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**АНГЛИЙСКИЙ ЯЗЫК
ДОМАШНЕЕ ЧТЕНИЕ ДЛЯ ПСИХОЛОГОВ**

Практическое пособие

для студентов специальности 1 – 23 01 04
«Психология»

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Предисловие

Данное практическое руководство предназначено для студентов факультета психологии и педагогики специальности 1 – 31 01 04 «Психология» и ставит целью оказать помощь студентам в развитии навыков чтения текстов по широкому профилю специальности, направленных на формирование умений понимать языковой материал текстов и обеспечение переработки информации прочитанного.

Пособие включает 2 раздела. *Первый раздел* ориентирован на развитие навыков чтения и обсуждения прочитанных текстов, а также на повторение грамматических правил. *Второй раздел* направлен на самостоятельную работу студентов по предложенным текстам.

Тексты предназначены как для аудиторной, так и для самостоятельной работы студентов на занятиях и в качестве домашних заданий.

Тексты отобраны из оригинальной научно-популярной литературы, сопровождаются упражнениями с целью интенсификации процесса обучения чтению, контроля понимания материала, активизации профессионального словаря, развития навыков устной речи, а также совершенствования слухо-произносительных и грамматических навыков.

Unit 1. Five Ways to Fight Depression

Ex. 1. Some sentences have been removed from the following text. Find the points where they fit.

If you feel depressed, it's best to do something about it – depression doesn't just go away on its own. In addition to getting help from a doctor or therapist, here are 5 things you can do to feel better.

– Exercise. Take a 15- to 30-minute brisk walk every day – or dance, Jog, or bike if you prefer. People who are depressed may not feel much like being active. 1 _____. Once you get in the exercise habit, it won't take long to notice a difference in your mood. In addition to getting aerobic exercise, some yoga poses can help relieve feelings of depression. 2 _____. Two other aspects of yoga – breathing exercises and meditation – can also help people with depression feel better.

– Nurture yourself with good nutrition. Depression can affect appetite. One person may not feel like eating at all, but another might overeat. 3 _____. Proper nutrition can influence a person's mood and energy. So eat plenty of fruits and vegetables and get regular meals (even if you don't feel hungry, try to eat something light, like a piece of fruit, to keep you going).

– Identify troubles, but don't dwell on them. Try to identify any situations that have contributed to your depression, when you know what's got you feeling blue and why, talk about it with a caring friend. 4 _____. If there's no one to tell, pouring your heart out to a journal works just as well. Once you air out these thoughts and feelings, turn your attention to something positive. 5 _____. Feeling connected to friends and family can help relieve depression. (It may also help them feel there's something they can do instead of just watching you hurt.)

– Express yourself. With depression, a person's creativity and sense of fun may seem blocked. 6 _____. Take time to play with a friend or a pet, or do something fun for yourself. Find something to laugh about – a funny movie, perhaps. Laughter helps lighten your mood.

– Look on the bright side. Depression affects a person's thoughts, making everything seem dismal, negative, and hopeless. If depression has you noticing only the negative, make an effort to notice the good things in life. 7 _____. Consider your strengths, gifts, or blessings. Most of all, don't forget to be patient with yourself. Depression takes time to heal.

A. Talking is a way to release the feelings and to receive some understanding.

B. Try downward-facing dog or legs-up-the-wall pose (you can find these poses on websites).

C. If depression has affected your eating, you'll need to be extra mindful of getting the right nourishment.

D. Try to notice one thing, then try to think of one more

E. Take action to solve problems. Ask for help if you need it.

G. By exercising your imagination (painting, drawing, doodling, sewing, writing, composing music, etc.) You not only get those creative juices flowing, you also loosen up some positive emotions.

F. But make yourself do it anyway (ask a friend to exercise with you if you need to be motivated).

Ex. 2. Find the words in the text that the following definitions refer to.

miserable, gloomy; suitable, appropriate; influence; limited; food; state of your feelings; help, support; think at length about smth; disappear; quick, energetic; sad, depressed; lessen or remove; make meaningless drawings; set free, liberate

Ex. 3. Are the following statements True or False. Support your answer with quotes from the text.

1. Depression is an incurable illness.
2. You can overcome depression if you exercise with a friend.
3. Meditation can be a way of fighting depression.
4. People suffering from depression are never overweight.
5. You should let go of your problems without identifying them.
6. Depression can cause problems in the family, too.
7. There is no need for doing any creative activities if you are depressed.
8. In a depressed person's mind everything looks depressing.

Ex. 4. Role play: Follow the instructions and act out the following situation with A partner.

Student A: You have just read an article about how to fight depression. Your friend has been under the weather lately and you are worried that he/she might suffer from depression. Enquire about how he/she feels and give him/her advice on how to deal with the situation.

Student B: You have split up with your girl/boyfriend and since then you have been feeling depressed. You can't eat, or sleep, you don't go anywhere, and you are bored all the time. You think this is the end of the world. Your friend is worried about you and is trying to give you advice.

Ex. 5. You work for a teen magazine and you got a letter from a boy who is asking for your advice. He's lost ten kilos in two weeks, given up his favourite sports activities, has very bad marks at school. His parents are always away and they don't care about him. Write an advice letter to him.

Unit 2. Laughter Yoga

Ex. 1. Read the text. Four sentences have been removed from the following article about Laughter Yoga. Reconstruct it by finding where they fit. There is an extra sentence that you do not need to use.

A. As a result you do not need to be happy, have a sense of humour, or even have a reason in order to laugh.

B. Started with just five people in 1995, today it is a global phenomenon with over 6000 clubs in 60 countries.

C. It combines laughter exercises with yoga breathing which brings more oxygen to the body and brain making one feel more energetic and healthy.

D. This is often reflected in increased sales, productivity and a more harmonious workplace.

E. Scientific research shows that laughter can help resolve many major workplace issues.

Laughter Yoga is a unique concept developed by Indian physician, Dr. Madan Kataria. It is fast sweeping the world and is truly a life changing experience. 1 _____. The concept is based on a scientific fact that the body cannot differentiate between fake and real laughter. One gets the same physiological and psychological benefits. Safe, easy and scientifically proven, Laughter Yoga is a lot of fun. 2 _____. 3 _____. It reduces stress resulting in improved physical and mental health and quality of work, better communication, team building skills and interpersonal relationships. Results of Laughter Yoga programs introduced by many companies around the world indicate that employees become more committed and efficient and learn more easily. 4 _____.

Ex. 2. Say if sentences are true, false or not mentioned? Read the complete article again and decide whether the following statements are True, False or Not Mentioned. Support your answers with quotes from the text.

1. If someone tries laughter yoga, their life will definitely change.
2. You must laugh and do yoga poses at the same time if you want to do laughter yoga.
3. Laughter yoga exercises involve a lot of clapping and shouting.
4. Laughter yoga is good for your body and mind as well.
5. Laughter yoga is practiced all over the world.
6. Forced laughter is not as good as spontaneous laughter.
7. This technique has not been practiced in business companies.
8. Scientists have been examining the effects of laughter for a long time.
9. Laughing too much may have side effects.
10. If workers do laughter yoga before they start work, they will feel better and the production will increase.

Ex. 3. Discuss the meaning of the following phrases with a partner or in a small group, and use them in the given sentences.

- laugh like a drain;
- have the last laugh;
- laugh your head off;
- not know whether to laugh or cry;
- laugh smth/smb out of court;
- be a laugh a minute;
- a belly laugh;
- laugh in smb's face;
- Don't make me laugh.

1. "You never know, Pete might help out." "Pete? Help out? _____!"
2. It's not often you hear the kind of jokes that give you _____.
3. They fired her last year but she _____ because she was taken on by their main rivals at twice the salary.
4. He _____ when he read the letter.
5. When they announced that my flight was delayed for ten hours, I didn't know _____.
6. At the meeting, her proposal was _____.
7. "A two-hour meeting with Nigel Owen? I bet that was fun." "Oh, it _____."
8. He asked them to put out their cigarettes but they just _____.

Unit 3. Success

Ex. 1 Study vocabulary and match definitions to these words.

