



ABSOLUTE THRESHOLD

THE PSYCHOLOGY CLUB PUBLICATION

Is torture the key to
fighting terrorism?

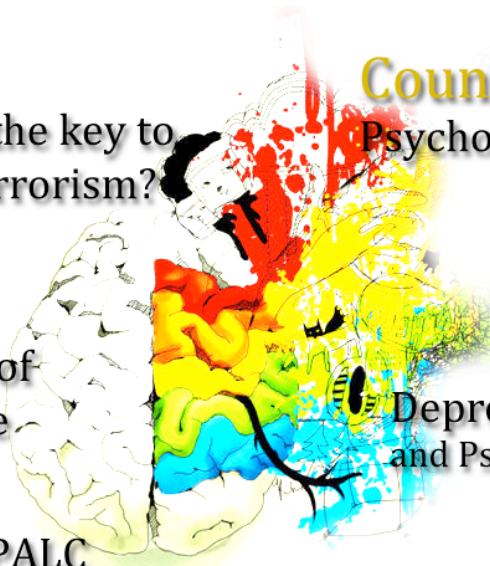
Counseling
Psychology

Memories of
child abuse

Depression
and Psychoanalysis

PALC

What is it?



LaGuardia
Community
College

Spring I 2012

First Issue Introduction

by Dr. Lara Beaty

Psychology Club Mentor

Welcome to the first publication of *Absolute Threshold*, a publication of the LaGuardia Psychology Club. As the mentor of the club, I have been proud and impressed by the creativity and ambitions of the club's officers and members as various ideas have been circulated, researched, and finally produced. Anna Xenophon first mentioned an idea for a *zine* in Fall 2010—I wasn't certain what a *zine* was at first and I was even less certain whether it would be doable—but I encouraged her to talk to others. I also mentioned it to a few

students and was surprised and inspired by the creative sparks I saw ignite. Luis David Pagan, the club president at the time, and Brontis Orengo Shane, the vice president, were as eager to move on this as anyone, but connecting all the people and ideas took time. Several new officers became involved as we returned to it in the current academic year. Luis Pinzon and Luis Natal got approval and funds from the Student Advisory Council, and Mark Houston and Francisco Medina brought the process to a close as the first Editors-In-Chief

EDITORS-IN-CHIEF
MARK HOUSTON
FRANCISCO MEDINA

along with all the editors and writers. There are numerous other names I could mention. In short, this publication was a collective effort, and many people deserve praise. Please enjoy this first, entirely student-driven and created edition of *Absolute Threshold*, and join me in congratulating and thanking them for all their hard work. Bravo!

Cover Art: all-about-psychology.com,
f**kyeahpsychedelics.tumblr.com
Header Art: Francisco Medina

Stopping the Cycle of Child Abuse — A Personal Story

by Anonymous

Had I been offered an opportunity to put my abuser to justice, I would have preferred to go to jail myself rather than make further “transgression.” I felt guilty over what happened to me. This intense feeling of self-condemnation lasted well into my thirties; even after I came to understanding logically that I had done nothing wrong to my mother.

The hardest thing about my situation was that I loved my mother. I hated her too, but this hatred did not become absolute. If it had, I may have been able to do what my college friend did. When she was a teenager she took her parents to court for child abuse and willingly went into foster care. I, on the other hand, still remembered the nurturing my mother gave me as a young child. Perhaps she was only able to love young children because when I was five she experienced a mental breakdown that changed her behavior like day turns to night.

I did not realize I was being abused. My therapist later explained my refusal to acknowledge reality was a coping mechanism to protect the perfect picture I had in my mind of my mother. I could not face that I was being abused by the one person who should love me the most. It took six months of intensive therapy to be able to see that. I also learned that the early nurturing she gave me enabled me

to form healthy attachments in adulthood. Thank God a thousand times for that!

So how did the abuse affect my ability to raise children? I would not even dare to have a child of my own. I would not know how to care for a child. Although I love people and other people’s children, the thought of having my own child fills me with intense feelings of violation, anger, and an unwillingness to nurture. I really do not think any amount of learning, awareness, or therapy could change my irrational feelings. It seems to me that I am taking on my mother’s feelings toward me, times ten. That is why I have always used birth control and I have sought out partners who do not want children or already have their own. Many people find this incredulous, but I did have one counselor once who said that it is very brave of me to accept my situation and vow not to repeat the cycle of abuse on an innocent child. My decision to not have children fills me with a sense of relief and freedom. I believe I am a different kind of person and my purpose on Earth is unlike that of other people. My hope is to make other important contributions to society.

