



What IS Psychology?

SLIDES CREATED IN
COLLABORATION WITH DR
JUDITH MARSHALL



The scientific study of the mind and behaviour. It aims to understand how people think, feel, and act, both as individuals and in groups.



Mental processes – such as thoughts, emotions, memory, and perception



Behaviour – what people do and why they do it



Influences – how biology, environment, culture, and experience affect behaviour



Psychologists use **scientific methods** (like experiments, observations, and surveys) to gather evidence and explain behaviour, rather than relying on opinions or assumptions.

What is Psychology?

What does psychology study?

Psychology covers many areas, including:

Cognitive processes – thinking, learning, memory, attention

Emotions and motivation – feelings, stress, wellbeing

Development – how people change across the lifespan

Social behaviour – relationships, group behaviour, prejudice

Mental health – understanding and treating psychological disorders

Biological bases of behaviour – how the brain and nervous system influence behaviour

Why is psychology important?

Psychology helps us to:

Understand ourselves and others better

Improve mental health and wellbeing

Enhance learning, work performance, and relationships

Address social and behavioural problems in society

Key Areas of Applied Psychology

Clinical Psychology

e.g.

- Assessment and Diagnosis
- Planning and conducting therapies
- Research

Counselling Psychology

e.g.

- Help with emotional difficulties (e.g. anxiety)
- Evidence-based therapies (e.g. CBT)
- Support clients experiencing life changes

Forensic Psychology

e.g.

- Presents evidence
- Improving recall of witnesses
- Assessing prisoners for release

Educational Psychology

e.g.

- Assessment of learning differences
- Remedial support
- Advising parents and teachers – SEND; behaviour problems

Occupational Psychology

e.g.

- Improve performance at work (e.g. productivity; motivation)
- Support employee mental health
- Recruitment and Training

Health Psychology

e.g.

- Design and use of health interventions –
- Supporting health care delivery (e.g. post-surgery recovery)
- Research

Forensics / Police / Probation

NHS / Health - care

HR / Management

Teaching / Education / Research

Counsellor / Clinical practice

Social Work / Allied Health

What else can you do
with a psychology
degree?

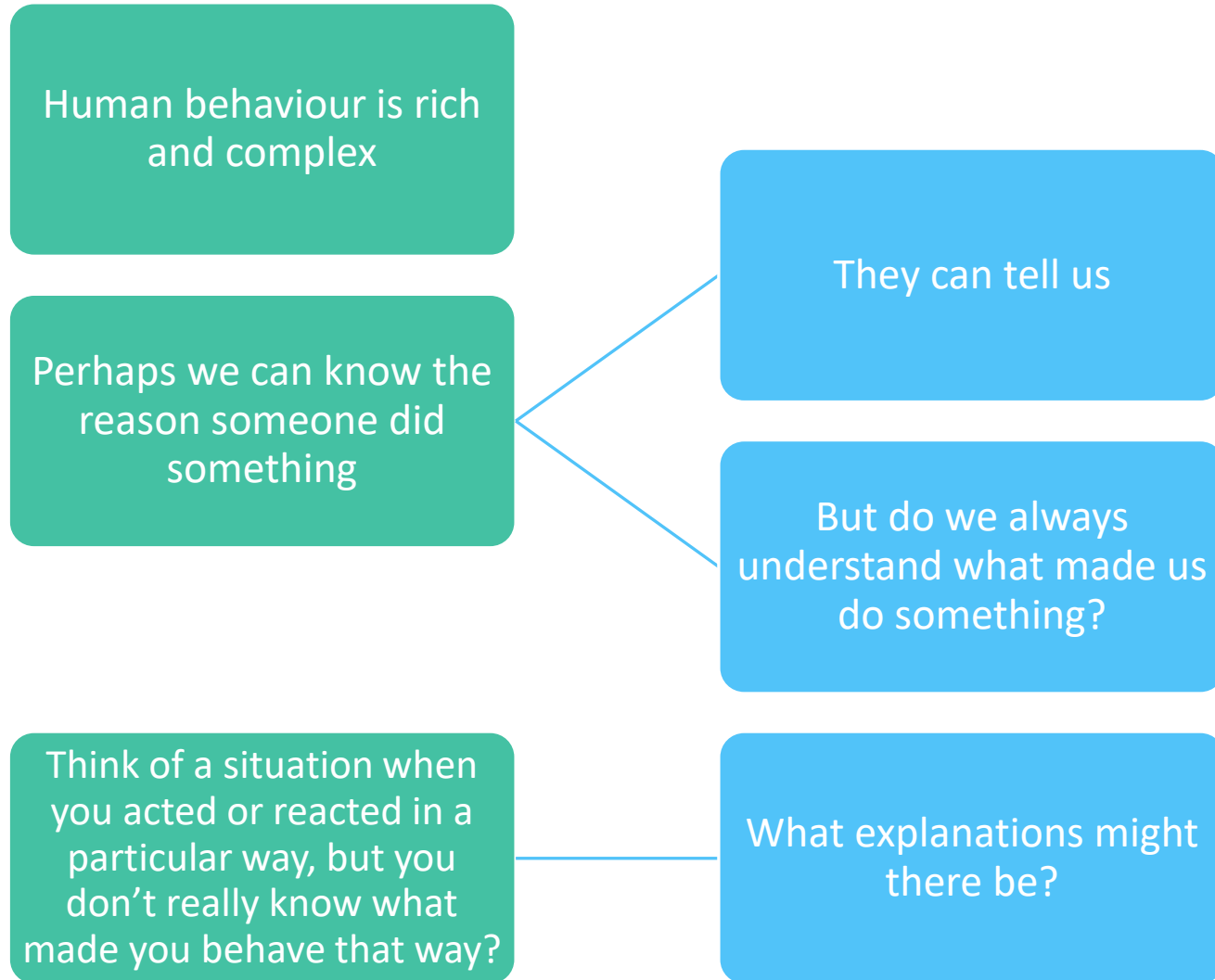
Play Therapist / Psychotherapist

...plus many other
employment
pathways...



How do
psychologists
explain our thinking
and behaviour?

Explaining Behaviour



Scenario: Jake

Listen carefully to this story...