1. Distraction. 2. Pursue. 3. Vivid. 4. Highly-driven. 5. Loser, 6. Shattered. 7. Comfort Zone. 8. Investment. 9. Reckless, 10. Take a leap. 11. Attempt. 12. Focus

A. to try to achieve something over a long period of time

B. to completely destroy someone's hopes, beliefs or confidence

C. when you spend a large amount of time, energy, emotion on something

D. not caring or worrying about the bad or dangerous results.

E. trying to do something, especially something difficult.

F. someone who is never successful in life, work, or relationships.

G. something that stops you from paying attention to what you are doing.

H. to give special attention to one particular person or thing.

I. to have a lot of motivation.

J. very clear, seeming real.

K. go for something, take a chance.

L. the range of activities or situations that you feel happy and confident in.

7 Ways to be Successful

Many people want to be successful in life, but it's easier said than done. There are so many distractions in life that it can be challenging to our goals. By keeping the following advice in mind, however, you can increase your chances of becoming successful in whatever you choose to pursue.

1. Imagine yourself being successful. Einstein said that the _____ is more important than _____. The more vividly and accurately you imagine your success, the easier it will be to be successful.

2. Surround yourself with other people who are successful. When you're surrounded with people who are highly-driven, it's _____.

3. Stay away from distractions. There are so many distractions in this world that you really don't need. Whenever you are doing something which is _____ or productive, imagine yourself as a loser with shattered dreams _____ and yourself _____.

4. Set a time for when you want to achieve your goal. If you don't know when you will achieve your dream then you will never know when you will achieve it.

5. Take risks. Step out of your comfort zone. Successful people think _____ and _____ big. It can be a scary thing to do, but if you don't, then will you ever be successful? Successful people make big investments (in their careers, in their businesses, in their education) and all investments involve risk. But don't be reckless. Study your risks, make sure the _____ are in your _____, then take a leap.

6. Be persistent. Don't _____ up. If your first attempt didn't work, don't _____. Always keep in mind the following sentence: "If you don't give up, you cannot _____."

7. Remove fear and doubt from your way of thinking, and focus on keeping _____ in every situation. You will be more effective if you keep a positive mind and stay focused on your goal. Remember, you can be your own best _____ or your own worst _____.

Ex. 2. Answer the questions with your partner.

1. What is this article about?

2. Why is it difficult to be successful? Describe a time when you had a difficult time being successful.

3. Can you describe the 7 ways to be successful? Why is each a good idea?

4. Which do you think is the most important way? Which is the least important? Why?

5. What are some other things you can do to be successful? Try to think of 3 more ideas together:

Ex. 3. What would make you feel the most successful? Rank these successes in order from 1(the best) — 8 (not so amazing). Use each number once!

Getting a job, looking attractive, having children, accomplishing a goal, getting a promotion, receiving an award, getting married, winning a race.

Ex. 4. Talk about your ideas with your partner.

Ask: "Which would make you feel the most successful?", "Which would make you feel the least successful?", "What would make you feel the next most/least successful?"

Talk more: What are some things not listed that make you feel successful?

Ex. 5. Free Discussion. Discuss these questions with your partner.

1. What is your biggest success in life? What small successes do you have every day?
2. Would you sacrifice happiness, love, or family for the opportunity to be successful? Why/Why not?
3. Who do you think are the three (3) most successful people in history? Why do you consider them the most successful?
4. What would you do with 5 Million dollars?

Ex. 6. The Secrets of Success. Read each statement and discuss your feelings with your group. Explain your opinion.

1. Money is the best measure of success.
2. Happiness is the best measure of success. Do whatever makes you feel good.
3. Finding a good partner is the best measure of success. Having a beautiful, interesting, and fashionable boyfriend or girlfriend means we must be successful.
4. Success is winning at whatever you decide to do.
5. Success is conquering oneself and having control of all emotions and desires.
6. Success is getting the respect of other people.

Unit 4. How to Be Yourself

Ex. 1 Read and translate the text.

It's a good idea to be yourself, not only because everybody else is taken, but because trying to be anything else doesn't usually get you very far. But how do you do *it*?

First, *you* have to understand what you have unlearned about yourself. This process can be disheartening, as you remember past decisions where you had the chance to be yourself but instead chose to be something different.

Since trying to be anyone other than yourself is usually ineffective, why not begin by deciding to do only what is true to your own inner compass? If you did it for just one day, what would that day look like?

There are a few schools of thought that say you are incapable of making good decisions on your own; that you are inherently evil and must continuously struggle against your true nature. You are destined to lose without some kind of intervention.

But what if your true nature were good? Sure, you've screwed up with the best of them, but that doesn't mean you are destined to make bad decisions. Aren't you capable of being true to what you believe in? Aren't you capable of being a good self?

We all know at least one bitter, negative person. *My* theory is that most bitter people are not being true to *themselves*. My guess is that somewhere along the way, they took a wrong turn they've always regretted, and they take out there is appointment on others. You know now there's always ONE GUY who tells you you're stupid for not knowing how to do something? To be yourself, you have to be able to ignore him.

The last thing you want is to be bitter, but the second-last thing you want is regret. To avoid regret, you have to make active decisions I think moving forward is better than remaining stationary. And I also think you have to show people you care about them – merely thinking nice things doesn't help anyone.

Being yourself is risky. Something could go wrong, and then whose fault would it be? (This is another reason why it can be easier to let other people make your decisions – then you can blame them when it doesn't work out).

But in the long-run, you know you're capable of being a good self. You know you're capable of taking the risk. Even if some people don't understand, you can find a way to pursue the life and work you've always wanted. And you can be yourself, whoever you are, today.

Ex. 2. Identify, in the text, four aspects (positive or negative) of “being yourself”.

Ex. 3. What do the words in italic refer to in the text?

a) it; b) you; c) my; d) themselves; e) him.

Ex. 4. Find evidence in the text. (15 %)

- 1) Most of the times imitating the others doesn't have good results for us.
- 2) Analysing what we did in the past can be painful.

- 3) Some Psychologists say that we can't succeed without someone's help.
- 4) Some people are resentful because they made wrong decisions in the past.
- 5) We should ignore those that insult us.
- 6) Being yourself has its own risks.

Ex. 5. Find the synonyms of the following words in the text. (5 %)

- a) disappointing, b) inefficacious, c) bad, d) disillusionment, e) accuse

Ex. 6. Complete the sentences with derivative words. Write only the letters and the new word

- 1) Susan's _____ is very strong. (person).
- 2) It was a _____ to me to see how badly he behaved. (disappoint).
- 3) He apologized for his _____. (sensitive).
- 4) John is a _____ driver. He has already had several accidents. (care).
- 5) This kind of behavior is not socially _____ in some countries. (accept).
- 6) To have some information about body language can be very _____ when you travel to other countries. (use).
- 7) I don't understand these instructions. They are very _____. (confuse).
- 8) You shouldn't be _____ to older people. (respect).
- 9) She is a very _____ person. (interest).
- 10) He is _____ for the security of this shop. (responsibility).

Ex. 7 Your new schoolmate is very introverted and doesn't talk to anyone. You want to help, but don't know how. Write a letter to a magazine asking for some advice.

Unit 5. Phobias

Ex. 1. Read and translate the text.

Everyone is afraid of something. Some of us are afraid of dogs, snakes, darkness and even babies. This kind of fear is called Phobia. A phobia is a very strong irrational fear or hatred of something. You can see lot of people having a kind of phobia. Maybe you have one.

Some phobias are very interesting, some or them are; Ailurophobia – fear of cats, Anglophobia – fear of England, Aurophobia – fear of gold, Bibliophobia – fear of books, Chaetophobia – fear of hair, Chionopliobia – fear or snow, Ecophobia – fear of home, Logophobia – fear of words, Nomatophobia – fear of names. The names of these phobias are also interesting, aren't they?

Some phobias can change our lifestyles. For example, if you have Dondrophobia (fear of trees), you can not walk around the forest or even in the garden. Or, if you have Heliophobla (fear of the sun), how can you go outside in the daylight! Or, if you are afraid of speaking (Lalophobia), can you make a presentation in the class! So, some phobias can affect some people in an unpleasant way.

Once I have met a man, Adam. He has Cynophobia (fear of dogs). I asked some questions about the reason of his phobia. He told his story. He said. "When he is a student, he goes home on foot. There aren't school buses then. So, one day he is walking his home. Tom and Mary are with him. On their way, they see a dangerous big dog. It begins to bark at them. They are afraid of the dog. So, they begin in run, the dog follows them. He falls over and cuts my knee. And that big dog comes and bites his leg. Since then he is afraid of anything barking. And he is not a friend with Tom and Mary anymore."

I wonder if there is a phobia about English language. Perhaps, that's grammorphobia.

Ex. 2. Match the words with the definitions.

