

Behaviourism and the psychodynamic approach psychology essay



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Behaviourism is mostly about observable behaviours and views how learning is through association, seen in Classical Conditioning and through behaviour reinforcement, as in Operant Conditioning (B F Skinner, 1938). The Psychodynamic Approach (Sigmund Freud, writing between the 1890s and the 1930s) views all behaviours as being controlled by thought processes of the mind. (Cardwell et al. 2004)

Behaviourism primarily looks at behaviours that can be seen, and states that we are born with a mind like an empty wipe board (tabula rasa) and all of our behaviours are acquired from what goes on around us in our environment (McLeod. 2007). The following outlines two learning theories. Classical conditioning is a type of learning that occurs through association. An unconditioned stimulus results in an unconditioned response, and the theory is that the same response can be evoked by a conditioned stimulus. (Learning Theories Knowledgebase. 2012). Operant conditioning is about learning through reinforcement (positive or negative rewards and punishment) from the environment. Learning is a progressive activity that starts by rewarding behaviour that is associated to any wanted outcome (Cardwell et al. 2004). This happens quite naturally without any awareness, for example in praising children for milestone achievements like using the potty.

One key research study of learning theories is classical conditioning and Ivan Pavlov's Dog experiment (1927). This involved investigating how the dogs learnt through association. The following stages were used, with the repetition of the unconditioned with the conditioned stimulus being used together. In the first stage, before conditioning, when the dogs are given the

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unconditioned stimulus (dog food) this results in salivation, the unconditioned response – this is a ‘natural’ response. In the next stage, the conditioned stimulus (the bell) was introduced with the unconditioned stimulus (dog food) and the dogs salivated, the unconditioned response. In the final stage, once the conditioned stimulus (the bell) was introduced without the dog food, the dogs still salivated, the conditioned response – not a natural response for a bell being given at meal times instead of food (Atherton. 2011). Generalisation can also be seen in classical conditioning, as the conditioned stimulus, the bell in this case, could be changed to a bell with a different sound and the conditioned response would remain; although it would however weaken over a period of time, if the bell continuously changed (Gross. 1988). An example of everyday classical conditioning would be through the use of advertising. An advertisement comes on the television for a bar of chocolate – which you love. This arouses a feeling of hunger and craving for some chocolate.

One of psychology’s most important contributions of behaviourism was the theory of classical conditioning. Behavioural therapies came about in the 1950s as a result of this and many treatments are used today for mental health; behaviour moderation; phobias, and anxiety related conditions (Cardwell et al. 2004). Positive and negative reinforcement in operant conditioning has also been extremely useful when working with children who have additional needs or autistic spectrum disorders, as it enables maladaptive behaviour to be modified or reshaped. Government guidelines implemented within policies and procedures in childcare settings, have been based around the perspectives of behaviourism (Tassoni et al. 2010).

However, as the scientific experiments applied the use of animals in controlled laboratory conditions, this limits findings relevant to the real-life situations of humans, so is reductionist. Behaviourism does not take into account actions of the mind either, so psychology as a science is unable to analyse anything it cannot openly observe. (McLeod. 2007). Other arguments are that some therapies will fail once treatments stop, as in aversion therapy, and in the treatment of flooding the individual needs to be in good health and if they were to be removed from treatment too early, it would lead to further reinforcement of the phobia they went in for in the first place (Cardwell et al. 2004).

. The psychodynamic approach (Sigmund Freud 1856 -1939) believes that behaviour is part of unconscious thought processes and is imbedded by our childhood experiences. Stricker and Widiger (2003) talk about layers of the mind; the conscious, imagined as the smallest part – the tip of an iceberg, where all present awareness is; the preconscious, a larger part just below the water line of an iceberg, where memories and thoughts can be accessed easily by the conscious, and the unconscious, the largest part of an iceberg that is well immersed below the water, where repressed memories and inappropriate desires are held unavailable to us. Freud describes personality as being structured in to three different parts: Id, present from birth, works on instinct and the principals of pleasure; Ego, at age one – three years, keeps in touch with the real world and satisfies the Id in a realistic, appropriate way; and Superego, age three – six years, where our morality oversees our personality – in relation to our environment. According to Freud, another key aspect of theory is that of psychosexual development.