Practice Assessment 1

(Not compulsory, but good for
feedback)

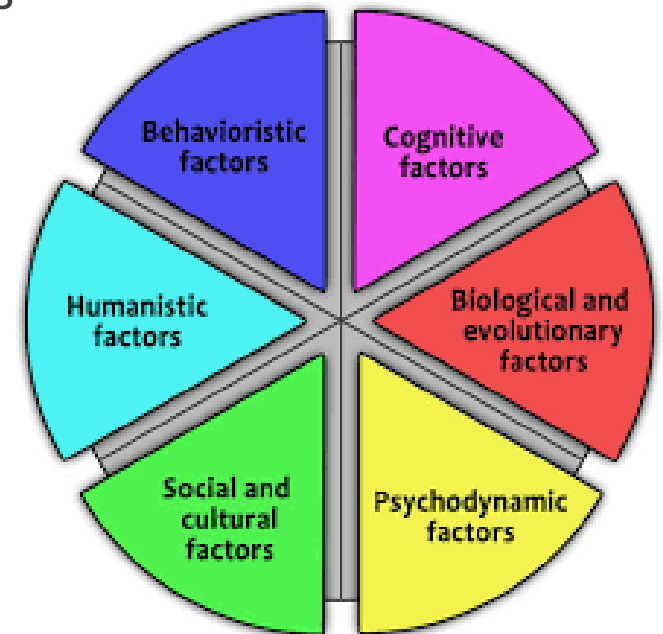
Write 400 words (+/- 10%)

Identify the key points of the following TWO
approaches:

a) Behaviourist (approx. 200 words)

b) Cognitive (approx. 200 words)

By FRIDAY next week





The Behaviourist approach

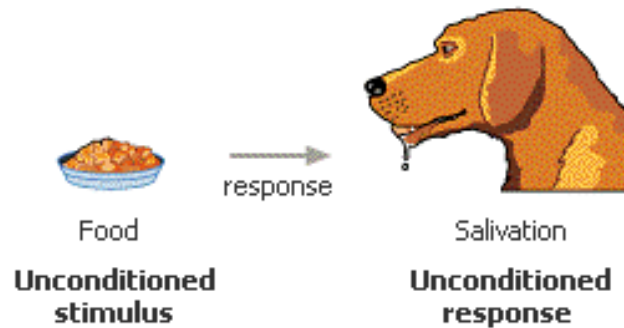
Classical Conditioning: Pavlov's Dogs

Pavlov 1927
Russian Physiologist

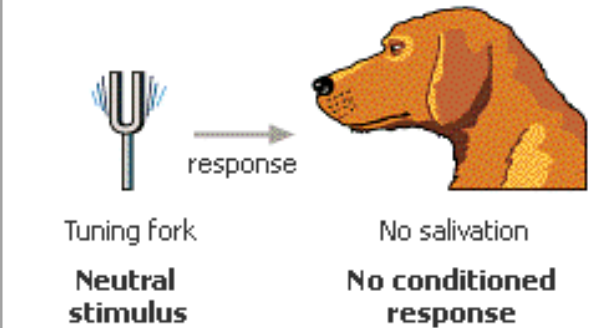
Studied dog's salivary system

Discovered 'Classical Conditioning'

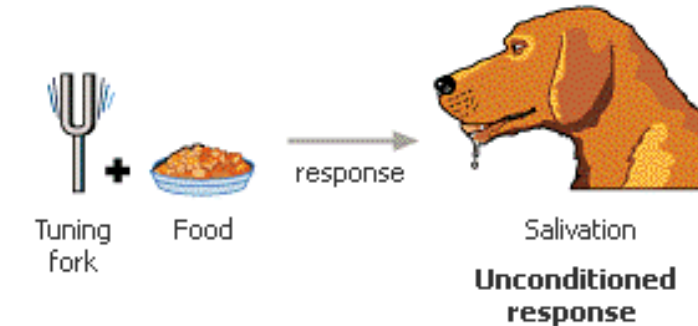
1. Before conditioning



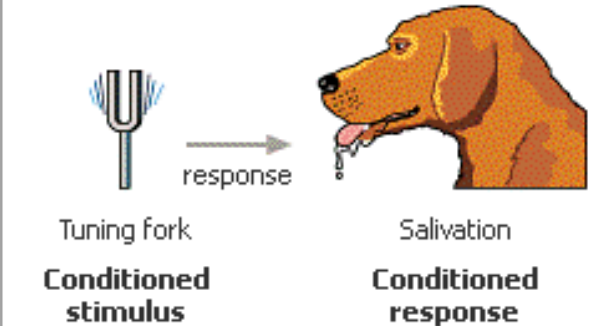
2. Before conditioning



3. During conditioning



4. After conditioning



Behaviourist approach

Focus: Objective study of observable behaviour

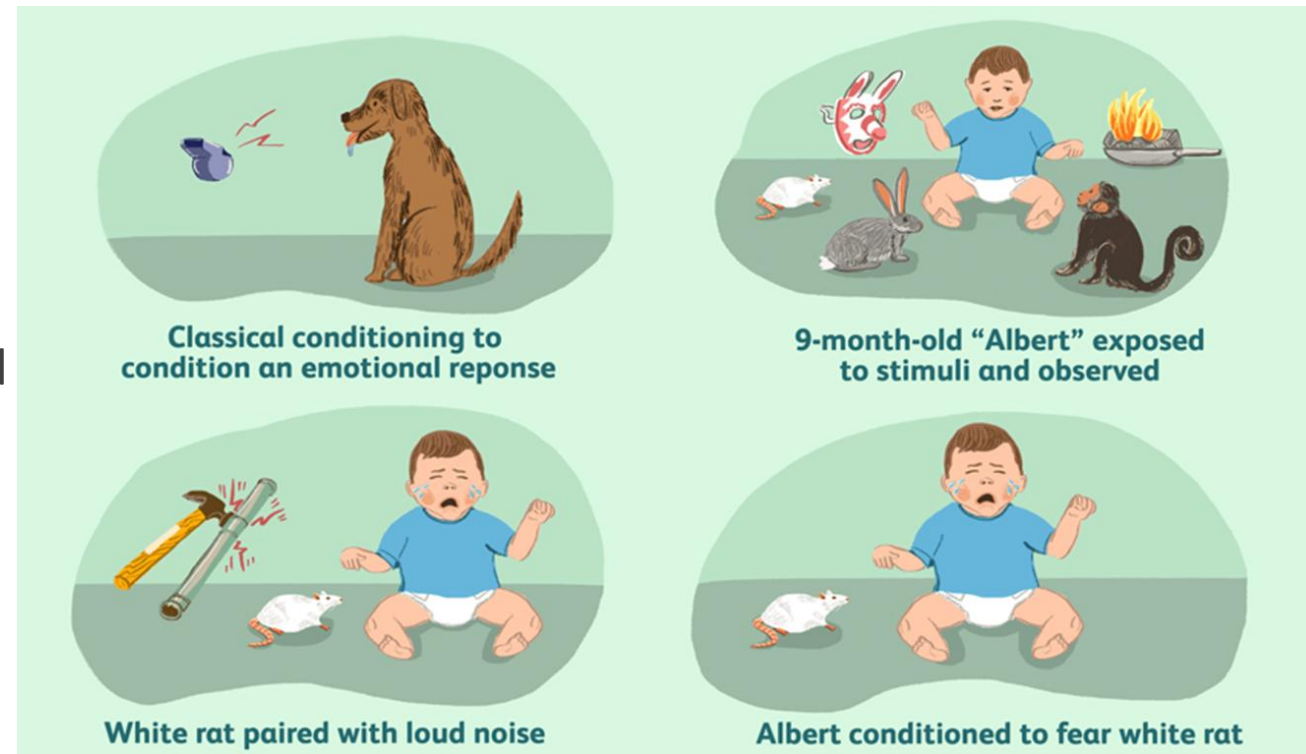
John Watson: known as the founder of Behaviourist psychology