- | | |
|------------------|---|
| ... reason | a) not based on clear thought or reason; |
| ... bark | b) an event an which you describe or explain a new product or idea; |
| ... presentation | c) you make someone feel strong emotions; |
| ... gold | d) a valuable soft yellow metal that is used to make coins, jewellery etc; |
| ... affect | e) a large area of land which is covered with Trees; |
| ... irrational | f) why someone decides to do something, or the cause or explanation for something that happens; |
| ... forest | g) when a dog barks, it makes a short loud sound or series of sounds. |

Ex. 3. Answer these questions.

1. What does phobia mean?
2. What is Ecophobia?
3. What can't you do if you have Anglophobia?
4. What is the name of Adam/s phobia?
5. How many people are there in the story?
6. What is grammarphobia?

Unit 6. Body Language

Ex.1. Read and translate the text.

Body language is both the most basic, fundamental form of expression used by human beings to communicate with one another, and at the same time a part of a highly sophisticated and culturally specific system of coded signals, in which bodily and facial movement play an important part as verbal communication. For example a baby grimacing in distaste at an unfamiliar or unpleasant sensation; the careful timing and co-ordination of bows between two Japanese of equal social class; and the series of insulting hand gestures between drivers in Brazil.

Body language forms are an indispensable element in social interaction. Facial expression and bodily movements can amplify, modify, confirm, or subvert verbal expressions, having meanings which elude or surpass verbal language.

Body language reflects differences of gender as well as of class and nationality. Rules for the physical behaviour of women are often different from those of men. Women are usually encouraged to look modestly downward, to walk with small steps, be less expressive in facial language than men and to eat smaller portions of food.

Modern studies of body language are based on the belief that gesture is not a universal or natural language, but the product of social and cultural contexts. Even the most elementary aspects of physical behaviour, such as the ways in which people eat, sleep, walk, or sit, seem to be culturally determined, and vary greatly from society to society. This includes both the signals used by people to communicate meaning non-verbally, and also involuntary emotive or physical reactions, such as blushing or crying.

Behaviours which have been represented as spontaneous or instinctive

action expressing the emotions are revealed to be neither spontaneous nor transparent. They are formalized, stylized, and ordered to a specific code of meaning, which may become inappropriate or impolite in other places or cultures. Hugging and kissing another person, in a public place, may cause discomfort or even offence to a person unfamiliar with this custom and passing by with only a distant nod, may fail to have any effect on a person who is not used to expecting this gesture of affection in public.

Cross-cultural studies demonstrating the variability of bodily gesture and facial expression are completed by the experience of travellers to other countries, or even those who see films or listen to music from other parts of the world.

The globalization of culture, especially in urban centres which everywhere tend increasingly to be cosmopolitan in their products and attitudes, has diminished certain of these differences. Cultural homogenization occurs relatively rapidly in certain aspects such as fashions in dress, eating of 'luxury' food items, or the importation of foreign words or decorative objects. However, it tends to take place much more slowly on bodily expression and facial gesture, which people take more time to accept and change.

Ex. 2. Match the bold words with their meaning.

- | | |
|------------------|---|
| 1) grimacing | a) international commerce in goods and services; |
| 2) indispensable | b) products; |
| 3) blushing | c) facial expression showing that you're angry and that something is hurting you; |
| 4) globalization | d) essential; |
| 5) items | e) going red. |

Ex. 3. Are these sentences TRUE or FALSE? Quote from the text to justify your choice.

1. Gestures are a very strong means of communication.
2. Body language is the same for everyone, everywhere.
3. Kissing a person in the street is an affectionate behavior all around the world.
4. Studying other cultures or travelling abroad helps us be aware of the diversity of body talk.

5. Body language is not easily altered.

Ex. 4. Answer the questions.

1. Why is body language so important?
2. In what ways are women supposed to be different from men?
3. According to modern studies how can you define body language?

Unit 7. Incredible Chinese Love Story

Ex. 1 Read and translate the text.

This is the story of a 70-year-old Chinese man who lived with his wife in a mountain cave for fifty years and hand-carved more than 6000 stairs up the mountainside for her.

It is the story of a man and an older woman who ran off to live and love each other in peace for over half a century. Over 50 years ago, Liu Guojang a 19-year-old boy, fell in love with a 29-year-old widowed mother named Xu Choaqin. In a twist worthy of Shakespeare's Romeo and Juliet, friends and relatives criticized the relationship because of age difference and the fact that Xu already had children. At that time, it was unacceptable and immoral for a young man to love an older woman. To avoid the market gossip and the scorn of their communities, the couple decided to elope and lived in a cave in Jiangjin county in southern ChongQing Municipality.

In the beginning, life was harsh as they had nothing, no electricity or even food. They had to eat grass and roots they found in the mountains, and Liu made a kerosene lamp that they used to light up their lives. Xu felt that she had tied Liu down and repeatedly asked him, "Are you regretful?" Liu always replied, "As long as we are industrious, life will improve." In the second year of living in the mountain, Liu began and continued for over so years, to hand-carve the steps so that his wife could get down the mountain easily.

Half a century later in 2001, a group of adventurers were exploring the forest and were surprised to find the elderly couple and the over 6,000 hand – carved steps. LioMingSheng, one of their seven children said, "lively parents loved each other so much, they have lived in seclusion for over so years and never been apart a single day. He hand-carved over

5,000 steps for my mother's convenience, although she doesn't go down the mountain that much."

The couple had lived in peace for over so years until last week. Liu, now 72 years, returned from his daily farm work and collapsed. Xu sat and prayed with her husband as he passed away in her arms. So in love with Xu, was Liu, that no one was able to release the grip he had on his wife's hand even after he had passed away.

"You promised you'll take care of me, you'll always be with me till the day I died, now you left before me, how am I going to live without you?" Xu spent days softly repeating this sentence and touching her husband: black coffin with tears rolling down her cheeks.

The local government has decided to preserve the love ladder and the place they lived as a museum, so this love story can live forever.

Ex. 2. Change these false statements into true statements.

1. Liu was 29 years old when he fell in love with Xu.
2. Liu hand-carved 600 steps for the love of his life.
3. Xu had promised to always be there for Liu till the day he died.
4. Their home in the mountain has been pulled down.

Ex. 3. Find synonyms in the text for these words.

Kids, conserve, brutal, calm, loose, bad

Ex. 4. Answer the questions.

1. What other "fantastic" love Stories do you know?
2. What is the story behind them?

Unit 8. A friend in Need, Is a Friend Indeed!

Ex. 1. Read and translate 10 Quotes about friendship.

1. "Only your real friends will tell you when your face is dirty." Sicilian Proverb.

2. "A friend is one of the nicest things you can have, and one of the best things you can be." Douglas Pagels.

3. "A true friend never gets in your way unless you happen to be going Down." Arnold Glasow.

4. "Friends are those rare people who ask how you are and then wait for the Answer." Author Unknown.

5. "A friend is the one who comes in when the whole world has gone out." Grace Pulpit.

6. "There are big ships and small ships. But the best ship of all is friendship." Author Unknown.

7. "A true friend shows love at all times, And is a brother who is born for times of distress." – Bible book of Proverbs chapter 17. Verse 17.

8. "A true friend reaches for your hand and touches your heart." Attributed to Heather Pryor.

9. "It's not how many friends you can count, it's how many of those you can count on." Anthony Liccione.

10. It is a good thing to be rich, and it is a good thing to be strong, but it is a better thing to be loved of many friends." Euripides.

Ex. 2. Answer or discuss the following questions.

1. Which quote did you like the most and why?
2. Do you have many friends?
3. How many true friends have you got?
4. What do you think what is a true friend like?
5. How and where can you find friends?
6. How two people become friends?
7. What qualities should you have so that people want to be your friend?
8. What qualities will make it hard for you to find friends?

Unit 9. Teen Stress

Ex. 1 Read and translate the following text.

Teenagers today live in a very competitive world. It is more important than ever to succeed at school if you hope to have a chance in the job market afterwards. It's no wonder that many young people worry about letting down their parents, their peers and themselves. In trying to please everyone, they take on too many tasks until it becomes harder and harder to balance homework assignments, parties, sports activities and friends. The result is that young people suffer from stress.

There are different ways of dealing with stress. Everyone knows that caffeine, whether it is in the form of coffee or soft drinks, keeps you awake and alert. But caffeine is a drug which can become addictive. In the end, like other drugs, caffeine only leads to more stress. A better way to deal with stress is to exercise. Research has proved that physical exercise is a good release for stress, because it increases certain chemicals in the brain which calm you down. Making sure you get enough sleep is also an important way of avoiding stress and of staying healthy and full of energy.