For others who share my situation I recommend considering this option. For those who already have children, I recommend therapy to ensure not repeating the same behavior. I believe repeating the cycle of child abuse has dire consequences for generations to come.

Students seeking help with abuse or depression should contact the following departments:

Center for Student Success – C249
The Counseling Center – B100
Women’s Center

Noble Nature of Counseling Psychology

by Luis Natal

Counseling psychology provides the opportunity to help immigrants sort out the many challenges we go through when moving to America. Many develop psychological illnesses such as depression and anxiety followed by suicidal behavior as a result of their struggle for survival and adaptation to a new community and language. Anyone can benefit from counseling as a resource for maintaining emotional well-being. Recognizing the role counseling plays in preventing psychological disorders, it has slowly been integrated into the basics of mental health.

However, preventive counseling is the least common resource available within our health system. The high suicidality among immigrant youths is alarming. Psychologists Cendrine Bursztein Lipsicas, MA and Ilkka Henrik Makinen, PhD, authors of “Immigration and Suicidality in the Young” say, “The relation between immigration status and suicidal behaviors in youth appears to vary by ethnicity and country of inhabitation. There is an urgent need to further progress in this field, to develop targeted public health interventions as well as psychosocial treatment for preventing suicide in youths”.

Specific background information and diagnostic criteria is required when working with adolescents. The Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association 2000) didn't specify diagnostic criteria for depression in adolescents until the year 2000. According to Riddhi Sandil in the article "Cognitive behavioral therapy for adolescent depression: Implications for Asian immigrants in the United States of America", diagnostic criteria for diagnosing depression in adults are often used when working with adolescents. Consequently, therapists who works with immigrants must learn and understand their specific needs based on their age, sex, background, their lack of sense of community, their lack of quality time spent with family or parents and the development of negative emotions and thoughts as a result of all these conditions. At the same time, the counseling psychologist must be aware that these needs and emotions are felt by the young and old alike, due to adjusting to a new community and language. Learning about cultures mastering the cultural and religious background patterns other than their own would give the counselor a wider range of possibilities in the field. Or those with prior knowledge such as first or second-generation immigrants could help those of their ethnic background. This would especially be beneficial in the culturally diverse New York City.

According to Dr. Gerald, an easy way to find out if this career is a good choice is by taking tests

such as the Holland Personality Test or the Myers and Briggs Personality Test; the results will give the student a list of suggested careers to choose from and to learn about. For a counseling psychology student, a caring personality and being capable of making decisions and connections between things and situations is vital.

According to the U.S. Bureau of Labor Statistics, the job prospects will be better for people holding a doctorate degree from a leading university and in an applied specialty. In New York State, a bachelor's degree is required in order to qualify for any position available as a psychologist's assistant. The New York State Department of Labor in their career zone website states, a graduate degree is required in order to qualify for any counseling position available. A doctoral degree is usually required for private practice as a psychologist. Furthermore, psychologists with a Ph.D. or Doctor of Psychology (Psy.D) qualify for a wider range of teaching, clinical and counseling positions in schools and universities. The CUNY system offers a bachelor's degree in psychology in twelve colleges. Among the best options are City College of New York and Brooklyn College which, unlike the other ten CUNY colleges, offer not only a bachelor's degree but also offer graduate degrees in psychology. Affordability would be a benefit of staying in CUNY, since the City University of New York is a public school. According to the CUNY website, the average tuition cost in CUNY for 2-year colleges is

\$3,200 per year, compared with a private school such as St. John's University which offers the same degree at a yearly tuition of \$33,000.

Job availability for a counseling psychologist in the U.S. varies on experience and education. In 2006, there were approximately 14,200 counseling psychologists employed in NY. It's estimated that by 2016 there will be 15,300, according to the U.S. Department of Labor Statistics the average wage for clinical, counseling and school psychologists was \$64,140 in May 2008. The middle 50% earned between \$48,700 and \$82,800, while the lowest 10 percent earned \$37,900 and the highest 10 percent earned more than \$106,840.

Immigrants in counseling psychology would have the chance to help fellow immigrants during the adjustment period and during any crisis, most importantly they can improve the quality of life in their community by introducing the idea of preventive counseling and contributing to the achievement of a healthier communities in our country and in the world.

