. (1995) "Meditation as an adjunct to a happiness enhancement program" *J Clin Psychol.* vol.51 no.2 pp.269-73

3.18. PSYCHOLOGICAL INTERVENTIONS (DR M MARTIN & PROF P O'DONNELL)

Aims

To introduce students to psychological interventions in the treatment of a range of disorders

To evaluate the effectiveness of art therapy in psychological treatment

To assess evidence on psychodynamic approaches in treatment especially in the case of personality disorders

To explain and evaluate the effectiveness of non directive approaches in therapy

	Lecture Summary	Learning Objectives
1 & 2	Aspects of Art Therapy, describing its origins in psychodynamic theory. There will be a screening of paintings to exemplify the approach. The claims made will be critically examined with reference to empirical work on the supposed diagnostic and psychometric properties of paintings and drawings of specific groups. Current theoretical positions will be considered - humanistic and cognitive behavioural approaches. Evidence on the effectiveness of art therapy will be reviewed.	Students will be able to: <ul style="list-style-type: none"> • appreciate the origins of art therapy and the beliefs associated with the earliest models; and critically assess the evidence for or against these claims • understand the difficulties in evaluations of art therapy and review the evaluative studies that have been carried out.
3	Presentation by Robert Elliott, who is Professor of Counselling at the Counselling Unit at Strathclyde University. He will speak about his clinical work in the light of the Process-Experiential approach. His lecture will NOT form part of the exam.	Students will be able to: <ul style="list-style-type: none"> • appreciate the origins of art therapy and the beliefs associated with the earliest models; and critically assess the evidence for or against these claims • understand the difficulties in evaluations of art therapy and review the evaluative studies that have been carried out
4	Psychodynamic covers classical analysis, Brief Psychodynamic Therapy, Interpersonal Therapy, and Hobson's version conversational therapy (PI). We examine the briefer interventions, describe how they operate in practice, contrast their method with that of classical psychoanalysis and review evidence for their effectiveness across a range of mental disorders.	Students will be able to: <ul style="list-style-type: none"> • describe the historical development of Psychoanalytic treatment methods • outline the various current version of short term psychodynamic therapy • critically evaluate the evidence for their effectiveness sin treating mental disorders

5	<p>Personality disorders are characterized by pervasive and inflexible patterns of inner experience and outward behaviour that significantly affect a person's ability to function in every-day activities. A person's work, family, and social life can all be affected by the symptoms. This section focuses on specifically borderline personality disorder (BPD) and its features both biological and psychological</p>	<p>Students will be able to:</p> <ul style="list-style-type: none"> • describe the main types of personality disorders • describe in detail borderline personality disorder • summarise the biological and psychological aspects of BPD
6	<p>BPD was though to be a difficult disorder to treat with a pessimistic outcome. However modern treatments have begun to show some success. The most supported is Linehan's Dialectical behaviour therapy. However hospital based psychoanalytic therapy is also promising. The nature of these treatments and the evidence supporting their effectiveness are examined critically.</p>	<p>Students will be able to:</p> <ul style="list-style-type: none"> • describe dialectical behaviour therapy as applied to BPD • describe hospital based psychoanalytic therapy as applied to BPD • evaluate the evidence for both these treatments as effective in BPD
7 & 8	<p>Rogerian theory is phenomenological. It accepts the primacy of the individual's subjectivity, argues that the Self has structure process and growth, and strives to self actualise. The purpose of therapy is to encourage the process of self actualisation and self differentiation. The therapist proceeds by a process of offering the following: unconditional positive regard, congruence, genuineness, and honesty with the client. This involves empathy -- the ability to feel what the client feels, respect and acceptance, and crucially unconditional positive regard towards the client. To a degree this perspective is supported by research Rogers has concentrated research on process beginning with empathy, positive regard and congruence. A key legacy is the fact that he has cast light on the therapeutic</p>	<p>Students will be able to</p> <ul style="list-style-type: none"> • outline the basic features of Rogers career • describe Rogers basis theory on the self and on the nature of psychological problems which lead people to seek therapy • outline Rogers theory of Psychotherapy and this views on the therapeutic relationship • trace Rogers influences on modern Psychotherapy and counselling

	alliance. He has introduced broader existential and humanistic issues into therapy	
9 & 10	This section of the module focuses on personality disorder and in particular the DSPD programme and the new Mental health Act (England and Wales). It aims to briefly outline some personality disorders, especially those associated with dangerousness, discuss the concept of dangerousness, and explain legislation leading to the DSPD programme.	Students will <ul style="list-style-type: none"> • be familiar with the personality disorders • understand the concept of dangerousness • be aware of the legislation leading to the DSPD programme • understand factors involved in violent behaviour • have a critical understanding of preventative detention • be familiar with the treatments used in the DSPD programme

References for Art Therapy lectures.