Watson argued that the mind is a 'black box'. What is inside cannot be 'known' or measured

Behaviour is merely our response to what is happening around us – to external stimuli

Classical conditioning

1920s 'Little Albert' experiment



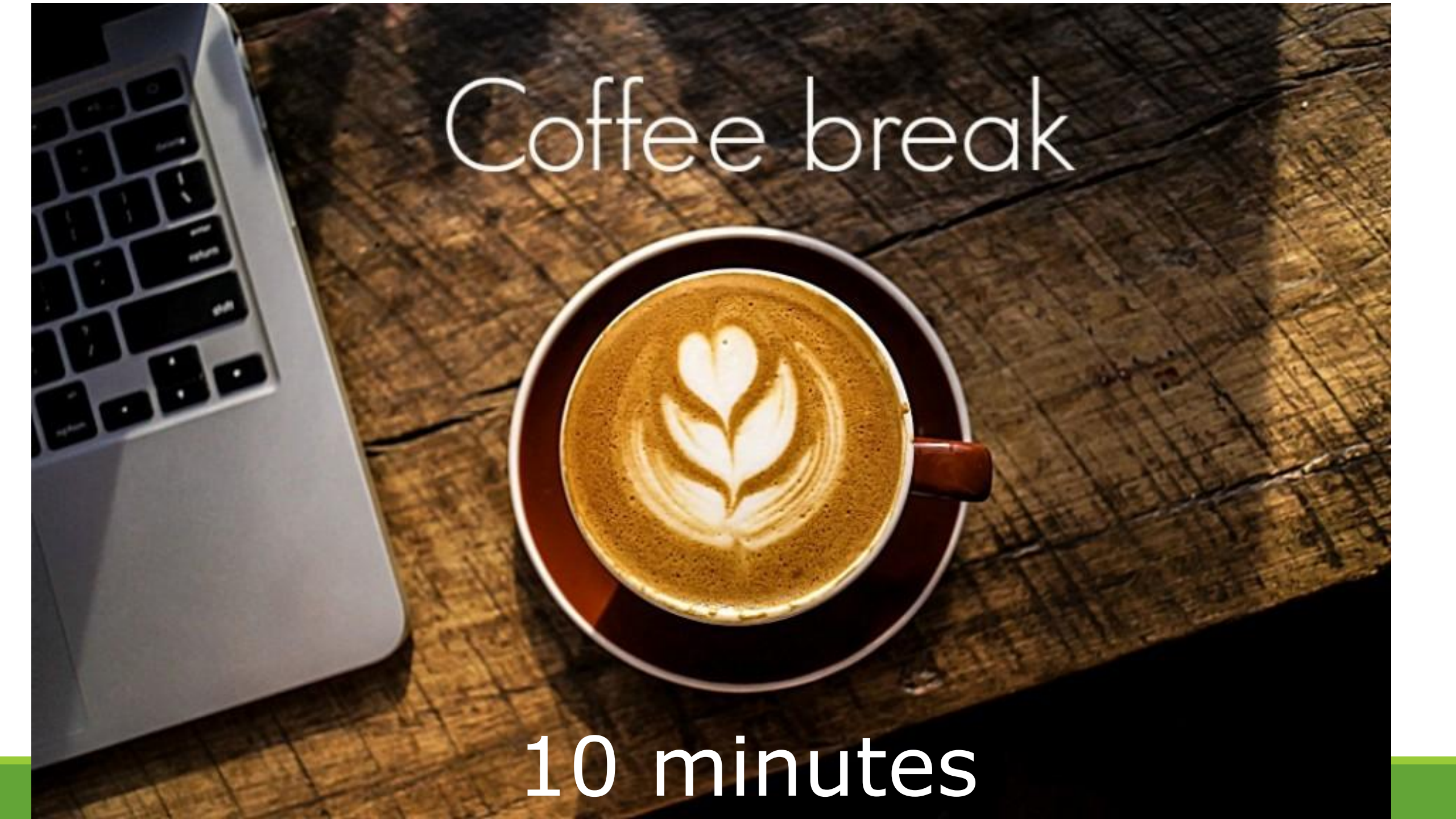
Classical conditioning in real life

Examples:

- Poor experiences with tests and exams can cause us to want to avoid school
- Starting to pack up when hearing the school bell at the end of the day
- Smiling at people when you smell something that reminds you of happy times (baking, flowers)

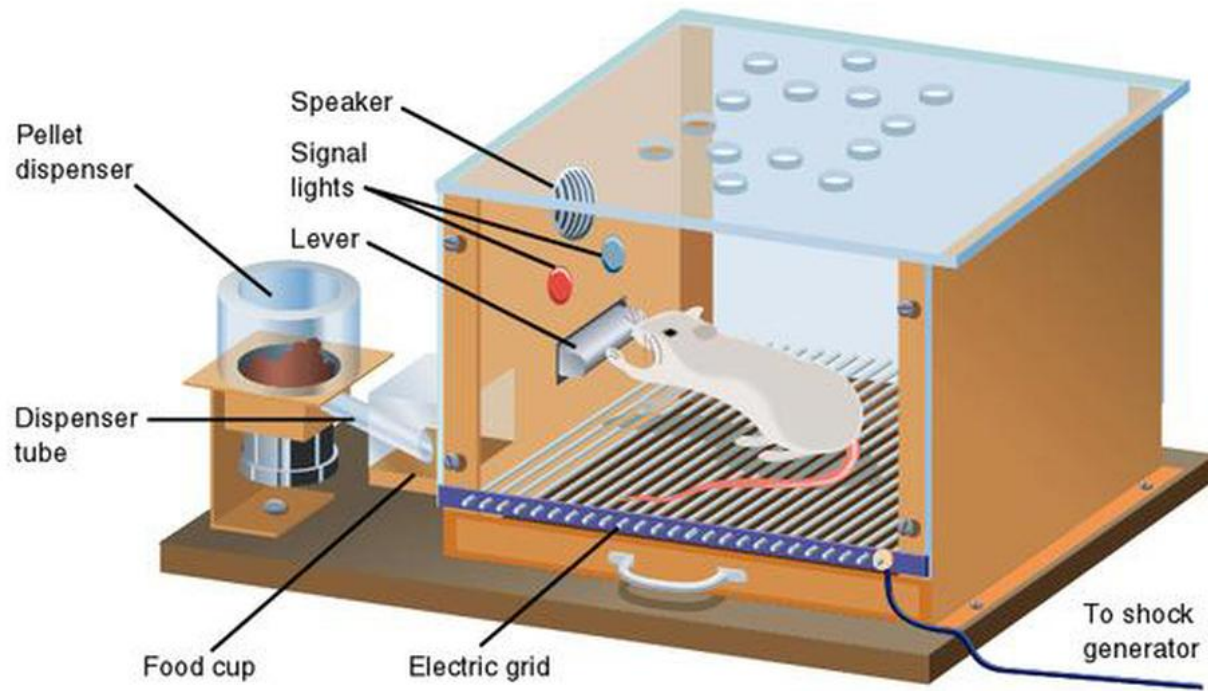
What examples can you think of?