Psychoanalysis vs. Cognitive Behavior Therapy: The Fight to Stop Depression

by Daniel Agosto

Depression is a clinical mood disorder associated with low mood or loss of interest and that

prevents a person from leading a normal life. Types of depression include: Major depression, bipolar depression, dysthymia and seasonal depression. According to the World Health Organization, "depression is one of the most prevalent diseases worldwide.". Psychoanalysis and Cognitive Behavioral Therapy are two of the many treatments for depression.

Psychoanalysis is a therapeutic procedure for the treatment of the "neuroses", an analysis of the mind. It's also the study of someone's unconscious motives and desires as shown in "various nervous disturbances and in certain manifestations of everyday life in normal individuals". Neuroses result from unfulfilled desires extending back childhood.

The first recorded case where psychoanalysis was used to treat depression, was on a patient suffering from "hysteria", a mental disorder characterized by "emotional outbursts," "susceptibility to autosuggestion," and, often, symptoms such as "paralysis" that mimic the effects of physical disorders (dictionary.com). The patient was twenty one year old Anna O, a patient of Josef Breuer from 1880 to 1882. Anna spent a majority of her life nursing her sick father and developed a terrible cough, speech difficulties eventually becoming mute which proved to have no physical basis. When her father died she refused to eat and lost feeling in her hands and feet, developed a case of paralysis, and started having involuntary spasms. She also had visual "hallucinations," and "tunnel

vision". Despite all this, specialists could not find any problems with her (Boeree).

To make matters worse Anna would have, "fairy tale fantasies," "dramatic mood swings", and made several suicide attempts, the same symptoms a patient suffering from depression might have. It was then that Breuer diagnosed her with hysteria. Breuer states that Anna would slip into "spontaneous hypnosis," or what Anna herself called "clouds," during these "trance-like states".

During these episodes an emotional event would be recalled which gave meaning to a particular symptom. An example of this would be when she refused to drink she recalled, "Seeing a woman drink from a glass that a dog had just drunk from." Once she realized the root event of why she avoided drinking water, she began drinking again. This is one way a psychologist or therapist, using this form of psychoanalysis, would treat a person with depression.

Anna spent some time in a sanatorium but through psychoanalysis, she was able to get rid of her symptoms.

Psychotherapy has been seen to work on patients suffering from depression. However a psychiatrist, Aaron Beck, who was trained in psychotherapy, felt it had too many flaws in. So in the 1950s he developed a new type of therapy to treat patients suffering from depression. This newer therapy was called Cognitive Behavioral Therapy. This therapy

is an "active," "directive," "time-limited," structured approach used to treat a variety of psychiatric disorders. It is based on an "underlying theoretical rationale," that an individual's affect and behaviors are largely determined



Photo: David Castillo Dominic

by the way in which he structures the world. The persons cognitions are based on attitudes or assumptions (schemas), developed from previous experiences.

A variety of cognitive and behavioral strategies are used in cognitive therapy aimed at "delineating," and testing the patient's specific "misconceptions and maladaptive assumptions". This approach consists of (a) monitoring negative, automatic thoughts; (b) recognizing the connections between cognition, affect, and behavior; (c) examining the evidence for and against his/her distorted thought; (d) substituting more reality-oriented interpretations for these biased

cognitions, and (e) learning to identify and alter the dysfunctional beliefs which predispose him to distort his/her experiences.

Cognitive Behavioral Therapy or CBT was first used on a patient in his mid-40s. The man had a "fairly decent job," a loving wife, four children, and many close colleagues and friends. Despite all this, the man privately suffered from "an acute tendency toward self-criticism". He was "forever searching for approval, and forever anticipating disapproval". At the time the dominant approach to the problem would be psychoanalysis, and Beck had been trained through this tradition.

Ten years later Beck's notes portray not even an ounce of the prior "confident enthusiasm," and not even a hint that he had applied any of his training in psychoanalysis to the patient. During the treatment, "nothing analytic had survived." Where psychoanalysis uncovers unconscious thoughts, Beck was more interested in the thoughts that "lie barely concealed beneath conscious awareness." Beck's new approach "scrutinizes the present-tense logic of his patient's emotions." The power and effectiveness of this approach has "led it to be adopted by a vast number of mental-health professionals".

Studies have shown that Cognitive Behavioral Therapy is effective when treating depression, especially people suffering from a minor or

moderate form of it. Some patients being treated may only need a few sessions of CBT. Patients have reported a "lessening of symptoms" after only 12-16 sessions, whereas Psychoanalysis, according to Beck, "takes years at the end of which the analyzed typically feels much wiser about the roots or his/her misery but no less miserable".