Another way to avoid stress is by managing your time effectively. It is better to do a few tasks really well, than lots of tasks badly. Know your limits and try not to take on too much. Finally, if it all gets beyond your control, don't panic or get hysterical. Find the time to sit down quietly and breathe deeply for ten to twenty minutes. Do this regularly, and it will help you calm down and put things into perspective.

Ex. 2. Answer questions according to the information given in the text.

1. What are the main causes of stress in young people?
2. Describe three ways in which teenagers can overcome stress?

Ex. 3. Are these statements true or false? Justify your answers with the words or phrases from the text.

1. Nowadays a teenager must have a solid and good education if he wants to find a good job.
2. Try not to drink too much coffee if you want to relax.
3. A teenager needs very little sleep every night to keep healthy.
4. Teenagers are recommended to take on as many tasks as possible regardless of time or personal limitations.

Ex. 4. Give one synonym for:

chance, stress, activity, healthy, panic, release, suffer.

Ex. 5. Give an adverb with the same root as:

physical, perspective, effectively, addictive, hysterical.

Unit 10. What Is Mindfulness?

Ex. 1. Read and translate the text.

Mindfulness is the short term for *mindfulness meditation practice*. This is a form of self-awareness training adapted from Buddhist mindfulness meditation. Mindfulness is about being aware of what is happening in the present, moment-by-moment, without making judgments about what we notice. Mindfulness meditation practice is key ingredient in a variety of evidence-based psychotherapies, including dialectical behavior therapy (DBT) and acceptance and commitment therapy (ACT).

Why should I practice mindfulness? Our minds can be focused on things in the past, present or future. We often find ourselves ruminating about events that have already happened, or worrying about things that could happen. These habits of thought are often distressing. Mindfulness is a practice which encourages us to attend to the present moment. There is good evidence that mindfulness practice can help people cope more effectively with a wide variety of feeling-states such as depression and anxiety, but also with physical health conditions including and chronic pain and illness.

Why do I need to practice? Can't I pay attention to the present moment already? We can all pay attention to the present moment, at least for a short while. If you haven't tried meditation before, though, you might notice that your attention wanders and is not easily controlled. Mindfulness strengthens our ability to pay attention in the present moment, but also increases our awareness of how our minds fluctuate, often in unhelpful ways. People who practice mindfulness regularly find that it helps their ability to stay in the present moment without being deflected.

What does it mean to 'cultivate a non-judgmental attitude'? Shakespeare said "there is nothing is either good or bad, but thinking makes it so", and this is a core idea in therapies like cognitive behavioral therapy. Making judgments about our own experiences can often lead to us becoming quite distressed. For example, thoughts like "this is horrible" and "I can't take any more" are both judgments associated with distress. Practicing mindfulness teaches us to accept more of our experience without judging it. This has been shown to help people live more fulfilling lives. Some helpful quotes about mindfulness.

"If you let cloudy water settle, it will become clear. If you let your

upset mind settle, your course will also become clear.”– Jack Kornfield, Buddha’s Little Instruction Book (1994).

“Mindfulness means paying attention in a particular way: on purpose, in the present moment, and non-judgmentally.”– John Kabat-Zinn, Wherever You Go, There You Are (1994).

“The non-judgmental observation of the ongoing stream of internal and external stimuli as they arise.”– Ruth Baer, Clinical Psychology: Science and Practice (2003).

“Keeping one’s consciousness alive to the present reality.”– Thich Nath Hanh, The Miracle of Mindfulness (1975).

“Mindfulness is simply the knack of noticing without comment whatever is happening in your present experience.”– Guy Claxton, The Heart of Buddhism (1990).

Unit 11. Depression

Ex.1. Read and translate the text.

What is depression?

Everyone occasionally feels blue or sad. But these feelings are usually short-lived and pass within a couple of days. When you have depression, it interferes with daily life and causes pain for both you and those who care about you. Depression is a common but serious illness. Many people with a depressive illness never seek treatment. But the majority, even those with the most severe depression, can get better with treatment. Medications, psychotherapies, and other methods can effectively treat people with depression.

What are the different forms of depression?

There are several forms of depressive disorders. Major depressive disorder, or major depression, is characterized by a combination of symptoms that interfere with a person’s ability to work, sleep, study, eat, and enjoy once-pleasurable activities. Major depression is disabling and prevents a person from functioning normally. Some people may experience only a single episode within their lifetime, but more often a person may have multiple episodes.

Dysthymic disorder, or dysthymia, is characterized by long-term (2 years or longer) symptoms that may not be severe enough to disable a

person but can prevent normal functioning or feeling well. People with dysthymia may also experience one or more episodes of major depression during their lifetimes.

Minor depression is characterized by having symptoms for 2 weeks or longer that do not meet full criteria for major depression. Without treatment, people with minor depression are at high risk for developing major depressive disorder.

Some forms of depression are slightly different, or they may develop under unique circumstances. However, not everyone agrees on how to characterize and define these forms of depression.

Psychotic depression, which occurs when a person has severe depression plus some form of psychosis, such as having disturbing false beliefs or a break with reality (delusions), or hearing or seeing upsetting things that others cannot hear or see (hallucinations).

Postpartum depression, which is much more serious than the “baby blues” that many women experience after giving birth, when hormonal and physical changes and the new responsibility of caring for a newborn can be overwhelming. It is estimated that 10 to 15 percent of women experience postpartum depression after giving birth.

Seasonal affective disorder (SAD), which is characterized by the onset of depression during the winter months, when there is less natural sunlight. The depression generally lifts during spring and summer. SAD may be effectively treated with light therapy, but nearly half of those with SAD do not get better with light therapy alone. Antidepressant medication and psychotherapy can reduce SAD symptoms, either alone or in combination with light therapy.

What are the signs and symptoms of depression?

People with depressive illnesses do not all experience the same symptoms. The severity, frequency, and duration of symptoms vary depending on the individual and his or her particular illness. They include:

- Persistent sad, anxious, or “empty” feelings.
- Feelings of hopelessness or pessimism.
- Feelings of guilt, worthlessness, or helplessness.
- Irritability, restlessness.
- Loss of interest in activities or hobbies once pleasurable, including sex.
- Fatigue and decreased energy.
- Difficulty concentrating, remembering details, and making decisions.

- Insomnia, early-morning wakefulness, or excessive sleeping.
- Overeating, or appetite loss.
- Thoughts of suicide, suicide attempts.
- Aches or pains, headaches, cramps, or digestive problems that do not ease even with treatment.

What illnesses often co-exist with depression?

Other illnesses may come on before depression, cause it, or be a consequence of it. But depression and other illnesses interact differently in different people. In any case, co-occurring illnesses need to be diagnosed and treated.

Anxiety disorders, such as post-traumatic stress disorder (PTSD), obsessive-compulsive disorder, panic disorder, social phobia, and generalized anxiety disorder, often accompany depression. PTSD can occur after a person experiences a terrifying event or ordeal, such as a violent assault, a natural disaster, an accident, terrorism or military combat. People experiencing PTSD are especially prone to having co-existing depression.

Alcohol and other substance abuse or dependence may also co-exist with depression. Research shows that mood disorders and substance abuse commonly occur together.

Depression also may occur with other serious medical illnesses such as heart disease, stroke, cancer, HIV/AIDS, diabetes, and Parkinson's disease. People who have depression along with another medical illness tend to have more severe symptoms of both depression and the medical illness, more difficulty adapting to their medical condition, and more medical costs than those who do not have co-existing depression. Treating the depression can also help improve the outcome of treating the co-occurring illness.

What causes depression?

Most likely, depression is caused by a combination of genetic, biological, environmental, and psychological factors.

Depressive illnesses are disorders of the brain. Longstanding theories about depression suggest that important neurotransmitters – chemicals that brain cells use to communicate – are out of balance in depression. But it has been difficult to prove this.

Brain-imaging technologies, such as magnetic resonance imaging (MRI), have shown that the brains of people who have depression look

different than those of people without depression. The parts of the brain involved in mood, thinking, sleep, appetite, and behavior appear different. But these images do not reveal why the depression has occurred. They also cannot be used to diagnose depression.

Some types of depression tend to run in families. However, depression can occur in people without family histories of depression too. Scientists are studying certain genes that may make some people more prone to depression. Some genetics research indicates that risk for depression results from the influence of several genes acting together with environmental or other factors. In addition, trauma, loss of a loved one, a difficult relationship, or any stressful situation may trigger a depressive episode. Other depressive episodes may occur with or without an obvious trigger.

How do women experience depression?