Coffee break

A top-down view of a white ceramic coffee cup with a brown handle, filled with a latte. The coffee has a white foam design in the center that resembles a heart with two leaves. The cup sits on a matching brown saucer. To the left of the cup, the corner of a silver laptop is visible, showing a portion of its keyboard. The entire scene is set on a dark, textured wooden surface. The text "Coffee break" is written in a white, sans-serif font across the upper half of the image.

10 minutes

Operant conditioning



The Skinner Box 1930s

Shaping Behaviour

B. F. Skinner (1930s-1960s)

Believed behaviour is sustained by reinforcements and rewards, not by free will

Experiments into educating people to behave in certain ways

Stimulus - Response

Shaping behaviour

'Positive' Punishment (P+)

Addition of something
unpleasant
(e.g. detention)

'Negative' Punishment (P-)

Removal of something desired
(e.g. missing out)

Positive Reinforcement (R+)

Addition of something
pleasant
(i.e. rewards)

Negative Reinforcement (R-)

Removal of something
unpleasant
(i.e. avoiding detention)



Scenario

A hospital children's ward wants to reduce medication refusal. The ward manager is considering nurses giving patients a token reward each time they take their medication.

- Which type of conditioning is being used?
- How might this work? (rewards, rules, consequences)
- What behaviours might increase or decrease?

The Cognitive approach

Cognitive Perspective



Internal mental processes

How thoughts influence behaviour



**INFORMATION-
PROCESSING
MODEL.**
**COMPUTER
ANALOGY**



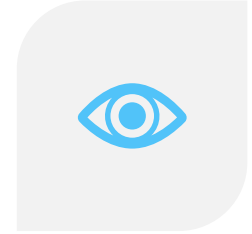
ATTENTION



MEMORY



PERCEPTION



**THINKING AND
PROBLEM-
SOLVING**



Attention

On your way to university today, how many blue cars did you see?

Attention is selective: your attention was not directed towards blue cars

Attention is a limited resource: driving; using a phone while walking; concentrating on planning or worrying

Bottom-up processing: automatic and rapid processing based on features within the environment – ‘stimulus-driven’ (focused on noises, movement, bright colours)

Top-down processing: Influenced by schemas and experience, guided by expectations (e.g. actively looking for a blue car)

Perception

We respond to the world based on how we see it – but we don't always see 'reality'

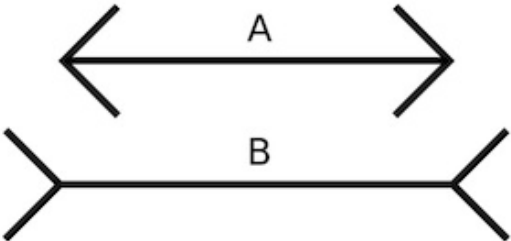
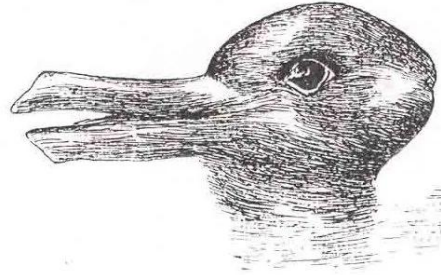
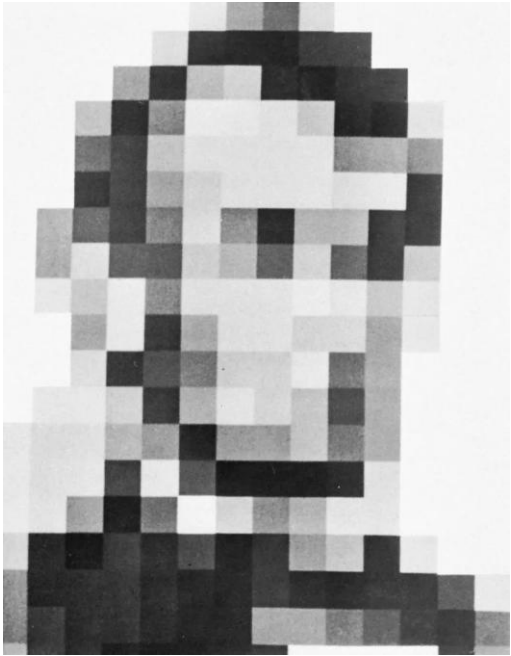
Social perception:

Perception influences behaviour e.g.

- The sea – people can see and feel pleasure (fun) or fear (danger)
- Avoiding a tired person because they look angry to you

Schemas: formed by past experiences

- Knowledge that forms a mental framework to interpret information
- Helps to
 - quickly process information
 - Predict what is likely to happen
 - Decide how to behave





Memory

Learn, adapt and function

Sensory memory - split second

Short-term or Working memory - (15–30 seconds)

Information held while using it
e.g. phone number

TEST: DIGIT SPAN

Long-term memory

Conscious recall of memories

Unconscious recall (riding a bike)

Prospective memory

Remembering to perform planned actions in the future.

Scenario

A student, Aisha, is walking down a dimly lit street and sees a person wearing a hoodie walking toward her. She immediately feels anxious and crosses the road. Later, she realises the person was just a neighbour walking home.