- C.A. Malchiodi (Ed.) Handbook of Art Therapy. Guilford Press, 2002.
- D. Waller, & a. Gilroy (Eds.) Art Therapy. A Handbook. Buckingham: Open University Press, 2nd edition, 2007.
- Mottram, P. Towards developing a methodology to evaluate outcomes of art therapy in adult mental illness. Presentation to TAOAT (Theoretical Advances of Art Therapy) Oct. 2000. <http://www.baat.org/taoat/mottram2.html>
- Reynolds, M.W., Nabors, L. & Quinlan, A. The effectiveness of art therapy: does it work? Art Therapy, 2000, vol.17 (3), 207-213.

Reference for Prof. Elliott:

Elliott, R, Watson, J C, Goldman, R N & Greenberg, L S. Learning Emotion-focused Therapy. The process-experiential approach to change. American Psychological Association, 2004.

References for Lecture 4

- Falk Leichsenring, . and Eric Leibing . (2003). The Effectiveness of Psychodynamic Therapy and Cognitive Behavior Therapy in the Treatment of Personality Disorders: A Meta-Analysis. *Am J Psychiatry* 160:1223-1232.
- Leichsenring F, Rabung S, Leibing E. . (2004). Review: short term psychotherapy is an effective treatment for psychiatric disorders . The efficacy of short-term psychodynamic psychotherapy in specific psychiatric disorders: a meta-analysis. *Arch Gen Psychiatry*;61:1208–16.
- Marc J. Diener, Mark J. Hilsenroth, and Joel Weinberger. (2007). Therapist Affect Focus and Patient Outcomes in Psychodynamic Psychotherapy: A Meta-Analysis. *Am J Psychiatry* 164:936-941

References for lectures 5 & 6.

- Louisa M.C. van den Bosch, Maarten W.J. Koeter, Theo Stijnen, Roel Verheul, Wim van den Brink. (2005). Sustained efficacy of dialectical behaviour therapy for borderline personality disorder. *Behaviour Research and Therapy, Volume 43, Issue 9, Pages 1231-1241.*
- Joaquim Soler, Juan Carlos Pascual, Thaïs Tiana, Anabel Cebrià, Judith Barrachina, M. Josefa Campins, Ignasi Gich, Enrique Alvarez, Víctor Pérez. (2009). Dialectical behaviour therapy skills training compared to standard group therapy in borderline personality disorder: A 3-month randomised controlled clinical trial. *Behaviour Research and Therapy, Volume 47, Issue 5, Pages 353-358.*
- Melanie S. Harned, Alexander L. Chapman, Elizabeth T. Dexter-Mazza, Angela Murray, Katherine A. Comtois, Marsha M. Linehan. (2008). Treating Co-Occurring Axis I

Disorders in Recurrently Suicidal Women With Borderline Personality Disorder: A 2-Year Randomized Trial of Dialectical Behavior Therapy Versus Community Treatment by Experts. *Journal of Consulting and Clinical Psychology*, Volume 76, Issue 6, Pages 1068-1075.

Peter Fonagy, Anthony Roth, Anna Higgitt (2005). The outcome of psychodynamic psychotherapy for psychological disorders. *Clinical Neuroscience Research*, Volume 4, Issues 5-6, Pages 367-377

References for lectures 7 & 8

Kolden, Gregory G.; Chisholm-Stockard, Sarah M. Strauman, Timothy J.; Tierney, Sandy C.; Mullen, Elizabeth A.; Schneider, Kristin L. (2006). Universal Session-Level Change Processes in an Early Session of Psychotherapy: Path Models. *Journal of Consulting & Clinical Psychology*. 74(2):327-336.

Bower, P, Rowland, N, Hardy, R. (2003). The clinical effectiveness of counselling in primary care: a systematic review and meta-analysis. *Psychological Medicine*. 33(2):203-215.

3.19. PSYCHOLOGY OF ABNORMALITY (DR G MAYES & DR L MORROW)

Aims

The course will examine and evaluate different approaches to understanding and treating common psychological disorders. The main models considered will be medical and cognitive-behavioural ones. The history of these will be considered along with the current forms of such models. The application of these models to treatments will be described and the effectiveness of the treatments assessed.