Depression is more common among women than among men. Biological, life cycle, hormonal, and psychosocial factors that women experience may be linked to women's higher depression rate. Researchers have shown that hormones directly affect the brain chemistry that controls emotions and mood. For example, women are especially vulnerable to developing postpartum depression after giving birth, when hormonal and physical changes and the new responsibility of caring for a newborn can be overwhelming.

Finally, many women face the additional stresses of work and home responsibilities, caring for children and aging parents, abuse, poverty, and relationship strains. It is still unclear, though, why some women faced with enormous challenges develop depression, while others with similar challenges do not.

How do men experience depression?

Men often experience depression differently than women. While women with depression are more likely to have feelings of sadness, worthlessness, and excessive guilt, men are more likely to be very tired, irritable, lose interest in once-pleasurable activities, and have difficulty sleeping.

Men may be more likely than women to turn to alcohol or drugs when they are depressed. They also may become frustrated, discouraged, irritable, angry, and sometimes abusive. Some men throw themselves into

their work to avoid talking about their depression with family or friends, or behave recklessly. And although more women attempt suicide, many more men die by suicide in the United States.

How do older adults experience depression?

Depression is not a normal part of aging. Studies show that most seniors feel satisfied with their lives, despite having more illnesses or physical problems. However, when older adults do have depression, it may be overlooked because seniors may show different, less obvious symptoms. They may be less likely to experience or admit to feelings of sadness or grief. Sometimes it can be difficult to distinguish grief from major depression. Grief after loss of a loved one is a normal reaction to the loss and generally does not require professional mental health treatment.

Older adults also may have more medical conditions such as heart disease, stroke, or cancer, which may cause depressive symptoms. Or they may be taking medications with side effects that contribute to depression.

Although many people assume that the highest rates of suicide are among young people, older white males age 85 and older actually have the highest suicide rate in the United States. Many have a depressive illness that their doctors are not aware of, even though many of these suicide victims visit their doctors within 1 month of their deaths.

How do children and teens experience depression?

Children who develop depression often continue to have episodes as they enter adulthood. Children who have depression also are more likely to have other more severe illnesses in adulthood.

A child with depression may pretend to be sick, refuse to go to school, cling to a parent, or worry that a parent may die. Older children may sulk, get into trouble at school, be negative and irritable, and feel misunderstood. Because these signs may be viewed as normal mood swings typical of children as they move through developmental stages, it may be difficult to accurately diagnose a young person with depression.

Before puberty, boys and girls are equally likely to develop depression. By age 15, however, girls are twice as likely as boys to have had a major depressive episode. Depression during the teen years comes at a time of great personal change – when boys and girls are forming an identity apart from their parents, grappling with gender issues and emerging sexuality, and making independent decisions for the first time in their lives.

Depression in adolescence frequently co-occurs with other disorders such as anxiety, eating disorders, or substance abuse. It can also lead to increased risk for suicide.

How can I help myself if I am depressed?

If you have depression, you may feel exhausted, helpless, and hopeless. It may be extremely difficult to take any action to help yourself. But as you begin to recognize your depression and begin treatment, you will start to feel better.

To help yourself:

- Do not wait too long to get evaluated or treated. There is research showing the longer one waits, the greater the impairment can be down the road. Try to see a professional as soon as possible.

- Try to be active and exercise. Go to a movie, a ball-game, or another event or activity that you once enjoyed.

- Set realistic goals for yourself.

- Break up large tasks into small ones, set some priorities and do what you can as you can.

- Try to spend time with other people and confide in a trusted friend or relative. Try not to isolate yourself, and let others help you.

- Expect your mood to improve gradually, not immediately. Do not expect to suddenly “snap out of” your depression. Often during treatment for depression, sleep and appetite will begin to improve before your depressed mood lifts.

- Postpone important decisions, such as getting married or divorced or changing jobs, until you feel better. Discuss decisions with others who know you well and have a more objective view of your situation.

- Remember that positive thinking will replace negative thoughts as your depression responds to treatment.

Unit 12. Behavioral Activation: Fun and Achievement

Ex.1. Read and translate the text.

The symptoms of depression can bring about some drastic changes in a depressed person’s life, daily routines, and their behavior. Often it is these changes that makes the depression worse and prevents the depressed

person from getting better. For example, a lack of motivation or a lack of energy can result in a depressed person cutting back on their activities, neglecting their daily tasks and responsibilities, and leaving decision-making to others. Have you noticed these changes in yourself when you are depressed? When your activity level decreases, you may become even less motivated and more lethargic. When you stop doing the things you used to love, you miss out on experiencing pleasant feelings and positive experiences. Your depression could get worse and this becomes a vicious cycle. Similarly, when one begins neglecting a few tasks and responsibilities at work or at home, the list may begin to pile up. As such, when a depressed person thinks about the things they have to do, they may feel overwhelmed by the pile of things they have put off doing. This may result in them feeling guilty or thinking that they are ineffective or even, a failure. This will also worsen the depression.

Increasing Your Activity Level

One way to combat depression is to simply increase your activity level, especially in pleasurable activities – having fun – and tackling your list of tasks and responsibilities, but doing it in a realistic and achievable way, so that you set yourself up to succeed. Becoming more active has a number of advantages: Activity helps you to feel better. At the very least, when you start engaging in some kind of activity, it gives your mind something else to think about – a different focus. Doing things, even a little at a time, can help give you a sense that you are moving forward, taking control of your life again, and doing something – experiencing a sense of achievement. You may even find pleasure and enjoyment in the activities you do. Activity helps you to feel less tired. Usually, when you are physically tired, you need rest. However, when you are depressed, the opposite is true. Sleeping more and sitting around doing nothing will only cause you to feel more lethargic and tired. Also, doing nothing leaves room for your mind to ruminate on depressive thoughts, which will make you feel even more depressed. Activity can help you think more clearly. Once you get started, you may find that you take a different perspective on particular problems in your life. Also, because your mind takes a different focus as a result of the activity, your thoughts may become clearer. This is one of the ways of turning the vicious cycle of depression around, by using behavioral strategies – engaging in pleasurable activities and tackling small tasks.

Fun And Achievement

It makes good sense to do fun and pleasurable things to make yourself feel better, but these are not the only sorts of activities that will help generate positive feelings. Being depressed isn't just about feeling sad – there are a lot of other feelings involved as well, such as hopelessness, guilt, and despair. So, it also makes sense to do things that result in other positive feelings, such as achievement and a sense of purpose. When you are planning things to do for yourself, it is important to remember to include a mixture of activities, adding those that have the potential to give you other positive feelings. An example of this is paying off money on your credit card, doing the ironing, or doing the shopping. Doing these things can help you feel more in control of your life (e.g., paying off your debts) and give you satisfaction that you have started doing something (e.g., catching up on household chores). Doing tasks that give you a sense of achievement or mastery will help you feel like you are starting to get back on top of things again. Some activities may combine the two. For example, making your bed may give you a sense of pleasure at having a neat, tidy bed, but it may also give you a sense of achievement at having done something to improve your home environment. This sense of achievement is just as important as getting pleasure out of something, and may indeed prompt you to do more.

Unit 13. Body Image and Dieting in Children

Ex. 1. Read and translate the text.

Traditionally, dieting and similar behaviors that show concern for physical appearance have been reserved for teenagers and adults. This study examines dysfunctional eating behaviors in children as young as seven. This study builds on early research that indicated that children as young as third grade were concerned about being overweight and their appearance. Preadolescent children are at a great risk of doing permanent physical and cognitive harm to themselves by dieting. Children have less body fat than adults and are growing and developing at a rapid rate. Risks of dieting for children include kidney failure, dental decay, heart beat irregularities, stunted physical growth, and reduced cognitive development.

Body image and dieting behaviors are understood by children as young

as seven. Children at that age envision an ideal body shape, know that restrictive eating behaviors influence body shape, and express dissatisfaction with their current body size and shape. A sample of 431 children in the second, third, and fourth grades in Melbourne, Australia, participated in a survey. The survey was designed to assess knowledge of what dieting is and determine how many children had engaged in some type of restrictive eating behavior. Part of the survey also examined the children's ideas about ideal body shape and weight. Parents consented to their children's participation in the survey. Participants were assured that all their responses would be kept confidential. To begin the study, the children's current body weights and heights were recorded. Results were as follows: The first part of the survey was a behavior inventory that asked questions like "I diet ..." with answer choices that included always, sometimes, and never. Then, more open-ended questions were asked that allowed children to explain what dieting means. One concern in designing a questionnaire to be used with children is the tendency for young children to give expected answers to leading questions. To avoid errors created by leading questions, children were given the option to answer "I don't know," "I never diet," or similar responses to the opened questions. Children were next shown a series of seven gender-appropriate figures that ranged from very thin to obese. Children responded to the following questions:

1. Which figure looks most like the way you currently look?
2. Which figure looks most like the way you would like to look?
3. Which figure looks most like the way you feel?