Cognitive focus:

Schema-driven processing

How pre-existing mental frameworks shape perception

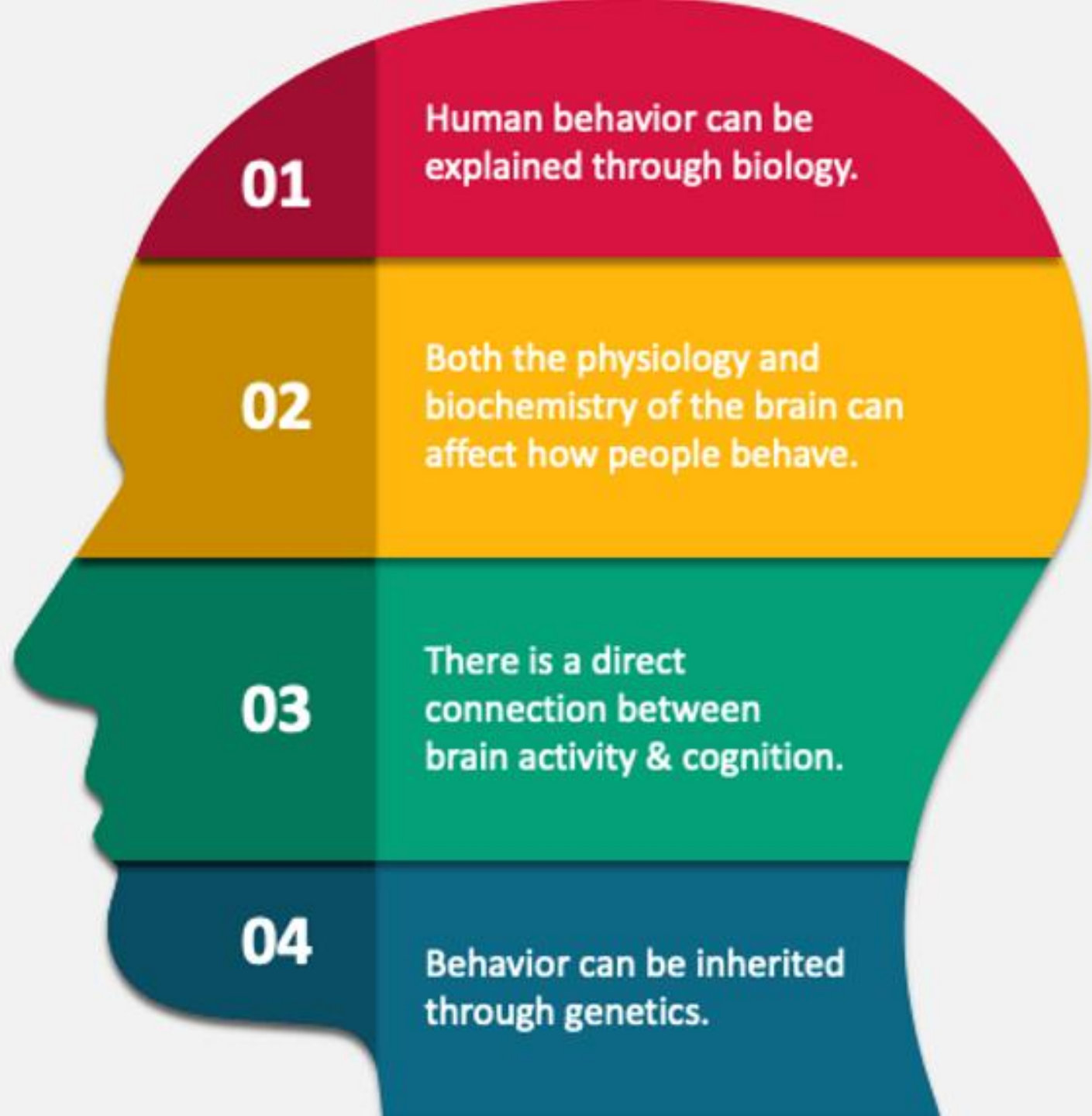
Automatic thoughts and cognitive shortcuts

Student task:

Consider what the content of Aisha's *schema* might be to have influenced her interpretation and behaviour.



The Biological approach





Biological Approach

- Physical biological basis for mental processes and behavior
- Brain structures, neurochemistry, hormones and genetics
- Brain and nervous system control behaviour via neurons and neurotransmitters
- Psychological disorders — result of brain dysfunction



Neuroscience Approach

- How brain and nervous system function to produce behaviour
- Neural activity, brain regions, neural pathways
- Communication of neurons using neurotransmitters (e.g. dopamine, serotonin)
- Uses advanced brain imaging techniques:
 - Functional magnetic resonance imaging (fMRI)
 - Electroencephalogram (EEG)



Behavior Genetics Approach

- Focuses on the role of genetics in behaviour
- Emphasises nature and nurture
- Genes can increase risk, but they do not propose certainty

Frontal Lobe

- Motor control (premotor cortex)
- Problem solving (prefrontal area)
- Speech production (Broca's area)

Parietal Lobe

- Touch perception (somatosensory cortex)
- Body orientation and sensory discrimination

