

MATCHING PSYCHOTHERAPY TO THE UNIVERSITY POPULATION.

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Introduction - SDT: Self Discrepancy Theory

Self is a cognitive structure that allows self-reflection.

The Self is constituted by a set of attributes and hypotheses about oneself and others and is the product of cognitive development and socialization (Leary, 1995; Moretti & Higgins, 1999).

Ideal Self (Harter, 1995) refers to the representations the individual has constructed of what he/she wishes to be or feel, or of what he/she should be; the evaluations of the real self-concept or Real Self are achieved by comparison with the Ideal Self.

Introduction - SDT: Self Discrepancy Theory (II)

Rogers (1961/1985) introduces for the first time in the clinical literature the concept of discrepancy between RS and IS, advocating that the magnitude relates to the degree of disturbance.

The central premise of SDT is that the individual experiences psychological disturbance when his/her RS is substantially discrepant from his/her internalized standards called "self-guides (Higgins, 1987).

Introduction - SDT: Self Discrepancy Theory (III)

The congruencies and/or discrepancies from the final aspired state have an emotional significance and motivational functions (Boldero & Francis, 1999).

Research has confirmed that Self-discrepancies correlate with global self-esteem and with psychological disturbance; and that these discrepancies constitute important vulnerability markers (Boldero & Francis, 2000; Bosson et al., 2003; Moretti & Higgins, 1999).

Self Discrepancy Theory : Previous Results

When MCMI-II was used to assess the non-clinical population the profile obtained was similar in all studies:

- *Histrionic BR > 74* (Dubro et al., 1998; Millon, 1983; Wetzler et al., 1990; Brandão, 2005 - 26.9%) e *BR > 84* (Reich & Throughton, 1998)
- *Narcissistic BR > 74* (Dubro et al., 1998; Millon, 1983; Brandão, 2005 - 29.5%) and *BR > 84* (Wetzler et al., 1990)
- *Compulsive BR > 74* (Dubro et al., 1998; Millon, 1983; Wetzler et al., 1990; Brandao, 2005 - 59%) and *BR > 84* (Brandão - 37.2%)
- *Aggressive-Sadistic BR > 74* (Brandao, 2005 - 28.2%)
- *Anti-Social BR > 74* (Dubro et al., 1998; Millon, 1983; Wetzler et al., 1990)

Self Discrepancy Theory : Previous Results (II)

The results for the RS were that the Means of the Global Index (GI), Traits Index (TI) and State Index (SI) of the non-clinical sample were significantly lower than the Means of those Indices in the clinical sample:

$$t(116) = - 5.74, p < .01$$

$$IG (49.13 < 61.)$$

$$t(116) = - 4.92, p < .01$$

$$IT (55.73 < 65.85)$$

$$t(116) = - 5.99, p < .01$$

$$IE (39.59 < 55.44)$$

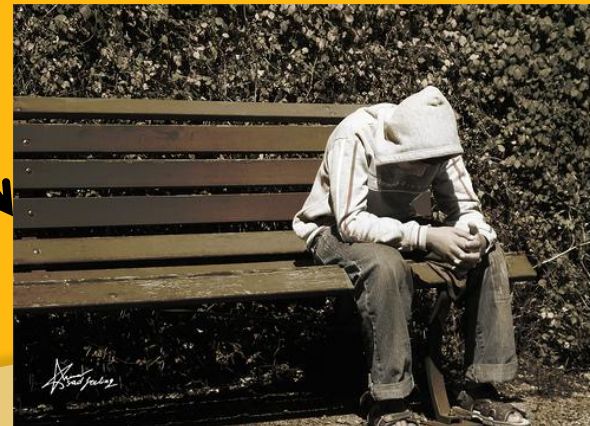
Study I

Methodology

Non-clinical Sample
(N=78)



Clinical Sample
(N=40)