The stages of this theory are the Oral stage, where the mouth is the first area of pleasure; the Anal stage, where the second area of pleasure is the anus – this stage is important around toilet training, and the Phallic stage, where the focus of pleasure is with the genitals. This stage also encounters gender identity development and the Oedipus complex (where boys become attracted to their mothers and fearful of their fathers). If too much or too little satisfaction is received through these stages, we become obsessed and persist with the same demands during the rest of our life, resulting in neurotic behaviours (Cardwell et al. 2004).

One key study by Freud (1909) was on Little Hans, the child of a friend of Freud whom he never actually met. He was five years old. He became fearful of horses to the extent that he would no longer go in to the street. White horses, that wore blinkers and had black colouring around the mouth, were feared most. As Hans was in the phallic stage of his development and therefore in the Oedipus Complex, according to Freud, the belief was that he was actually afraid of his father – not the horses. This assumption was reached as Hans father wore glasses; these could be associated with the blinkers, and he also had a moustache; this could represent the black around the horse's mouth. (Cardwell and Flanagan. 2004)

The progression of Psychotherapy has been a substantial contribution of the psychodynamic approach, as Freud's psychoanalytical therapy, which sees mild psychiatric disorders in adults such as anxiety and eating disorders, and some depressions, as deeply hidden childhood problems. Patients are helped by creating an ideal environment in which to draw out these concerns into the conscious mind, where they can then be explored, tackled and resolved.

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Disadvantages of psychodynamic therapies are that treatment can be over many years and is therefore expensive and unrealistic. Therapies are not suitable for all psychological disorders, mainly just those that come under ‘neuroses’. Also, uncovering the past can cause more emotional stress than the current problem holds for the patient.

Behaviourism has contributed to therapies that we still use today. One of the therapies based on classical conditioning is Systematic Desensitisation (Wolpe. 1958). This method helps with phobias and anxieties by using deep relaxation and replacing a fearful reaction with a response that is unable to exist with fear. Another therapy is Implosion and Flooding where the individual’s phobic object is revealed with no reduction in anxiety and no relaxation. The purpose is that high levels of anxiety cannot be maintained for a long period of time, so start to diminish along with the realisation that nothing bad has happened to them, so the fear should dissipate. A technique called Aversion Therapy is also based on classical conditioning and is used to remove unwanted behaviours like alcoholism, smoking and drug addiction. These behaviours are associated with an unpleasant stimulus in an attempt to remove them. For instance, a cigarette may have a nausea-inducing substance which in turn pairs the feeling of nausea with tobacco. Cognitive-Behaviour Therapy is widely used and elements of it originate from behaviourism. It looks at the individual’s beliefs and rational or irrational thought patterns and then the consequences of these, if desirable or undesirable emotions come about leading to desirable or undesirable behaviour. Once these have been recognised, the therapist and the client work on the issues together. (Gross. 1987)

Contributions of the psychodynamic approach include Free Association, in which the individual allows feelings, thoughts and images to free-flow, with the therapist out of sight who will interrupt occasionally to get reflections with the implications of the associations. The theory is that the internal conflict will reveal itself in the associations. Boker (1992) believes psychodynamic therapy is also helpful to patients with schizophrenia, whilst taking phenothiazines, as this medication enables them to be more 'available' (Cardwell et al. 2004). Another contribution is Play Therapy, characterised by Sweeney and Landreth (2003) as child-centred play therapy. The therapist's objective is to allow the child to release their inner disturbances by bringing out the experiences through play rather than being the victim (McMonigle. 2008). It can be seen therefore that behaviourists treat existing problems; whereas in contrast, the psychodynamic approach wants to find the route of the problem. Both of these approaches have influenced modern practices.