Occipital Lobe

- Sight (visual cortex)
- Visual reception and visual interpretation

Cerebellum

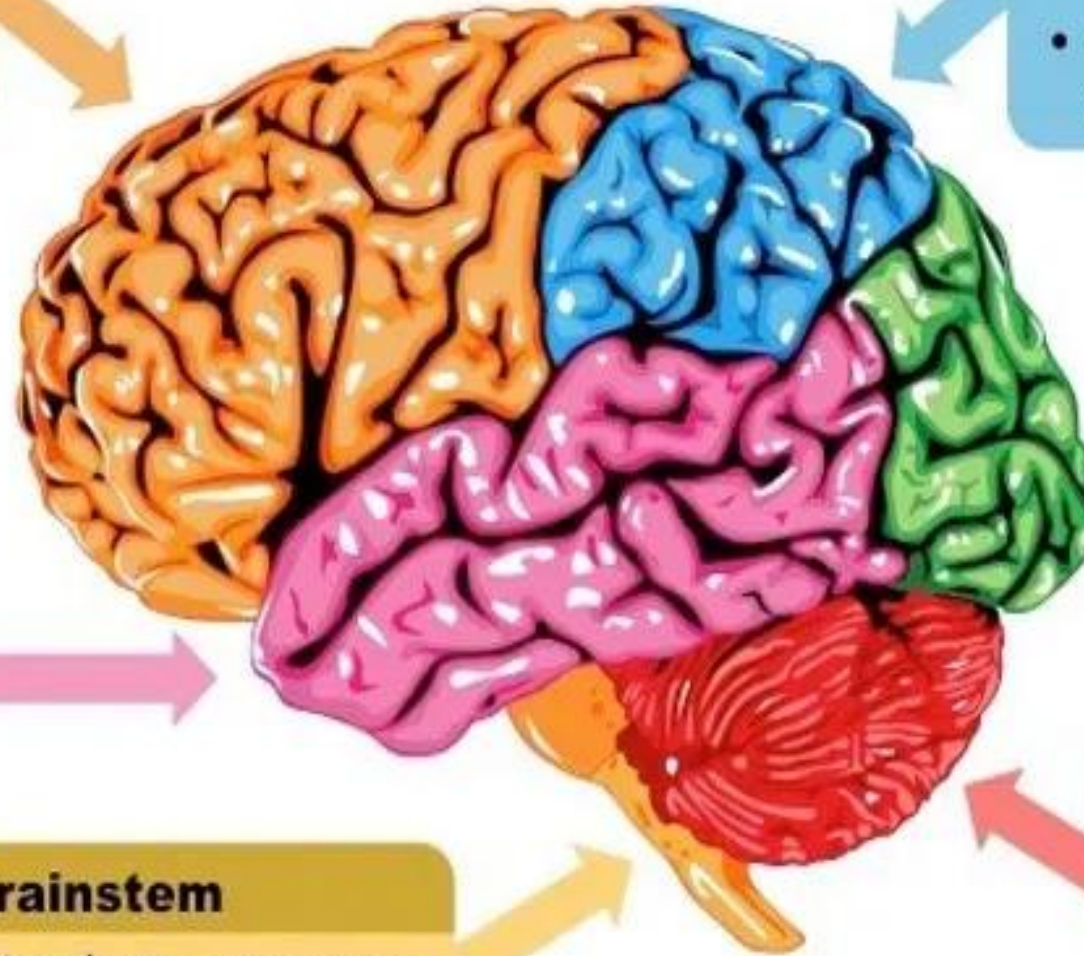
- Balance and coordination

Brainstem

- Involuntary responses

Temporal Lobe

- Auditory processing (hearing)
- Language comprehension (Wernicke's area)
- Memory / information retrieval





Scenario: Addiction in the Brain

Ahmed has been smoking for ten years. Over time, he finds he needs more cigarettes to feel the same effect. When he tries to quit, he experiences irritability, headaches, and intense cravings. His doctor explains that nicotine changes the brain's reward pathways.

Possible explanation:

Nicotine **hijacks the brain's reward pathway**

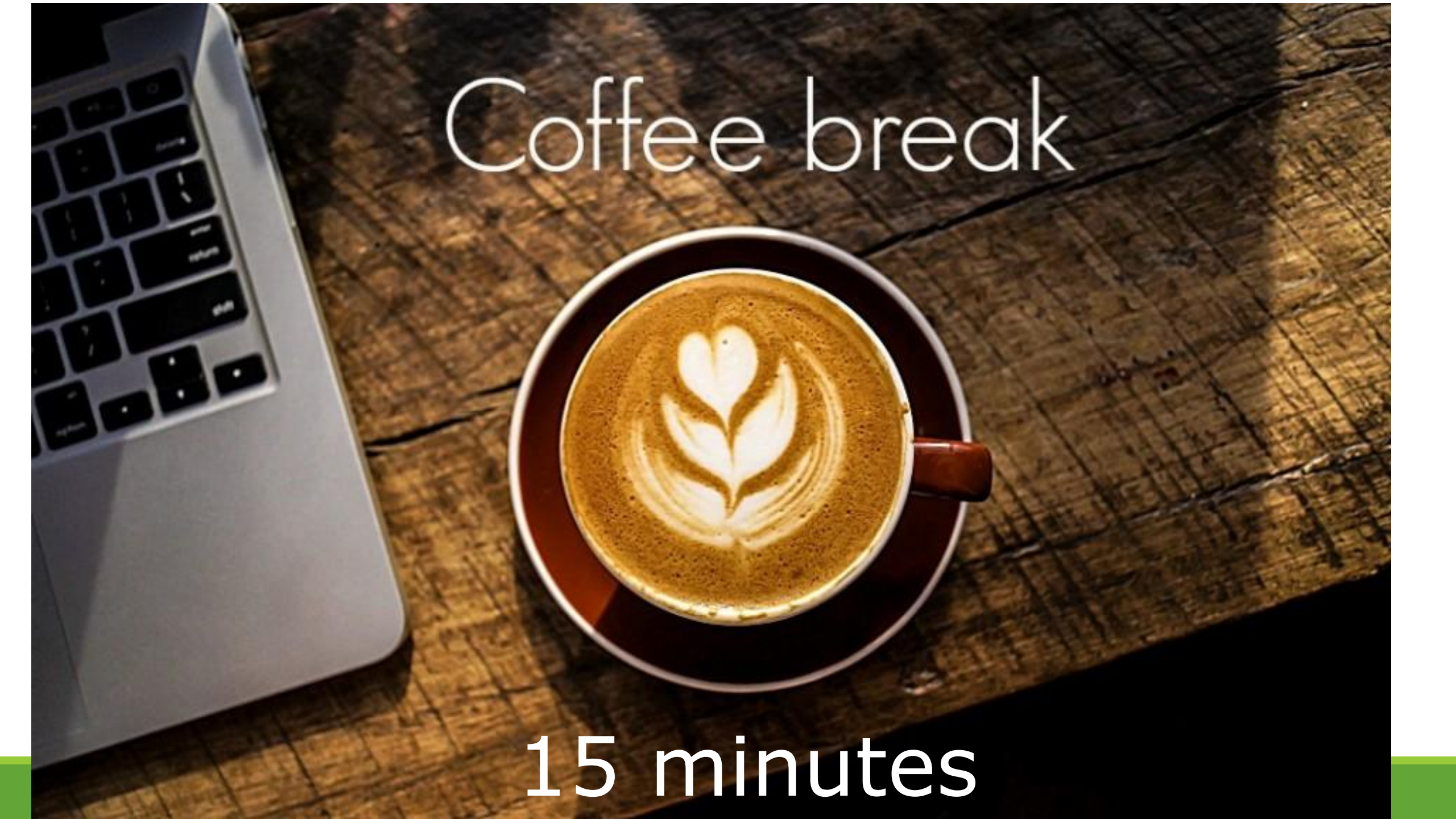
It causes **large dopamine releases**, making it feel rewarding

The brain adapts, reducing natural dopamine

This leads to **tolerance, dependence, and addiction**

Without nicotine, people feel withdrawal and cravings

Coffee break

A top-down view of a white ceramic coffee cup with a brown handle, filled with a latte. The coffee has a white foam design in the center that resembles a heart with two leaves. The cup sits on a matching brown saucer. To the left of the cup, the corner of a silver laptop is visible, showing a portion of its keyboard. The entire scene is set on a dark, textured wooden surface with prominent grain patterns. The lighting is warm and directional, coming from the upper right, casting soft shadows.