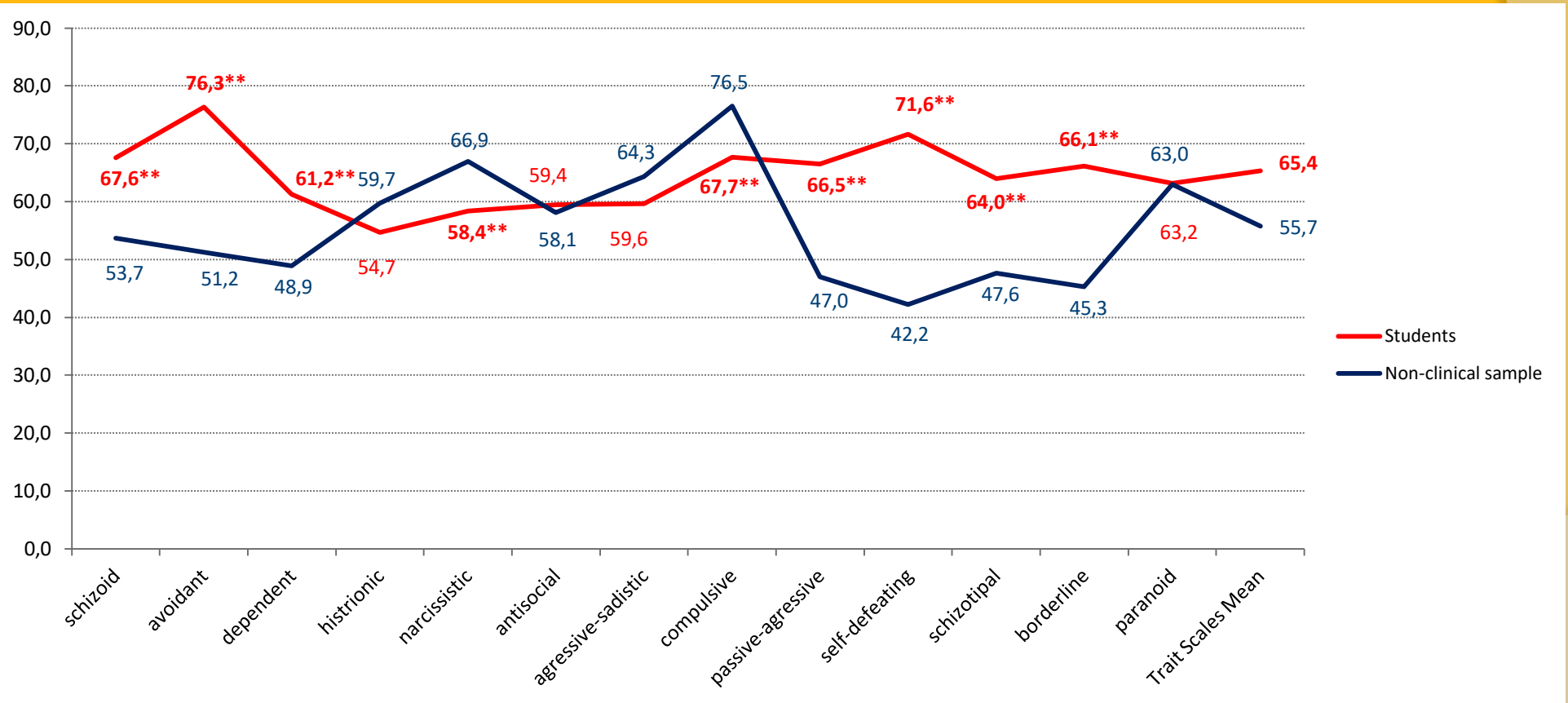


Students Sample
(N=314)