Finally, children took a modified version of the Eating Attitudes Test designed by researchers to measure dieting behaviors, food occupation, and weight concerns. This 26-item survey asks questions like "I am scared about being overweight." Children select from a range of responses from always to never.

The researchers examined the results of the surveys by age group, body mass (underweight, normal weight, overweight), and gender. About 28 percent indicated that they did not know what dieting was. Of the remainder, their ideas about dieting showed a clear understanding of society's beliefs and attitudes toward dieting. Dieting has become a national pastime. About one in five Americans will go on a diet this year and many more will talk about going on a diet. Popular culture idealizes thin as beautiful. People see dieting as an acceptable way to achieve a

beautiful body. About 23 percent of the participants indicated that they have dieted. More girls than boys indicated that they had dieted. The three most popular forms of dieting among participants were: actively reducing their intake of specific foods, reducing their overall intake of food, eating healthy foods.

The study clearly showed that children as young as seven have a clear understanding of their body image and are frequently dissatisfied with it. Both boys and girls displayed a significant difference between their perceived body size and the ideal body size. In addition, the difference between the ideal and how they felt was significantly different. The findings are shown in the following table: The study did not show a strong correlation between body-image dissatisfaction and dieting. This finding indicates that children do not yet have the abstract reasoning skills to relate these concepts. Studies with adolescents have shown a strong correlation between body-image dissatisfaction and dieting.

Children from all age groups sampled understand the concept and behaviors associated with dieting. A significant number of the participants expressed dissatisfaction with their body shape and size. Researchers believe that society is communicating messages about ideal body shape and size to these young children. Interestingly, the girls in the study tended to choose the tall, lean figure as their ideal. Boys chose a more muscular and solid representation for their ideal. Further study is needed to help understand why children at such a young age have such a clear understanding of behaviors that are potentially harmful to them. Possible explanations include society's emphasis on physical appearance, better education about nutrition, and the influence of role models such as parents.

Ex. 2. Answer the following questions in the space provided.

1. What was the purpose of this study? Who participated in the study?
2. What percentage of boys and girls were overweight? Of normal weight?
3. What three assessments were children asked to make about the gender-appropriate figures shown to them?
4. What dieting practices did children say they had tried?
5. What part of the hypothesis was not supported by the findings of this study? What does this suggest about children's cognitive skills?
6. Why do you think some children are dissatisfied with their body sizes?

7. What recommendations would you make to parents who are concerned about the findings of this study?

Unit 14. Teenagers in Crises

Ex. 1. Read and translate the text.

Many adults believe that it is more difficult to be a teenager today than when they were growing up. Although not all researchers agree, there is some evidence to suggest that American society is changing so rapidly that it is forcing its adolescents toward adulthood without the necessary time and training for a smooth transition from childhood to adulthood. The consequences to the adolescent and to society may be felt for several decades.

There is no place for teenagers in American society today – not in our homes, not in our schools, and not in society at large. This was not always the case: barely a decade ago, teenagers had a clearly defined position in the social structure. They were the “next generation,” the “future leaders” of America. Their intellectual, social, and moral development was considered important and therefore it was protected and nurtured. The teenager’s occasional foibles and excesses were excused as an expression of youthful spirit, a necessary Mardi Gras before assuming adult responsibility and decorum. Teenagers thus received the time needed to adapt to the remarkable transformations their bodies, minds, and emotions were undergoing. Society recognized that the transition from childhood to adulthood was difficult and that young people needed time, support, and guidance in this endeavor.

In today’s rapidly changing society, teenagers have lost their once privileged position. Instead, they have had a premature adulthood thrust upon them. Teenagers now are expected to confront life and its challenges with the maturity once expected only of the middle-aged, without any time for preparation. Many adults are too busy retooling and retraining their own job skills to devote any time to preparing the next generation of workers. And some parents are so involved in reordering their own lives, managing a career, marriage, parenting, and leisure, that they have no time to give their teenagers; other parents simply cannot train a teenager for an adulthood they themselves have yet to attain fully. The media and

merchandisers, too, no longer abide by the unwritten rule that teenagers are a privileged group who require special protection and nurturing. They now see teenagers as fair game for all the arts of persuasion and sexual innuendo once directed only to adult audiences and consumers. High schools, which were once the setting for a unique teenage culture and language, have become miniatures of the adult community. Theft, violence, sex, and substance abuse are now as common in the high schools as they are in the streets.

The imposition of premature adulthood upon today's teenagers affects them in two different but closely related ways. First, because teenagers need a protected period of time within which to construct a personal identity, the absence of that period impairs the formation of that all-important self-definition. Having a personal identity amounts to having an abiding sense of self that brings together, and gives meaning to, the teenager's past while at the same time giving him or her guidance and direction for the future. A secure sense of self, of personal identity, allows the young person to deal with both inner and outer demands with consistency and efficiency. This sense of self is thus one of the teenager's most important defenses against stress. By impairing his or her ability to construct a secure personal identity, today's society leaves the teenager more vulnerable and less competent to meet the challenges that are inevitable in life.

The second effect of premature adulthood is inordinate stress: teenagers today are subject to more stress than were teenagers in previous generations. This stress is of three types. First, teenagers are confronted with many more freedoms today than were available to past generations. Second, they are experiencing losses, to their basic sense of security and expectations for the future that earlier generations did not encounter. And third, they must cope with the frustration of trying to prepare for their life's work in school settings that hinder rather than facilitate this goal. Any one of these new stresses would put a heavy burden on a young person; taken together, they make a formidable demand on the teenager's ability to adapt to new demands and new situations.

Ex. 2. Answer the following questions in the space provided.

1. When teenagers were considered future leaders, how did society treat them?

2. What changes does the author believe have occurred in society to make teens lose their place?
3. According to the author, how have high schools changed?
4. What two effects on teens does the author cite as a result of society's push toward premature adulthood?
5. Do you agree with the author's point of view about society's treatment of teens? Explain your reasoning.
6. Compose a letter to your congressional representative expressing your views on allowing advertisers to use sex or violence to sell products to teens.

Unit 15. Creativity and Aging

Ex. 1. Read and translate the text.

Would you describe yourself as creative? Recent research indicates that creative people tend to remain creative throughout their lives. Creativity is not reserved for the young. Composers, artists, and musicians often remain productive and creative throughout their lives. Their creativity brings meaning and purpose that enhances the quality of their lives. Despite a severe intestinal disorder, painter Henri Matisse created some of his greatest work near the end of his life. So did Auguste Renoir, Claude Monet and Pablo Picasso. And some creative people, like Grandma Moses, don't start their creative careers until they're past 70.

Psychologists have been studying the creative lives of older people and how creativity can enhance the aging process. In a range of studies, they've found that being creative can add richness to the aging process; that those who followed their creative passions are happier old people; and that many creative people develop new creative styles in old age.

For the past 20 years, Dean Keith Simonton, Ph.D., professor of psychology at the University of California Davis, has studied the career trajectories of composers, writers and artists. Simonton has found, in part, that creativity does not decline with age, though it may change in form.

'Swan-song' creativity

Creative people often change strategies in old age, Simonton has found. Composer Igor Stravinsky, for example, began in later life to compose pieces much differently than he had earlier, changing from writing

traditional polytonal music to more radical ‘twelve-tone’ music that used the musical scale in a different way.

Simonton has found a ‘swan-song’ phenomenon: a time in which people’s work becomes more meaningful and aesthetically concise as they face death. Different kinds of artists have different creative peaks, Simonton added: For instance, lyric poets may peak earlier than novelists. In addition, some people – like Grandma Moses – begin creative careers later in life, thus peaking late in life, he noted.

A recent study at University of Nebraska-Lincoln found that thinking and acting creatively can help people adapt to the aging process and find meaning in life. Participants in the study – who were a mix of nonartists and artists ages 60 and older – said that being creative enhanced their life satisfaction. In addition, creativity can encourage greater cognitive flexibility, the study found.

Sixty percent of the study participants said they’d become even more creative as they’ve gotten older. Of the remaining 40 percent, half said they’d remained consistently creative throughout their lives.

