The fight or flight syndrome

The fight or flight response was coined by Cannon and refers to the physiological reactions that prepare us for a strenuous efforts required by fighting or running away, (Martin, Carlson & Buskit, 2010, p 750). There is evidence for and against the modern man/women being ill because of the fight or flight syndrome. For example if the stress is short-term then there will be no adverse effects but if the stress is prolonged that individual could be vulnerable to illnesses; both psychological issues (depression) and physiological problems (heart disease). However, this is dependent on several factors that may act as a buffer against stress such as their self-esteem, coping strategies and other individual differences like personality.

Lazarus and Launier (1978) regarded stress as " a transaction between stress and the environment", (cited in Ogden, 2012, p 290). There are several physiological responses to stress such as heart rate increase, blood pressure rise, blood sugar level rise, digestion stopping and adrenaline release. These help the body to be alert and ready, therefore whether they flee or fight. Normally after the body is stable, but if the stress is prolonged then it has negative effects. For example, the digestion stopping may cause stomach ulcers; consistent blood sugar rise can cause diabetes and heart rate differences can cause coronary heart disease. This shows how much a person has changed from prehistoric times, where the only response was to fight or run away, to now where modern stressors are complex so this response is no longer appropriate and Cannon saw that it could make a modern person ill, (Martin, Carlson & Buskit, 2010).

The responses to stress link with Selye's General Adaptation Syndrome (GAS), which has three stages; the first stage is the alarm stage which

involves the autonomic nervous system. Then the resistance stage is reached and then the exhaustion stage, where the person/animal loses their ability to adapt and leaves them vulnerable to illnesses (Martin, Carlson & Buskit, 2010). This shows that the stress response will be advantageous in the short-term but if the exhaustion stage is reached it can have detrimental effects on that person. However, Selye's theory might not be valid due to generalisation problems; he carried out his study on animals, whose processes and responses are be different to humans (Martin, Carlson & Buskit, 2010).

There are two main groups of physiological changes. The first is sympathetic activation where a stressor triggers the nervous system in this region to produce adrenaline so this produces the fight or flight response. This activates hypothalamic pituitary adrenocortical (HPA) activity, this is similar to GAS, and this changes the carbohydrate stores and releases endorphins that act as pain relief ready to fight, (Ogden, 2012). This shows how the fight or flight responses in the body can be beneficial short-term.

There is evidence for and against the fight or flight response causing the modern man to be ill but the outcome is dependent on factors that could modify the effects. One example is personality; if they have a hardy personality (Kobasa, 1977, cited in Sanders & Suls, 1982) or if they strive when stressed it acts as a buffer against stress, (George, Everly & Lating, 2002). People with a type A personality (see stress as positive) are motivated by stress and succeed when in this state, (Friedman and Rosenman, 1959, cited in Hayes, 2000). Nevertheless, if the person's personality is opposite then they're more likely to get ill from stress, therefore helping to prove the

statement true. Additionally, their self-esteem can effect this too; a person who has low self-esteem and low global self-esteem (negative evaluation of oneself turns to self-doubt and self-rejection) are more likely to get stressed then a person with high self-esteem, (Schrami, Perski, Grossi & Simonsson-Sarnecki, 2010). These factors make a person less susceptible and therefore helps disprove whether fight or flight responses make people ill. However, some data for this was collected by questionnaire so the findings may not be valid due to social desirability bias.

Another factor that can act as modifier against stress is coping strategies. Selk (1973) stated that what makes us ill now is different to what made us ill before, for example more psychological problems occur now e. g. mental disorders (Esch, Stefano, Fricchione & Benson, 2002) then physical ones and it depends on how that person deals with their environment, (Klirts & Moos, 1974, cited in George, Everly & Lating, 2002). A lot of research has stated the importance of social support to act as a buffer against stress, and can help prevent burnout, (Etzion, 1984). For example, good communication with your partner can decrease marital problems and stress. Social support works by motivating the individual and adding need-fulfilment. Women have better interpersonal skills so seek social support and therefore are less prone to stress in this particular way. Norris and Murrel (1990) suggest that low social support and a stressful life event e. g. death of a loved one is more likely to cause long-term stress. However, they state the complexity of the term social support as there are many different varieties and of differing levels. Another coping strategy is to gain a new activity; this gets you out, having fun and keeping that person’s mind off the stressor(s) (Norris and Murrel,

1990). This shows that social support is important and lack of it can help to cause the negative effects of stress, (even more so when faced with a stressful life event). Therefore, suggesting that the fight or flight response can make someone ill in the wrong circumstances. However, other things must be taken into account – individual differences e. g. what strategy suits them best and if they have a new hobby.

Findings from studies show that both cognitive diathesis and the stress component (more environmental causes) go together to help suggest why people get stressed. Research shows that stressful life events trigger the susceptibility to stress; this put with other more biological factors like low self-esteem can make the person more vulnerable. This shows how the diathesis-stress model can help explain that it’s not just one factor that contributes to the fight or flight response making an individual ill, it’s a multitude of factors (both environmental and biological) that help explain the negative effects of stress. If it’s biological causes then some coping strategies used to combat the responses of fight or flight will not work as effectively as treatments that focus on genetic influences e. g. a hereditary hardy personality. However, it might be too early to come to this conclusion because more research needs to be done in this area, but it’s an effective explanation that takes an eclectic approach to explain that the fight or flight can have its benefits but with the wrong diathesis and vulnerability to stress can show that a person can be made ill, (Zvolenskya, Kotovb, Antipovac & Schmidtd, 2003).

Nevertheless, there might be a problem with the fight or flight response itself not the modern day man. It hasn’t been updated even though our stress

response has changed and ignores research carried out since it was coined by Cannon in the 1920s. It mischaracterised the order in which the responses occur. A new sequence by Gray can explain the responses better for more modern times, it begins with the freeze response – so the person/animal remains undetected. Then an attempt to flee and then a chance to fight occurs. Another model is the ‘ stop, look, listen’ approach which might be more valid today and is used in many military operations, which also relates to the freeze response. Additionally, the fright response (tonic immobility) or in other words ‘ playing dead’ is reached. This updates the fight or flight response to be freeze, flight, fight or fright. This revelation shows that there is a problem with the fight or flight response, that it’s responsible for illness in the modern day man/women encountering stress and that it needs adapting to new scenarios that could be encountered now, (Does fight or flight need updating?).

The evidence suggests that the fight or flight response can be beneficial, but with the wrong circumstances and if the stress is prolonged then it can make an individual ill. Nevertheless, this can be affected by certain modifying effects for example, if the person has suitable/effective coping strategies. Other aspects of the argument, like whether the fight or flight response needs updating is important to take into account. It’s still unclear what causes stress – is it biology or environmental causes? Therefore, more research needs to be done on the causes so the treatments can be looked at for reliability and validity. Additionally, then more information will be available on whether the fight or flight response does cause illnesses or is it a positive relationship.

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