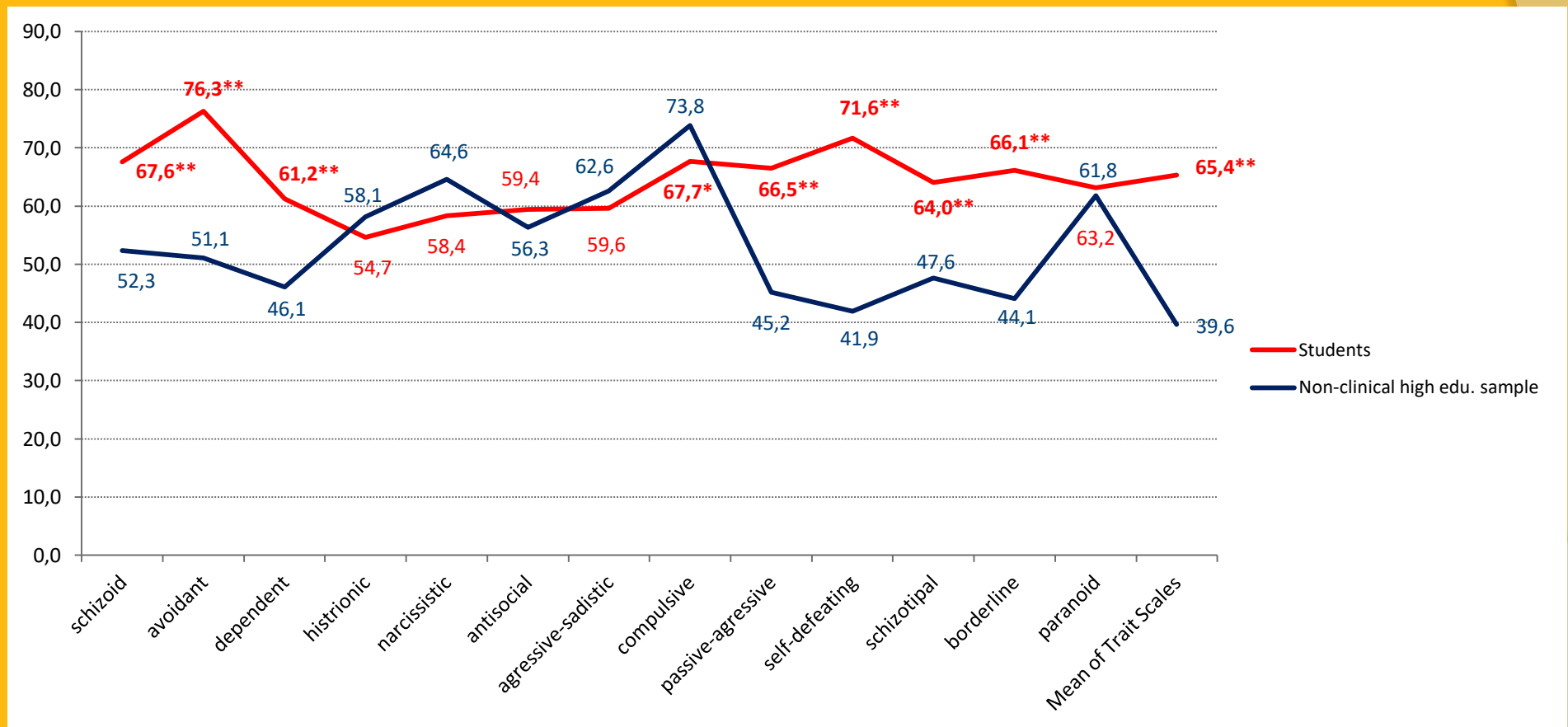
Results

Students vs. Non-clinical sample



Results (II)

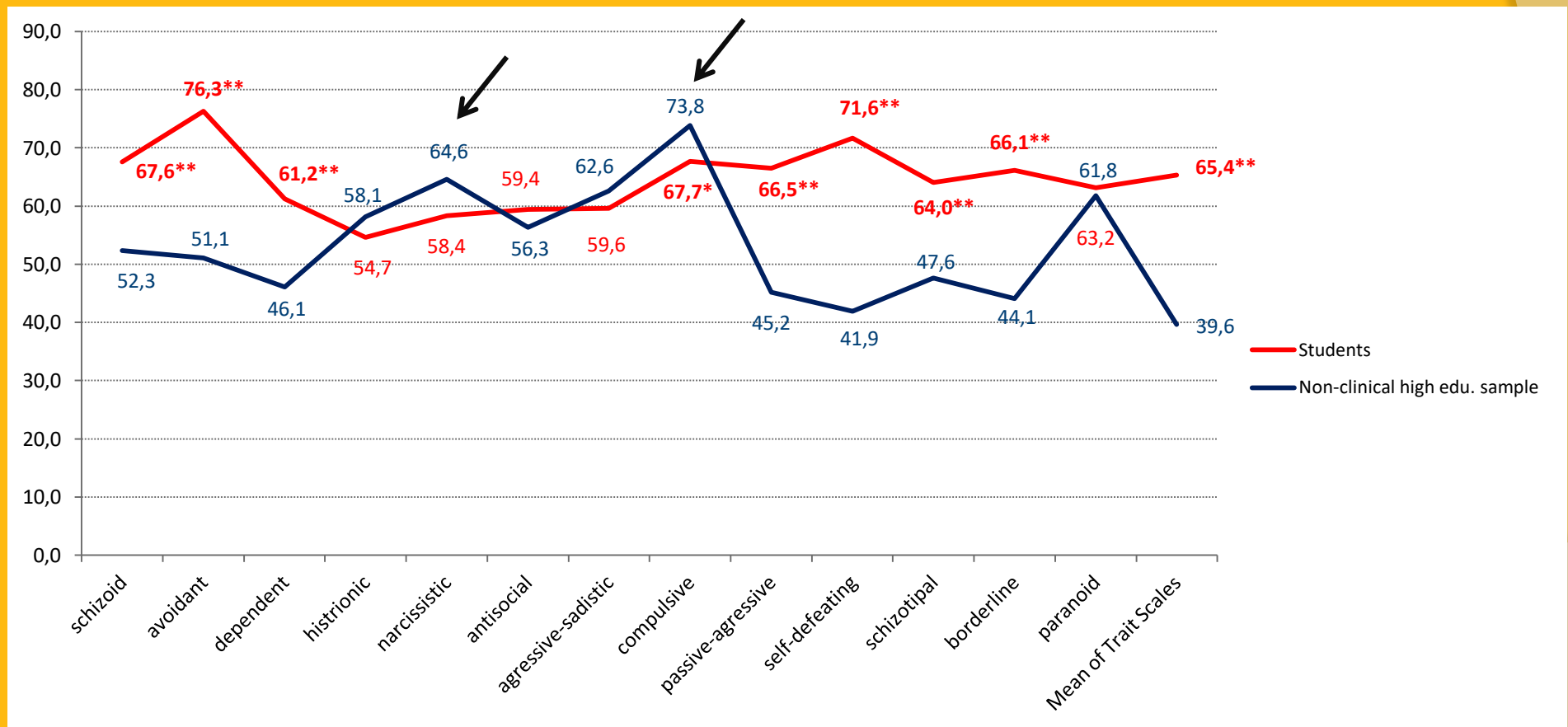
Students vs. Non-clinical high education sample