Follow your passion

In 1991, Dudek followed up a University of California-Berkeley study by Donald Mackinnon, Ph.D., and colleagues of 124 male architects, engineers and artists between 1958 and 1960. Participants in 1958 were 53-years-old on average. Dudek interviewed 70 of the original architects in the study, all of those who were still alive in 1991. She divided the architects into three groups: famous; very successful; and ‘nice guys,’ men who had never strived to be famous, but who had fulfilling careers. All the men in the studies had followed their creative passions in their careers, Dudek said. With few exceptions, they reported that they were happy with their lives and wouldn’t do things differently, and that creativity had enhanced their lives and made their old age more successful and enjoyable.

If people exercise creativity throughout their lives, their old age should be no different, Simonton said. ‘People with lots of creative potential keep on creating even in old age,’ he said.

Ex. 2. Answer the following questions in the space provided.

1. What does Simonton’s study of creativity and aging indicate?
2. What is ‘swan-song’ creativity?
3. Can creativity increase with age?
4. Into what three groups did Dudek divide the participants in her 1991 study? What were her conclusions?

5. Does a creative person need to achieve fame to find satisfaction with his or her talents? Why or why not?

6. List one or more areas in which you are creative. Projecting into the future, develop a life plan that would allow you to use your creativity throughout your life. Consider how you can develop your talents and how you can use them even if physical limitations slow you down.

Unit 16. Self-Hypnosis

Ex. 1. Read and translate the text.

What happens when traditional medicine fails to provide relief from chronic pain? Chronic pain is long-term pain from a known or unknown source that cannot be relieved through surgery or physical therapy. Millions of Americans suffer from chronic pain at some period in their lives. Traditional medicine has treated such pain with medications and selected exercises. Statistics show that 40 percent of the people who are prescribed medication for chronic pain will abuse their medication. Society, including those in the medical profession, is exploring alternative treatments that may prove as effective, and perhaps more effective, than traditional medical treatments.

A woman in her late 40s was injured in a car accident. Her most serious injury was a compression fracture of her spine. The fracture and accompanying muscle spasms resulted in severe and continuous pain. No type of surgery could relieve her pain, so doctors gave her a series of pain medications, nerve blocks, and anesthetics. These procedures managed the pain, but had unpleasant side effects.

Two years later, the woman was in another car accident. This time, in addition to cuts and bruises, she fractured her breastbone, one rib, and a foot. After this accident, her pain worsened and she had difficulty completing simple tasks such as combing her hair and dressing herself. She was unable to work. She also experienced additional health problems in the next several months.

The pain, frustration over her limitations, and uncertainty about the future left her depressed. Over the next six months, she visited several doctors at several clinics seeking help. Doctors prescribed 13 different medications at various times to either manage her pain or affect her mood.

The drugs included Darvocet, a powerful pain reliever, and Valium, a drug commonly prescribed to treat anxiety. None of these drugs proved helpful; the many side effects actually made the problems worse.

When she entered the Behavioral Medicine Clinic, she walked with a cane, had limited movement in her head and neck, and continued to be depressed. Since she had received little relief from traditional medical treatments, she had begun to study the principles of self-hypnosis from library books. She slowly learned how to manage her pain through a self-induced state of hypnosis. While seated, she would close her eyes and visualize her pain as a lake. She became progressively more relaxed by continuing to use mental imagery to reduce the size of the lake. She used these techniques to make the pain more manageable and to deal with her anxiety over the exercises physical therapists asked her to do. The doctors at the Behavioral Medicine Clinic encouraged her to continue with the selfhypnosis on a daily basis, to be as physically active as possible, and to try to live without pain medications.

Within seven months, she: was nearly free of all pain, was not taking any pain medications, had increased her physical activity and was walking without the cane, had returned to work part-time, was no longer suffering from depression.

Cases such as the one described here are helping to shift the focus of the medical community toward a biopsychosocial approach to the treatment of pain. This approach combines traditional medical treatments with psychological and social approaches to treatment. The most common alternative treatments are group therapy, relaxation therapy, biofeedback, guided imagery, and hypnosis.

The National Institutes of Health support these alternative treatments, especially relaxation therapy and hypnosis, for chronic pain sufferers. Several studies over the past 30 years indicate that hypnosis is especially effective at controlling both acute and chronic pain and at relieving the accompanying depression. Self-hypnosis is the technique preferred by many physicians and psychologists. It allows the patient more control and responsibility. It also lessens the chance that the physician or psychologist will be seen as a manipulator.

Ex. 2. Answer the following questions in the space provided.

1. What is chronic pain?

2. Why did the woman in the case study learn self-hypnosis?
3. What imagery did she use for her pain?
4. How did she use this image to reduce her pain level?
5. What types of treatment are combined in the biopsychosocial approach to pain management?
6. Why do you think self-hypnosis relieved pain when all the other treatments failed in this instance?
7. If given the option of hypnosis or self-hypnosis to manage pain, which would you prefer? Why?

Unit 17. Facial Expressions

Ex. 1. Read and translate the text.

Emotions are expressed in a variety of ways. People from one culture may misunderstand the emotional expressions of people from other cultures. Studies of facial expressions have noted similarities and differences among cultures. For example, many similarities exist between the facial expressions of Americans and Japanese. Along with those similarities, researchers have noted some striking differences. Research has identified seven universal facial expressions of emotion. People across cultures make the same basic facial expressions in reaction to anger, contempt, disgust, fear, happiness, sadness, and surprise. These facial expressions are theorized to be biologically innate in all people regardless of race, culture, or gender.

Although the same basic facial expressions are used for the seven emotions, display rules within the culture affect how and when these expressions are made. These display rules vary widely among cultures. Specifically, there are marked differences between Japanese and American display rules.

When an emotion is sent to the brain to be processed, the signal is filtered through both the innate signal for the facial expression and the culturally accepted display rules learned during early childhood. The actual expression is a result of the innate signal and the learned display rules. Cultures may affect the innate signal in five ways:

1. Deamplify the expression, which results in showing less emotion than is felt.

2. Neutralize the expression, which results in no facial expression even when one is felt.

3. Amplify the expression, which results in showing more emotion than what is felt.

4. Mask the expression, which results in showing something different than what you feel.

5. Blend expressions, which mixes two or more of the expressions at the same time.

A study conducted by Paul Ekman and Wallace Friesen used American and Japanese participants. In the study, the participants were asked to view extreme stress-inducing films including an amputation and a childbirth with forceps. The participants' facial expressions were videotaped without their knowledge. In the first series, participants viewed the videotapes alone. In the second series, participants viewed the stressful films again, but this time a higher status experimenter was in the room with each participant.

During the first series, both American and Japanese participants exhibited the same facial expressions, which included fear, disgust, sadness, and anger. This finding continues to support the findings that there are universal expressions. During the second series, the presence of the experimenter had no effect on the facial expressions of the American participants. The Japanese participants, however, either displayed no emotion or smiled. These responses not only differed from their American counterparts, they were totally different from their initial responses to the same films.

The Americans had no culturally based display rule that was affected by the presence of the experimenter. The Japanese participants were reacting to the culturally based display rule that negative emotions are not shown in the presence of someone of higher status. This display rule caused them to mask their facial expressions.

Ex. 2. Answer the following questions in the space provided.

1. What has research indicated are the seven universal facial expressions of emotion?

2. How do researchers believe we acquire these seven universal facial expressions?

3. If there are universal facial expressions, what causes differences in the way emotions are expressed?
4. Identify two of the five display rules.
5. According to this experiment, what difference exists between the way in which Americans and Japanese express emotions?
6. What display rules do Americans have?
7. How are display rules, like the Japanese rule in the study, formed?

Unit 18. The Excited Brain

Ex. 1. Read and translate the text.

When you do not get enough sleep, what happens to your motivation? Do you lack the energy and drive to care about what is happening around you? Psychologists and other scientists are discovering that our moods are largely regulated by chemical activity in the brain. Sleep deprivation affects the levels of these chemicals and reduces our motivation.

The neuroscience of emotion is still in a fairly early stage of development. For thousands of years, people have been thinking about what sorts of things make us feel happy or unhappy, elated or depressed. While it is not known exactly how sleep and sleep debt help the brain create good feelings and bad, we are learning how the brain puts itself in an “up” mood and how addictive drugs create a “high” by stimulating the brain’s pleasure centers. We also have a simple model of how the brain becomes activated and fully conscious during waking and dreaming activity. What we have found is that the biochemistry of wakefulness and sleep is intimately tied in with the state of the emotional part of the brain. The waking brain naturally excites and primes itself for vital interaction with the external world, while the sleep-deprived brain suppresses that natural buoyancy by damping the brain’s neurochemical activity.