Lecture hours 1-4.

The first four hours on medical models will be aimed at evaluating the usefulness of this traditional way of viewing psychological disorders.

	Lecture Summary	Learning Objectives
1 & 2	The roots and assumptions of medical approaches will be considered and implications reviewed including their influence on classification systems (with attendant problems of validity and reliability) and their emphasis on physical treatments. The value of this approach will be discussed in the light of more recent emphases on psycho-social factors which either generate or maintain psychological difficulties, or complicate recovery; and on alternative constructions to 'psychosis' as a category, e.g. focusing instead on psychological difficulties such as deficits in attention or information processing problems.	Students will be able to <ul style="list-style-type: none"> • describe medical models of psychological disorders • discuss the ramifications of such approaches • evaluate the main medical approaches to treatments, such as drugs and ECT • generally consider the overall utility of medical models
3 & 4	Discussion of psycho-social factors will draw on the expanding literature on childhood trauma in relation to later 'psychotic' experiences, as well as the longer tradition of work on secondary difficulties such as stigma and social exclusion. The efficacy and general usefulness of the treatments associated with medical models – drugs and ECT - will be considered, in their own right and in comparison with alternative approaches.	

5 & 6	The history and current role of cognitive models will be discussed, with a range of examples of how such models have helped the understanding and treatment of psychological disorders. Cognitive theories and treatments of depression will be reviewed, and the literature on efficacy examined.	Students will be able to: <ul style="list-style-type: none"> • describe the antecedents to cognitive-behavioural approaches to abnormality • describe and evaluate cognitive theories of depression such as that of Beck • assess the usefulness of such treatment approaches in the light of available empirical evidence.
7 & 8	Cognitive theories of psychosis are examined: theories of hallucinations and theories of delusions. The use of CBT with problems of psychosis is described and the evidence evaluated.	Students will be able to: <ul style="list-style-type: none"> • describe and evaluate a number of cognitive theories of delusions and theories of hallucinations • describe the CBT approaches to treatment of psychosis • evaluate the effectiveness of such approaches, from their reading of the relevant literature
9 & 10	Cognitive theories of anxiety in general, such as information processing theories, will be discussed, as well as cognitive theories of particular anxiety disorders. Evidence for and against the theories will be considered on the basis of research into cognitive biases in anxiety (e.g. how anxious patients attend to, interpret and remember information). Cognitive treatments for anxiety will be discussed, as well as the efficacy of such treatments, and the implications of this for the underlying cognitive theories.	Students will be able to: <ul style="list-style-type: none"> • discuss the pattern of cognitive biases that are apparent in anxiety disorders • discuss the cognitive theories of anxiety disorders, and evaluate them on the basis of evidence • discuss the efficacy of cognitive treatments for disorders, and the implications for this regarding the underlying theories

References for lectures 1 and 2 (further ones will be given in class – this applies to all the lists):

Bentall, R P. *Madness Explained*. London: Penguin, 2004.
Bentall, R P. *Doctoring the Mind*. London: Allen Lane, (Penguin) 2009.
Boyle, M. *Schizophrenia: a Scientific Delusion?* London: Routledge, 2nd edition, 2002.
Johnstone, L. *Users and Abusers of Psychiatry*. London: Routledge, 2nd edition, 2000.
Mellor, N. *Schizophrenia: exploding the myth*. UPSO, 2006.
J Read, L R Mosher & R Bentall (Eds.) *Models of Madness*. Hove; Brunner Routledge, 2004.

References for lectures 3 & 4.

Psychosocial aspects:

Bak et al. (and other articles) in *Acta Psychiatrica Scandinavica*, 2005, 112, 360-366.

Hinshaw, S P & Stier, A. Stigma as related to mental disorder. *Annual Review of Clinical Psychology*, 2007, 46, 155-173.

Larkin, W. *Trauma and Psychosis*. London: Routledge, 2007.

Whitfield et al. Adverse childhood experiences and hallucinations. *Child Abuse and Neglect*, 2005, 29, 7, 797-810.

For ECT and drugs:

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3.20. PSYCHOLOGY OF WILL (DR R JENKINS)

The aim of this module is to provide an overview of theoretical and experimental work on the psychology of will. The emphasis is on very recent results from cognitive psychology and cognitive sciences more broadly. Recent developments will be related to their historical context. The course provides an opportunity to discuss will in relation to practical problems in the real world.