N=52 Non-clinical High Education Sample

Results (II)

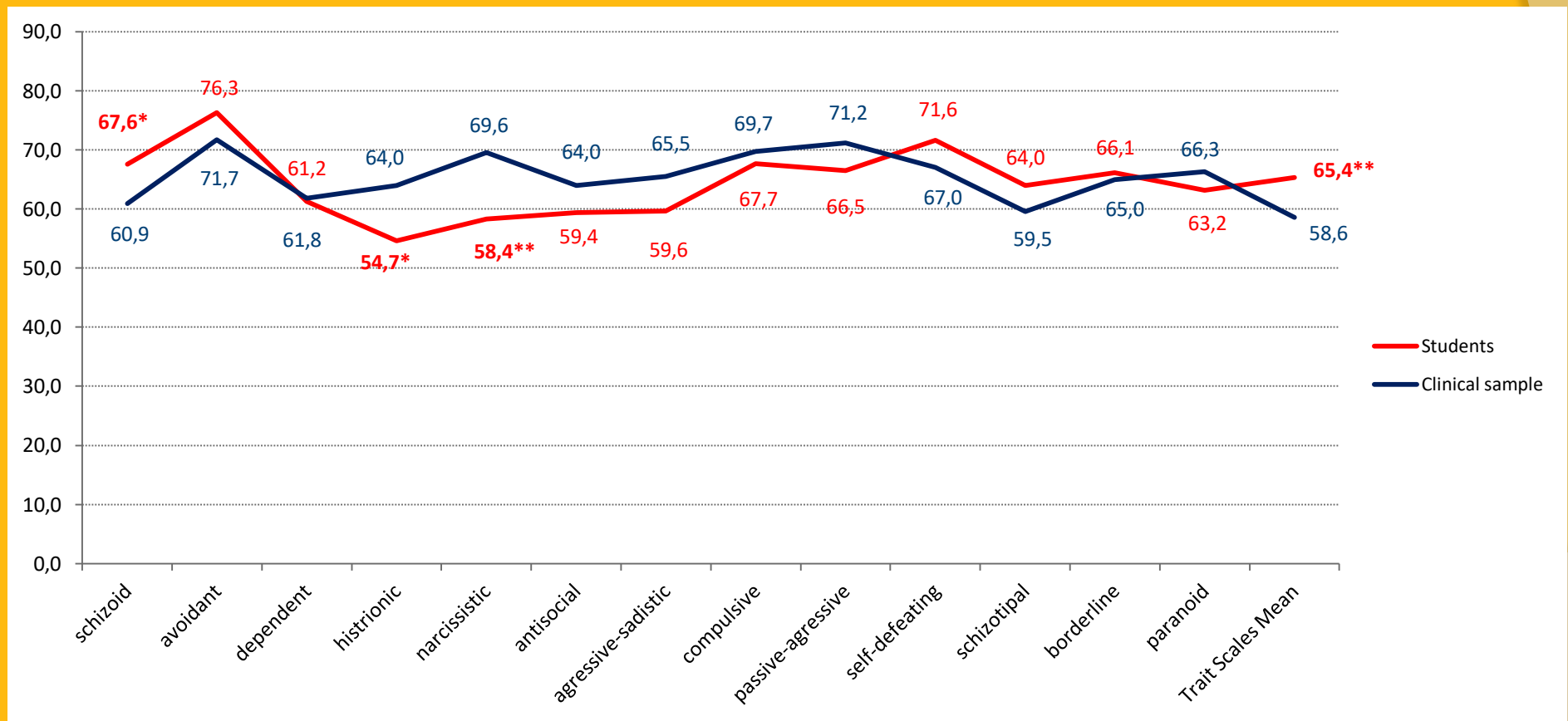
Students vs. Non-clinical high education sample