15 minutes

Psychodynamic Approach



Psychodynamic: Originated with Sigmund Freud

Key elements:

The unconscious mind

Much of human behaviour is influenced by thoughts, desires, and memories outside conscious awareness

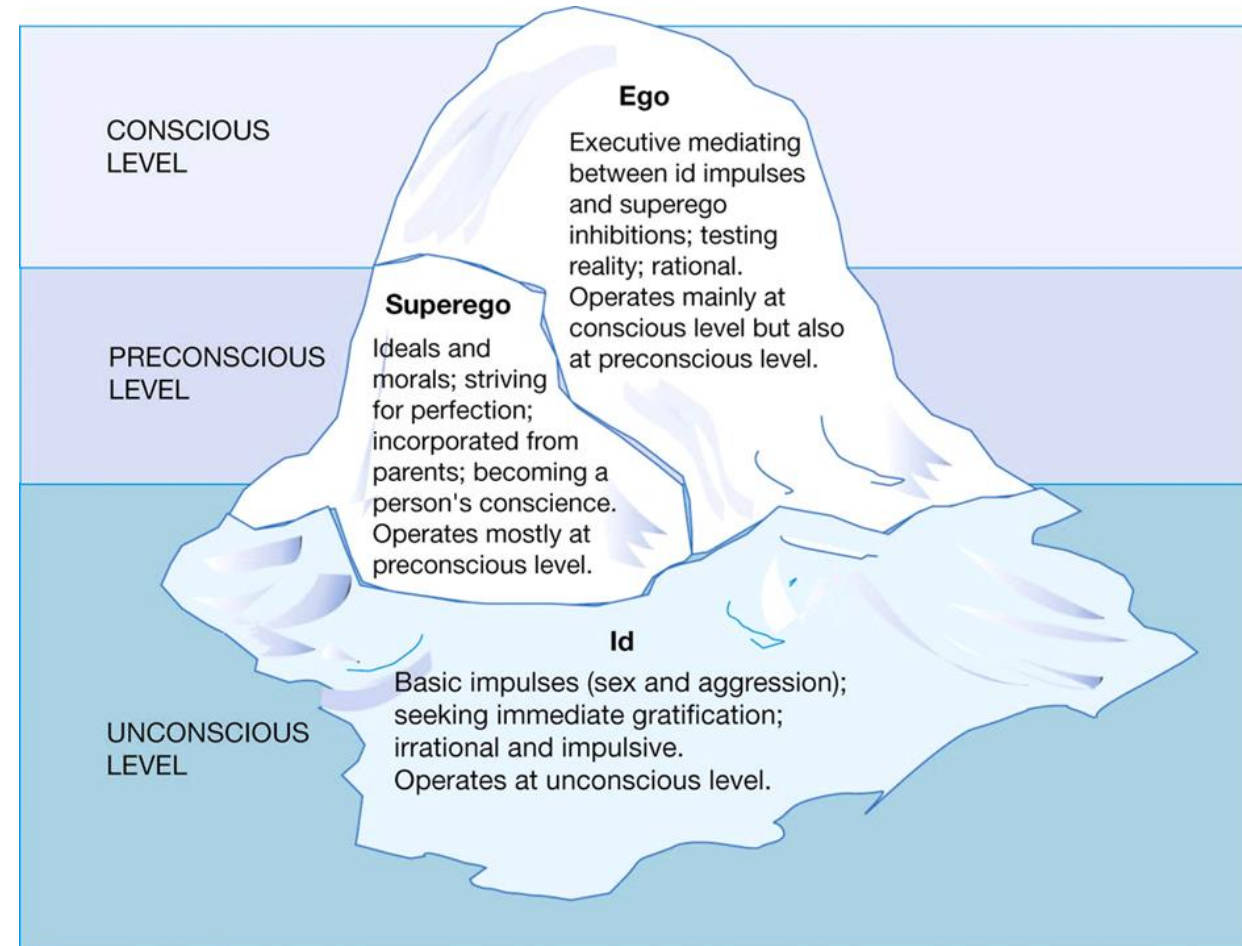
Dream analysis

Early childhood experiences

Experiences in early life (especially relationships with caregivers) are seen as crucial in shaping adult personality and behaviour

Structure of the psyche

- Id
- Ego
- Superego



Psychodynamic

Psychosexual stages

Development occurs through stages (oral, anal, phallic, latent, genital), with unresolved conflicts leading to fixation

Defence mechanisms

The ego uses unconscious strategies (e.g. repression, denial, displacement) to reduce anxiety

Role of conflict

Behaviour and mental distress arise from unresolved unconscious conflicts, often between the id and superego

Freud's Stage-by-Stage Moral Development

Psychosexual Stages and Their Contributions to Morality

ORAL STAGE

Ages 0-1 year

Moral Foundation: Trust and empathy through secure attachment and consistent caregiving; emotional capacity to care about others and their feelings

ANAL STAGE

Ages 1-3 years

Moral Foundation: Self-control and rule-following through toilet training; delayed gratification; obedience vs. autonomy; first systematic encounter with external rules

PHALLIC STAGE

Ages 3-6 years

Moral Foundation: SUPEREGO FORMATION through resolution of Oedipus/Electra complex; internalization of parental values via identification; conscience (guilt) and ego ideal (pride) emerge as internal moral regulators

LATENCY STAGE

Ages 6-12 years

Moral Foundation: Social consolidation through peer interactions, cooperative play, and school experiences; practicing and refining internalized moral standards in complex social contexts

GENITAL STAGE

Ages 12+ years

Moral Foundation: Mature ethical reasoning integrating all previous stages; balancing personal desires with social responsibilities; applying internalized standards to complex adult moral dilemmas

Developmental Progression



Scenario

Sophie is a student who becomes extremely anxious before giving presentations. She prepares thoroughly, but on the day, she shakes, sweats, and sometimes feels like she might faint. She has no memory of ever having a bad public experience.

Possible explanation:

Sophie's presentation anxiety is not caused by the present situation itself, but by unresolved, unconscious conflicts rooted in earlier experiences that are being reactivated in the current setting.



Sociocultural

How we think and behave is shaped by the influence of social interaction, culture, communities, language, physical landscapes and historical context on psychological development and thinking

Behaviour is socially constructed

Human behaviour and mental processes develop through **interaction with other people**, not in isolation. What we think, feel, and do is shaped by social relationships (family, peers, teachers, institutions).

Culture shapes cognition

Culture provides the **values, beliefs, norms, language, and practices** that influence how people perceive the world. Psychological processes (e.g. reasoning, memory, identity) may differ across cultures rather than being universal.

Learning occurs through social interaction

Knowledge is learned first at a **social level** (between people) and then internalised at an **individual level**. Interaction with more knowledgeable others (parents, teachers, peers) is essential for learning.

Language is central to thinking

Language is the main tool through which culture is transmitted. Inner speech (talking to oneself) supports problem-solving, reasoning, and self-regulation.



Scenario

Due to the closure of the local steelworks, James has recently been made redundant from the job he has had since left school 23 years ago.

He has a family to support but he is struggling to see a way forward. The employment he has been offered is in a factory that his wife works in. James feels compelled to obtain a job, but he is delaying accepting this offer. Instead, he has stopped socialising with his old friends from the steelworks and avoids leaving the house.

How might a sociocultural psychologist approach understand James' behaviour?

Humanist

Carl Rogers

Free will: Humans are seen as active agents who make conscious choices, rather than being determined by biology or past experiences.

Personal responsibility: Individuals are responsible for their own thoughts, feelings, and actions.