A brain circuit called the reticular activating system plays a major role in arousal. It is highly likely that the biological clock operates on this system to wake up the brain and keep it awake. The reticular activating system is a small collection of nerves that originates deep in the brain stem, the most ancient and primitive part of the brain. A relatively few cells in the brain stem reach out and touch nearly every cell in the brain. These cells carry neurotransmitters, that relay activating signals from the reticular activating system.

These neurotransmitters are norepinephrine, dopamine, and acetylcholine. Norepinephrine is one of the key neurotransmitters for arousal, acting as the brain's form of adrenaline. Dopamine is known to be involved in body movement and pleasure. Acetylcholine also acts as a prime arousal chemical and is known to be important in carrying signals concerning muscle movements. Another neurotransmitter, serotonin, also has a strong effect on mood. These excitatory neurochemicals prepare the brain's 100 billion nerve cells to react more quickly. It is also no surprise that they interface closely with the limbic system, which is sometimes called the emotional brain. This is because we must be wired not only to react quickly to challenge in a purely mechanical way but also to be motivated emotionally to face challenges. The reticular activating system sets the emotional brain on edge, as when runners ready to start a race get down on their hands and the balls of their feet. The activating system doesn't so much create feelings as set an emotional tone for any stimulus that filters into our brain.

The activity of the limbic system is like the background music in a movie. The screen shows someone creeping down a hallway at night toward a closed door. If the background music is tense, perhaps in a minor key, with a few discordant notes thrown in, we interpret the scene as suspenseful and feel anxious about what might lie behind the door. If the music is bouncy and jovial, like something out of an old Charlie Chaplin movie, we interpret the same scene quite differently. We are prepared for humor and might imagine the doorknob coming off when the person tries to open the door. If a monster does pop from behind the door, we might think "What a silly monster suit."

Now consider the movie that constantly plays in your head – the images of the world around you that sensory stimulation tells you is "reality." The nerve cells sprouting out of the base of the brain are creating the mood music inside you by acting directly on all the other brain cells, making them more or less reactive to the scenes that are coming in from the outside world. When we get a good night of sleep, and the reticular activating system is priming the emotional brain properly, our norepinephrine and dopamine infusions create a positive, energetic "background music." The result is a feeling of mental and physical energy we call vitality and an internal psychological push called motivation. Without them we get depressed. (I should note that clinical depression is very different from feeling low or down. In clinical depression, the brain's natural biochemistry is seriously altered.)

One major hypothesis about how sleep affects mood is that sleep somehow replenishes these excitatory neurotransmitters in the brain. Over the course of the day, neurotransmitters are released from nerve cells. Some are recycled back into the cell and others are lost. By keeping brain activity high, sleep deprivation may prevent the brain from replacing lost neurotransmitters. When nerve activity is decreased, alerting is impaired. Your thoughts don't flow as smoothly as they should. You feel down.

To counterbalance the brain's accelerators, other nerve cells and neurotransmitters act as the brain's brakes. The most widely distributed nerve cell receptor in the brain is GABA, the receptor that alcohol and benzodiazepine sleeping pills act on. An activated GABA receptor makes a nerve cell much less reactive to stimuli, slowing the rate of information processing, and uncocking the hammer in the emotional brain.

Another of the brain's primary braking mechanisms is adenosine. Adenosine is one of the molecules that results when the brain breaks down its primary energy source, adenosine triphosphate, or ATP. When the brain is very active and using a lot of energy, more adenosine is present in the brain. This surplus of adenosine acts as a natural governor, reining in brain activity so that it doesn't run too fast. Increasing adenosine concentration in the brain may be part of the reason we feel mental fatigue when we face emotional or mentally challenging situations. The increased brain activity may create a lot of free adenosine, which then depresses brain activity.

One school of thought holds that the sleep drive actively suppresses brain activity through this braking mechanism, thereby linking sleepiness and mood. The more time we are awake, the more the inhibitory circuits of the brain damp down the stimulation of the reticular activating system, as if the nerve excitatory and dampening systems are fighting for control of the brain. As various areas of the brain are slowed down by this braking action, the effects show up in how we act, think, and feel. The dampening of nerve activity of motor areas makes us less coordinated; the dampening of nerve activity in the cerebral cortex makes us slow in thought; and quenching nerve activity in the emotional brain makes us feel less vital, less motivated. To counteract this we can walk around, concentrate harder, and give ourselves a pep talk, but eventually the brain's sleep drive triumphs. At some point no mental trick will stimulate brain activity in the areas we need to stay awake – it's like trying to light wet sawdust with a match. We have to fall asleep.

After we sleep, the brakes are off again. Dopamine and norepinephrine release in the brain increases. We feel alive again.

Ex. 2. Answer the following questions in the space provided.

1. What part of the brain plays a major role in motivation?
2. Which neurotransmitters control motivation?
3. How do the excitatory neurochemicals affect motivation?
4. What is the “emotional brain” and what does it do?
5. What is one hypothesis of how sleep affects our moods?
6. What are the two primary receptors that slow activity in the brain?
7. As nerve activity slows in the limbic system, how do we feel?

Unit 19. Can Personality Traits Predict Adult Career Success

Ex. 1 Read and translate the text.

A longitudinal study conducted over 70 years explored the relationship between personality traits using the five-factor model of personality (“Big Five”) and general mental ability with career success. For the purposes of the study, two aspects of career success were considered: intrinsic success (job satisfaction) and extrinsic success (income and occupational status).

The dimensions of the five-factor model include neuroticism, extroversion, openness to experience, agreeableness, and conscientiousness. Neuroticism involves six facets: anxiety, hostility, depression, self-consciousness, vulnerability, and impulsiveness. Extroversion involves sociability and is related to the experience of positive emotions. Conscientiousness includes three related facets: achievement orientation, dependability, and orderliness. Openness to experience is characterized by intelligence and unconventionality. Agreeableness is being trusting of others and likeable.

The study explored several hypotheses in measuring intrinsic and extrinsic career success. The primary hypotheses are as follows:

– Neuroticism will be negatively related to intrinsic and extrinsic career success.

– Extroversion will be positively related to intrinsic and extrinsic career success.

– Conscientiousness will be positively related to extrinsic career success.

- Personality measures collected in adulthood will explain more variance in career success than will childhood measures.
- General mental ability will be positively related to extrinsic career success.
- Personality will explain incremental variance in career success beyond that explained by general mental ability.

Researchers used the intergenerational studies, a set of three studies that followed participants from early childhood to retirement. The Institute of Human Development at the University of California, Berkeley administered the studies. Results indicated that neuroticism was significantly negatively correlated with job satisfaction (intrinsic career success), while openness to experience, conscientiousness, and general mental ability were significantly positively correlated with job satisfaction.

Neuroticism is negatively correlated to intrinsic and extrinsic career success. Individuals who score high on neuroticism are more likely to experience a variety of problems, including negative moods, anxiety, fear, depression, irritability, and physical symptoms. Neurotic individuals are likely to be especially affected by negative life events and to have bad moods linger. These factors carry over into their work environment and affect both job satisfaction and income/occupational level.

The second hypothesis that extroversion is positively correlated to intrinsic and extrinsic career success was only partially supported. Extroversion was positively correlated to extrinsic career success, but no correlation was found between extroversion and job satisfaction (intrinsic career success). Researchers found that conscientiousness and income/occupational status were positively correlated. In an unhyposthesized effect, researchers found that the correlation between conscientiousness and job satisfaction was the most consistent result.

Results indicate a correlation between particular career paths and particular traits and between personality traits and intrinsic and extrinsic career success. Since the personality traits are relatively stable over time, it is possible to predict career success using childhood personality measures.

In terms of career paths chosen by different personality types, the study showed that extroverts tended to gravitate toward social jobs and jobs high in interpersonal activities. Conscientious individuals tended to be attracted to investigative jobs and those jobs that require thinking, organizing, and understanding. Those who rated high in general mental ability also tended to gravitate toward investigative jobs, but they stayed away from

conventional, ruleregulated jobs. Study participants who ranked high on the neuroticism factor were most likely to be employed in jobs involving physical activity.

Ex. 2. Answer the following questions in the space provided.

1. How many participants were enrolled in the study?
2. What two areas of career success were studied?
3. What were the researchers' hypotheses?
4. Which hypotheses were not supported by the findings of the study?
5. Is it important to try to match personality, mental ability, and career path? Why or why not?
6. Discuss the advantages and disadvantages to job candidates if a company uses personality test results as hiring or promotion criteria.

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