N=52 Non-clinical High Education Sample

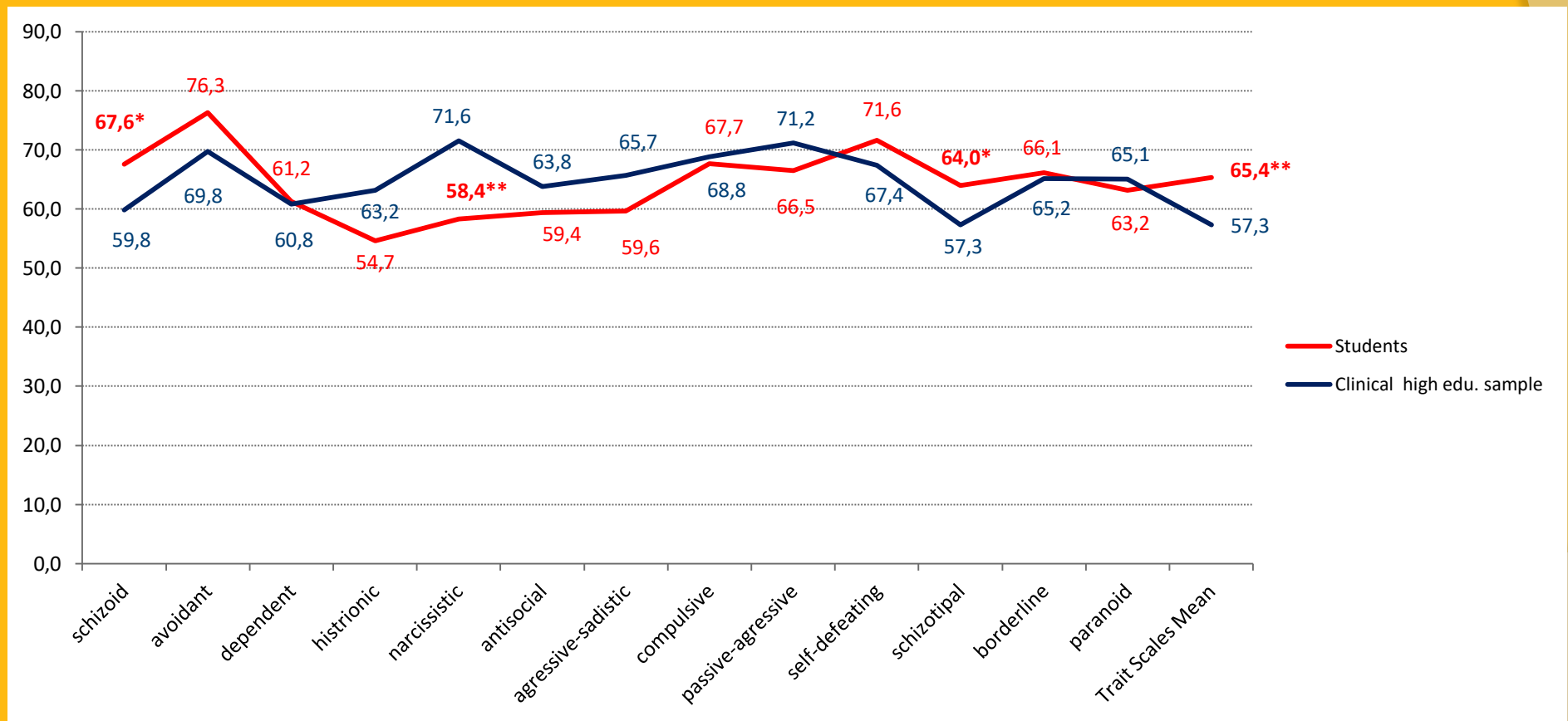
Results (III)

Students vs. Clinical sample



Results (IV)

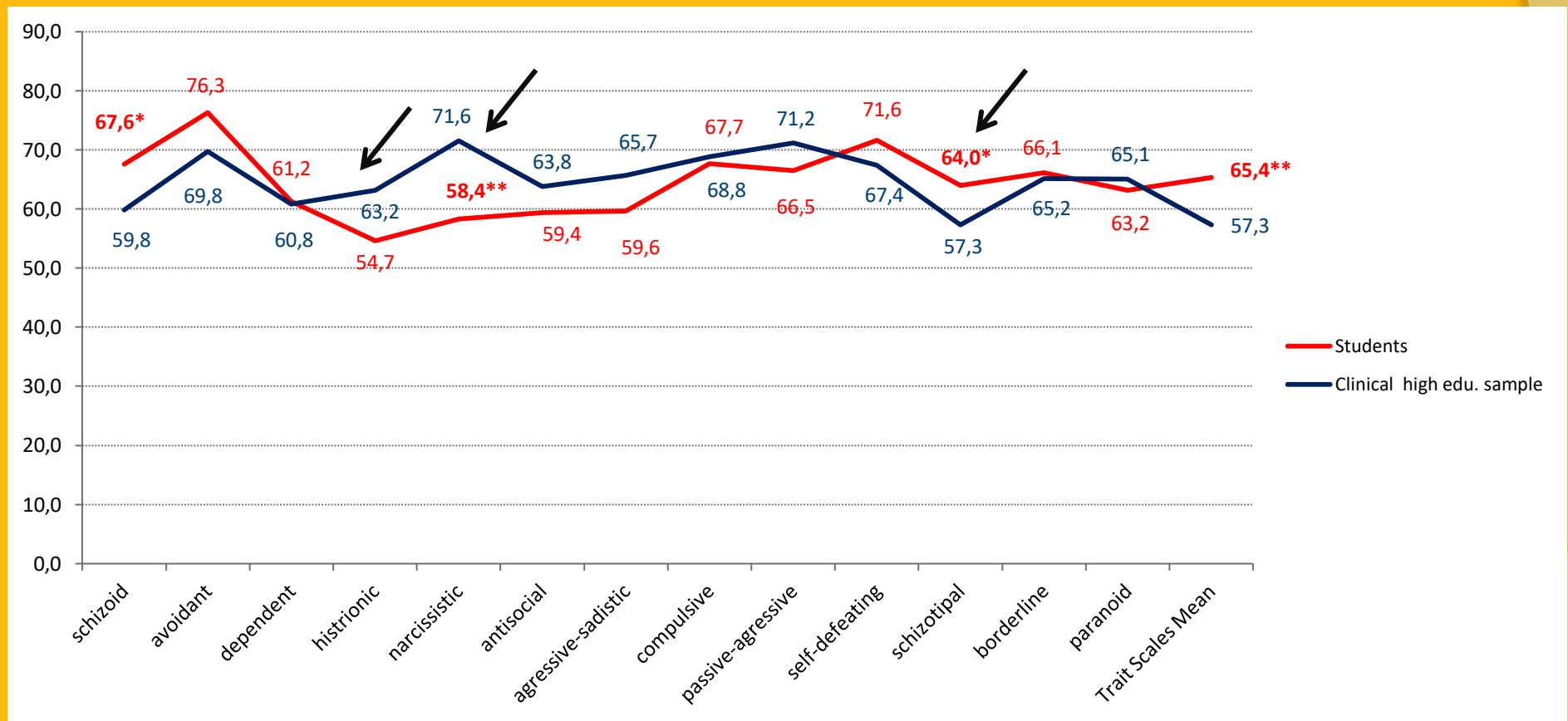
Students vs. Clinical high education sample