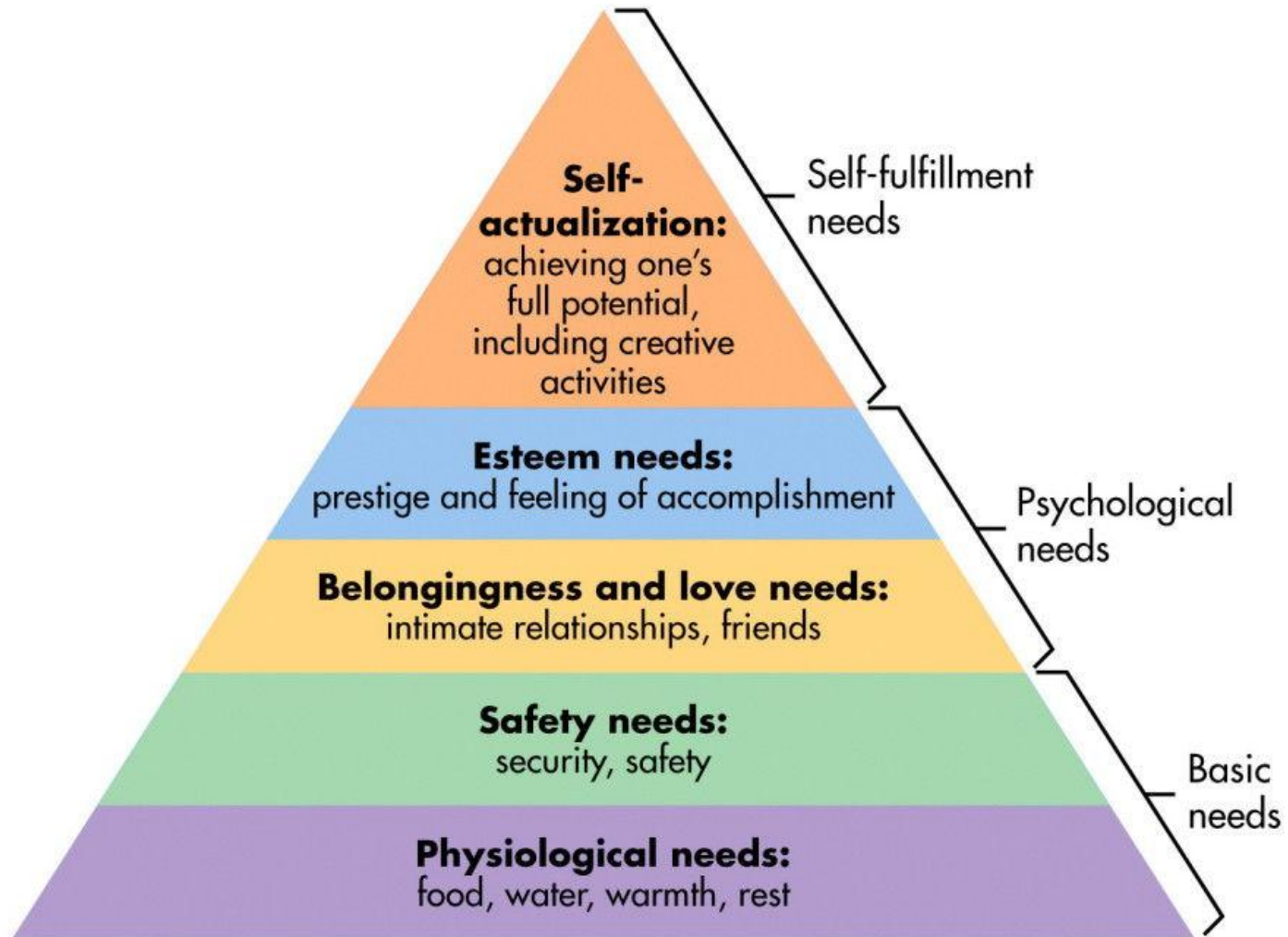
Subjective experience: Understanding behaviour requires focusing on a person's unique, conscious experiences and perceptions of the world.

Self-concept: Behaviour is influenced by how individuals view themselves (self-image, self-esteem, and ideal self).

Innate tendency towards growth: Humans are naturally motivated to achieve **personal growth** and **self-actualisation**.

Conditions of worth: Psychological distress can arise when acceptance from others is conditional, leading to incongruence between the real self and ideal self.

Holistic view: The person is studied as a whole rather than reducing behaviour to simple components.



Hierarchy of Needs

Abraham Maslow



Scenario

Alex, a 35-year-old office worker, feels unhappy and disengaged at work. Although Alex earns a stable income, they feel their job does not reflect who they really are or what they value. Alex often feels tense and frustrated but struggles to explain why, saying, *“I feel stuck being who others expect me to be.”*

Possible explanations:

- Self- concept incongruence – ideal self – expectations
- Conditions of worth
- Self-actualisation

Groupwork

Complete the worksheet to explain how different psychologists would explain the listed scenarios

Scenario 1: A student avoids revising for an important exam.

Scenario 2: A person obsessively cleans their home.

Scenario 3: A teenager constantly seeks attention on social media.

Scenario 4: An adult struggles to form long-term romantic relationships.

Scenario 5: Someone over-eats when stressed.

Perspective	Focus	Sample Questions
BEHAVIOURAL	How we learn observable responses	How do we learn to fear objects? How can we change behaviour?
COGNITIVE	How we encode, process, store and retrieve information	How do we use information in remember? Reasoning? Solving problems
BIOLOGICAL NEUROSCIENCE BEHAVIOUR GENETICS	Prioritises the brain and nervous system How body and brain enable emotions, memories, sensors How our genes and environment influence our individual differences	How do pain messages travel from hand to brain? Is blood chemistry linked to moods and motives? To what extent are intelligence, personality, sexual orientation, vulnerability to depression products of our genes?
PSYCHODYNAMIC	How behaviour springs from unconscious drives or conflicts	How can someone's traits or disorders be explained by unfulfilled wishes and childhood trauma?
SOCIAL-CULTURAL	How thinking and behaviour vary across situations and cultures	How are we alike as members of on human family?
EVOLUTIONARY	How the natural selection of traits has promoted survival of genes	How does evolution influence behaviour tendencies? How do we differ as products of our environment?
HUMANISTIC	How subjective experience, free will and need for 'unconditional positive regard', underpin personal growth	How might negative past experiences prevent the formation of loving relationships?

SUMMARY

Take another look at the approaches...

You can find these in Chapter 2 of the following book...

Gross, R. (2020). *Psychology: The science of mind and behaviour* (8th ed.). Hodder Education.

You can open a digital copy via the UWTSD library

You can also test yourself with the **informal quiz on Moodle**. You can try this as many times as you like. Only you will see your results.