	Lecture Summary	Learning Objectives
1 & 2	Philosophical context and overview	Students will be able to: <ul style="list-style-type: none"> • review the historical tensions between freewill versus determinism • draw parallels between obesity, deforestation, and the credit crunch • outline contemporary compatibilism
3 & 4	The birth of evitability	Students will be able to: <ul style="list-style-type: none"> • find unpredictable behaviour in deterministic systems • discuss perception of agency and intention • distinguish between the force and experience of will
5 & 6	Cognitive mechanisms	Students will be able to: <ul style="list-style-type: none"> • describe Libet's experiments on freewill • distinguish between automatic and controlled processes • discuss ego-depletion and its behavioural implications
7 & 8	Temptation and resistance	Students will be able to: <ul style="list-style-type: none"> • describe temporal discounting and its behavioural implications • describe experimental investigations of deferred gratification
9 & 10	Stability and variation	Students will be able to: <ul style="list-style-type: none"> • describe individual, cultural, and situational factors in willpower • take the gene's eye view • take the meme's eye view

3.21. SLEEP AND CIRCADIAN TIMING (PROFESSOR S. BIELLO)

'Sleep and Circadian Timing' or 'Sleepless in Glasgow: Disruption of Sleep and Circadian Timing within Biological Systems' (Biello & Espie)

AIMS

To introduce students to current issues in sleep and circadian rhythms. To expose students to the variety of subjective and objective methods used to study sleep and timing. To enable students to critically evaluate case studies of disorders of the sleep and circadian timing systems. This option will be taught jointly with clinical staff.

The course will consist of lectures and group workshops. Within workshops students will work in small groups to use material from lectures as well as own sourced material to generate a Case Study Report for a provided Case Study of a specific sleep or circadian timing disorder. The continuous assessment portion of the grade will be based on a short individual Case Study Report generated by each student.

	Lecture Summary	Learning Objectives
1 & 2	The nature of sleep and circadian rhythms: The neurobiology and regulation of sleep and circadian timing.	Students will: <ul style="list-style-type: none"> be able to describe the basic factors which regulate sleep and circadian timing. receive a Case Study of sleep or circadian timing disorder.
3 & 4	What are the disorders of sleep and circadian timing? A focus on Insomnia, Parasomnias, Circadian rhythm disorders and Hypersomnia.	Students will be able to: <ul style="list-style-type: none"> describe the most common disorders of sleep and circadian timing.
5 & 6	Objective and subjective measures of sleep: How do we assess disorders of sleep and circadian timing? A focus on methods used to assess sleep disorders.	Students will be able to: <ul style="list-style-type: none"> compare subjective and objective measures for sleep. describe what information can be gained from their use.
7 & 8	Psychological treatments in behavioural sleep medicine (BSM) practice: What are the common elements behavioural treatments used within BSM?	Students will be able to: <ul style="list-style-type: none"> discuss current practice within the behavioural treatment of sleep and timing disorders.
9 & 10	Evaluation of Case Studies	Students will be able to <ul style="list-style-type: none"> compare different Case Studies within BSM, establish a likely diagnosis, and establish which measures would be appropriate for further investigation.

References:

Additional current articles will be recommended at the start of the module.

Pigeon W. & Perlis ML (2006) Sleep homeostasis in insomnia. *Sleep Medicine Reviews* 10, 247-254

Ohayon M (2002) Epidemiology of insomnia; what we know and what we still need to learn. *Sleep Medicine Reviews* 6, 97-111

Edinger, J.D et al (2004) Derivation of Research Diagnostic Criteria for Insomnia: Report of an American Academy of Sleep Medicine Work Group. *Sleep* 27, 1567-1596

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Espie CA (2002). Insomnia: conceptual issues in the development, persistence, and treatment of sleep disorders in adults. *Annual Review of Psychology* 53:215–43.

Drummond SA et al (2004) Functional imaging of the sleeping brain review of findings and implications for the study of insomnia. *Sleep Medicine Reviews* 8, 227-244

Morin & Espie (2009) *Oxford Handbook of Sleep and Sleep Disorders*. OUP, Oxford

Assessment: 30% Case Study Report and 70% Exam

3.22. SOCIAL COGNITION (PROF P O'DONNELL)

Aims:

- To introduce students to key topics in the broad area of social cognition
- To demonstrate the social cognitive processes involved in aspects of health psychology
- To evaluate the social cognitive features of human attraction
- To examine how social cognition varies with culture
- To show how social cognitive processes affect internal thought monitoring