N=32 Clinical High Education Sample

Results (IV)

Students vs. Clinical high education sample



N=32 Clinical High Education Sample

Study I -Discussion

“High education” and science-student populations seem to have lower degrees of narcissism and less obsessive-compulsive tendencies.

The clinical science students group, appear to have higher tendency to have schizotypal personalities, and much lower degrees of narcissism when compared to other clinical groups with “high education”.

Study I -Discussion

Therapists must be aware of these characteristics to work with students in increasing:

- Self-esteem,
- Interpersonal capacities, and
- Skills related with study:
 - learn to increase concentration and to focus,
 - learn to increase perseverance,
 - learn to prioritizing strategies,
 - Among other skills

Study II

Methodology

Students Sample
N=41

Before Therapy

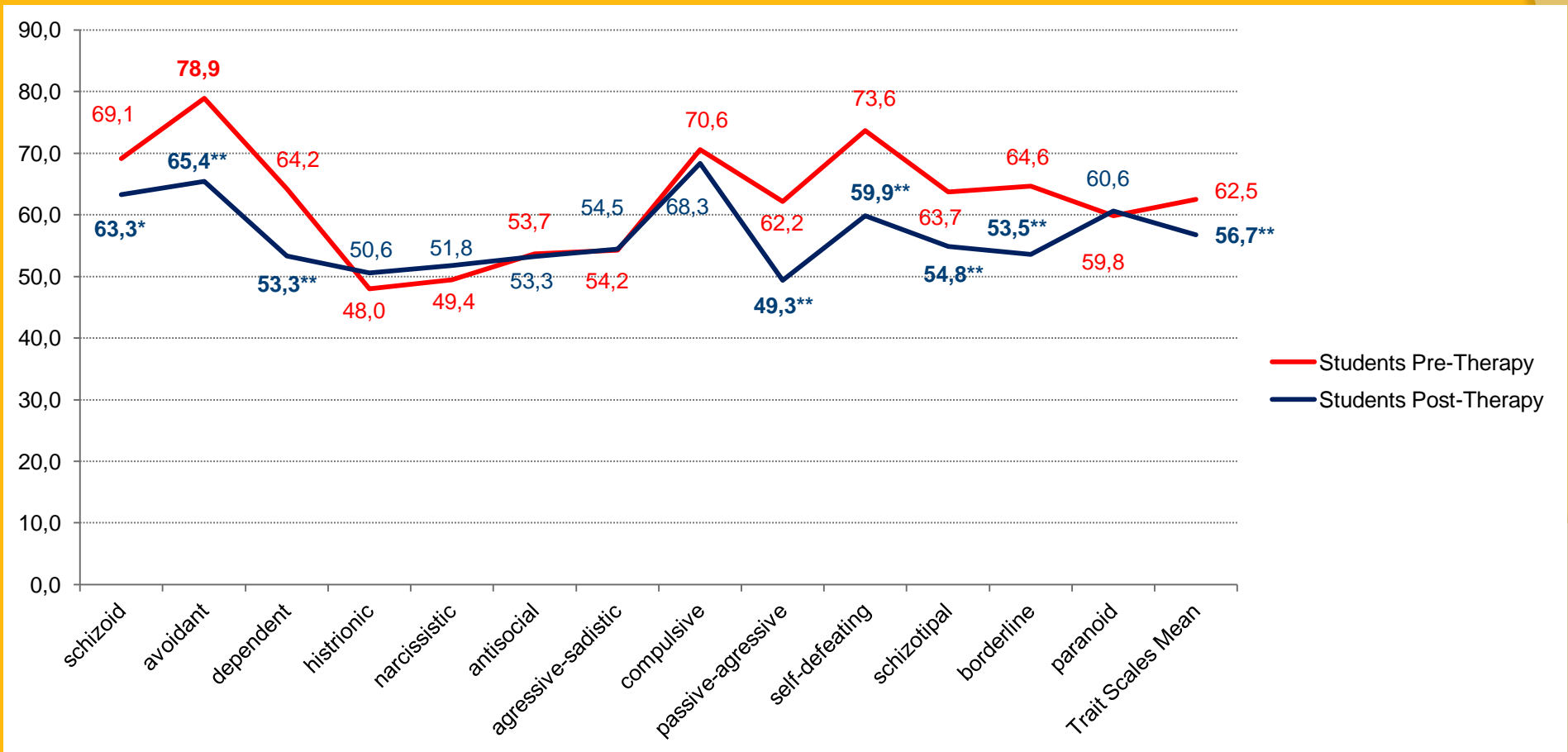


After Therapy



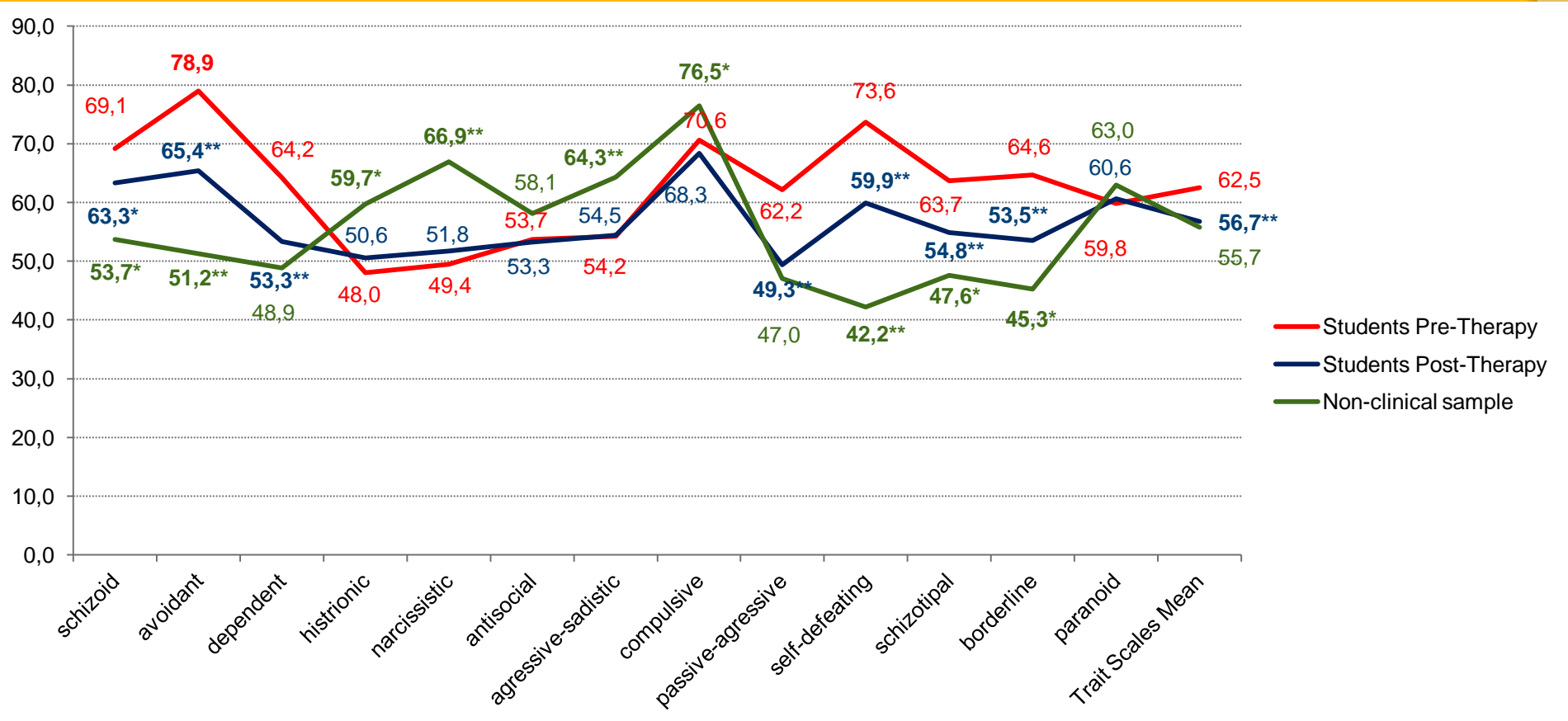
Results

Students Pre-Therapy vs. Post-Therapy



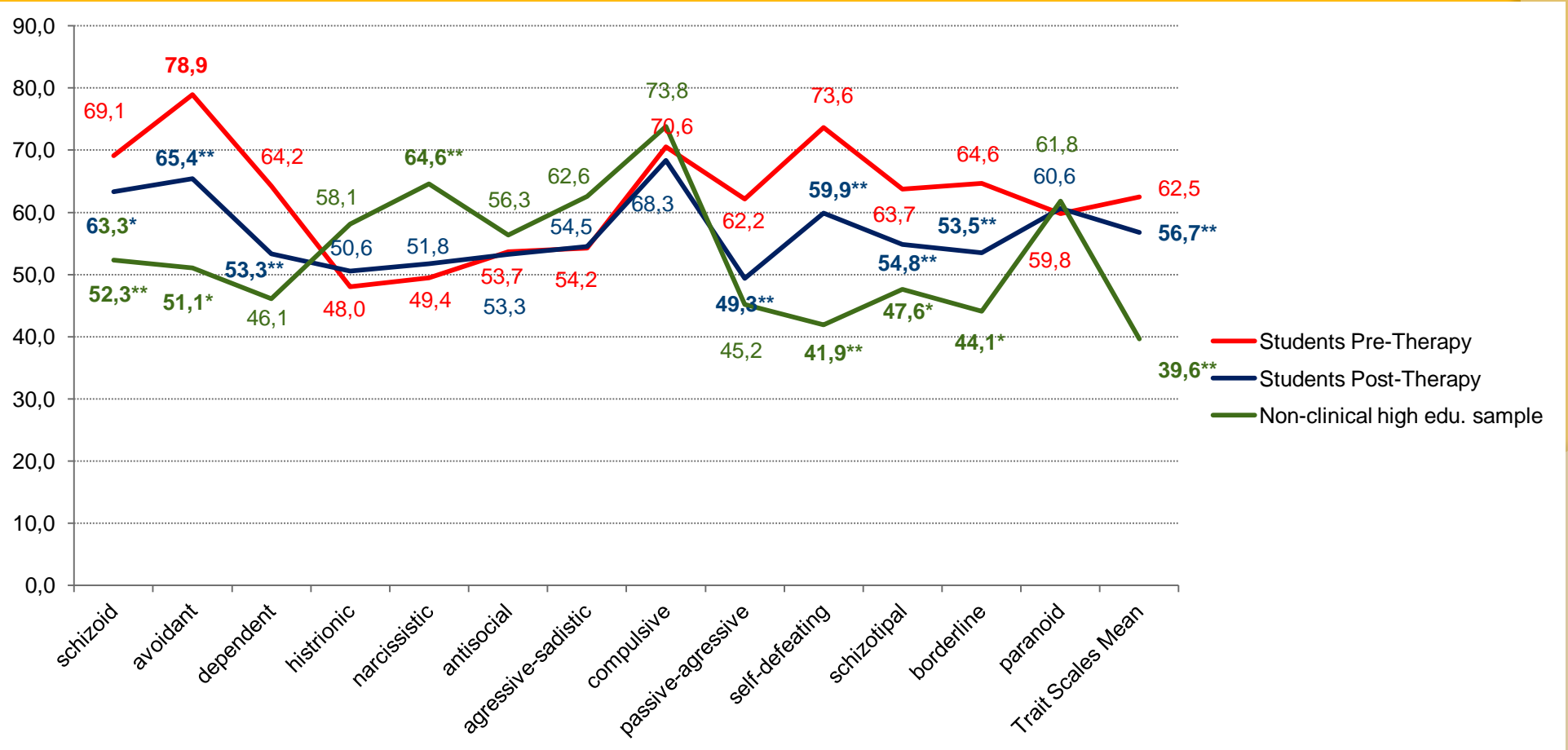
Results (II)

Students Pre-Therapy vs. Post-Therapy Students Post-Therapy vs. Non-clinical sample



Results (III)

Students Pre-Therapy vs. Post-Therapy
Students Post-Therapy vs. Non-clinical high education sample



Study II -Discussion

Therapy demonstrate to be effective in changing the attitudes of students about their lives and their own Real Self.

Nevertheless, self-esteem must be a key aspect to focus on this population, especially about respect, love and value oneself.

These students seem to continue to be very different from the general population, having an increased tendency to be avoidant (socially and otherwise), lower abilities to affirm themselves, and to enter easily in a self-deprecating mode.

Final Remarks

Nerds?! How much of truth is in this preconception?

Obsessive thought, different quantity or different quality?

How much therapy can change?

How should therapists be attentive to this information to foster development?

Thank you!

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