	Lecture Summary	Learning Objectives
1 & 2	<p>Attribution, control and health</p> <p>Attributional Style is usually defined on an optimism pessimism dimension using Seilgman's internal, stable, permanent categories or a version of Weiner's model.</p> <p>While real attributions are complex the optimism dimension has shown measurement stability and predictive power. However questions remain. Is attribution style really an individual difference? Is it the same as self esteem? Can we learn to be optimists and would it improve our physical and mental health if we were optimists?</p>	<p>Students will be able to:</p> <ul style="list-style-type: none"> • describe attribution style • describe and evaluate scales and other measures of attribution style • define the meaning of a positive attribution style • critically evaluate evidence linking attribution style and health outcomes.
3 & 4	<p>The Social Cognition of Human Attraction: youth, waist-to-hip ratio, and bilateral symmetry</p> <p>Features which might signal reproductive competence are arguably seen as more attractive. These include: youth (or at least an age envelope), good skin, symmetry, hormone driven sexual features: waist hip ratio, jaw line, V shaped physique in males, breast size in females, hair quality in women. In the evolutionary perspective, beauty is a judgment of fitness value.</p> <p>However total fitness value is influenced by both physical and nonphysical traits e.g. dependability, intelligence, co-operativeness. Aesthetic judgments of beauty might then be influenced by nonphysical traits such as liking, respect, familiarity, ability relevant to group goals, team spirit etc, not just physical characteristics.</p>	<p>Students will be able to:</p> <ul style="list-style-type: none"> • critically evaluate evidence on physical cues to attractiveness: youth, symmetry, waist hip ratio etc. • critically evaluate sociobiological explanations that these cues are honest signals of total fitness • evaluate experiments which examine how people combine physical criteria on the one hand with personality and interaction style on the other to reach an overall judgement of attractiveness
5 & 6	<p>Social Cognition and Societal Dimensions</p> <p>Hofstede: defined societies by certain key cultural dimensions: Power Distance Individualism Collectivism , Masculine Feminine,; Uncertainty avoidance –Risk</p>	<p>Students will be able to:</p> <ul style="list-style-type: none"> • describe Hofstede's typology of societal dimensions • critically evaluate evidence on how to define the key dimension of individualism- collectivism

	<p>preference, Long vs. short term orientation.</p> <p>The most researched of these psychologically is Individualism-Collectivism, which refers to the extent to which people are expected to stand up for themselves, or alternatively act predominantly as a member of the group or organisation. This dimension arguably impacts on our sense of self and on how we perceive others. We examine evidence which argues that individualism collectivism affects social cognitive style. Finally we examine whether two universal dimensions, warmth and competence, are more important in social cognition than Hofstede's concepts.</p>	<ul style="list-style-type: none"> critically evaluate evidence examining social cognitive differences between collectivist and individualistic societies critically evaluate evidence for two universal dimensions of social cognition: warmth and competence
7 & 8	<p>Ironic thought control: does suppressing thoughts cause them to rebound?</p> <p>Ironic thought control means trying to control an automatic process e.g put a sweet in your mouth and try not to chew . Another example is trying to stop automatic dysfunctional thoughts such as catastrophisation in depression (Beck). However there is a basic problem with Ironic Thought Control viz post suppression Rebound. When an automatic thought is suppressed through conscious effortful voluntary control (a frontal lobe task) Afterwards the suppressed thought or activity becomes more activated It bounces back. Controlling automatic thoughts is a two stage process: detect then suppress Suppressing is resource intensive. Under load we lose the ability to suppress and are left with automatic detection only. Thought stopping as a means of treatment for , insomnia, anxiety, and worry is probably ineffective because of post suppression rebound</p>	<p>Students will be able to:</p> <ul style="list-style-type: none"> describe the phenomenon of iroci thought control explain Wegner's account of the underlying cognitive mechanism critically assess whether key experiments validate his account evaluate some of its applications in applied psychology
9 & 10	<p>Social Cognition and mental illness: the case of delusions</p> <p>Introduction to delusions: examples, categorisation of main types, relationship to various co-morbid illnesses. Dopamine hypothesis: Gray, Garety, Hemsley Main theories: social, biological, interactionist. Perceptual abnormalities, reasoning deficits and possible interactions. Integrating Brain and Cognition in delusions.</p>	<p>Students will be able to:</p> <ul style="list-style-type: none"> define what is meant by delusions evaluate evidence on their frequency in the population and in various mental disorders critically evaluate the dopamine theory of delusions in the light of experimental evidence

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