I am impressed at the fact that Freud's psychotherapy uncovers unconscious memories or impulses to treat the depression. However he fails to uncover those thoughts that lie directly beneath the conscious awareness, which is what Beck does in Cognitive Behavioral Therapy, and has been shown to work. According to the National Institute of Mental Health, two types of psychotherapies, Cognitive Behavioral Therapy and Interpersonal therapy, are two effective ways in treating depression. It helps people interpret their environment and interactions with others in a positive and realistic way as well as recognizing things that may be contributing to the depression.

However those suffering from a major case of depression may need Cognitive Behavioral Therapy in combination with antidepressants. This is where Cognitive Behavioral Therapy needs some work.

Peer Activist Learning Community

by Francisco Medina

Many students at LaGuardia Community College may ask themselves, "What's the point of learning?" They don't see the relevance of the knowledge they are supposed to acquire in their courses. Thus, they aren't motivated, and then struggle in their classes.

Dr. Eduardo Vianna with Ph.D. candidate Naja Hougaard and Dr. Anna Stetsenko of the Graduate Center put together the Peer Activist Learning Community (PALC) to address this problem. Inspired by the work of Anna Stetsenko, who posits that learning and identity are bi-directional, mutually constitutive processes, the group aims to help students discover and develop a connection between learning and the search for a path in life.

"Practically, from my experience as a teacher it was clear that students' learning struggles were connected with their life activities, their pursuits, and future aspirations," explained Vianna.

Based on psychological and critical social theories, the group engages students in a critical reflection of their motivation and attitude toward learning, discusses learning and life goals, and seeks to expand on the college experiences. PALC members engage in critical-theoretical learning to overcome conflicts, such as insufficient motivation to, interest in, and



Photo: Jerin Choudhury

attitudes toward learning. More importantly, they develop a meaning or purpose in life. The group meets weekly to discuss ongoing learning and life experiences, read about critical social theories, consider current events, and help each other overcome obstacles.

Group members tend to become active learners and show improvement in academics, critical thinking, goal setting, connectedness, and leadership. Students also use the knowledge they acquire in the group to connect with course-related knowledge and their own situation, including how they relate with families, work, friends, and other nonacademic settings. Vianna said, "Those who become consistently involved in the group for a while expand their knowledge of learning and identity and how they see themselves, their place in society, [and] what they want from life."

Michael Rifino, 21, joined the group a year ago feeling that learning was a burden and consequently worked below his potential. He was attending school to get a job and abandoned his dream of becoming an artist for a more "practical" career. The struggle to find a job that would satisfy his practical needs consumed him and left little time for learning. Rifino felt detached from current events, and, therefore was oblivious to their impact on his life. All of that began to change as he began to participate in PALC and read about Karl Marx's Theory of Alienation and Paulo Freire's Pedagogy of the Oppressed. Rifino said, "The Learning and Identity group has made my education meaningful. Discussing what we learned has given me a sense of belonging in LaGuardia. I feel [now] a part of an active community. Reading critical social theories with other LaGuardians has opened my eyes to witness my

true potential and ultimately made learning an exciting activity."

PALC encourages students to find meaning in their education. According to Keiko Matsuura, "Doing academically well merely means that their GPA is high and not necessarily that their learning is meaningful or they use the knowledge to contribute to society. In our group you can be a little more critical."

PALC also helps students become peer activists in education and beyond, supporting causes such as the fight for public higher education, budget cuts and social injustice. Most recently students protested tuition hikes and went to hearings held by the Board of Trustees. Meanwhile on campus students are becoming more involved in clubs, organizations, and motivating their classmates to do better.

For more information contact us at evianna@lagcc.cuny.edu.

Peer Activist Learning Community

An Interview with Professor Eduardo Vianna

by Francisco Medina



Eduardo Vianna

Medina: When did you start the group? How long have you been working on it?

Vianna: About 1 1/2 years ago.

Medina: Why did you start the group? In other words what motivated you? Was it because personal experience? Where did you get the idea?

Vianna: The rationale was both theoretical and practical. Theoretically, I was inspired by the insight in sociocultural theory that learning and identity are bi-directionally related or mutually constitutive processes (one creates the conditions for the other to develop). This idea has been proposed by Anna Stetsenko with whom I have worked very closely and we co-authored a paper on this topic to be published in *Human Development*. Practically, from my experience as a teacher it was clear that students' learning struggles were connected with their life activities, their pursuits, and future aspirations. I felt I need to work on

both poles (learning and identity development) in order to be a successful teacher with successful students. However, what I could do in the classroom in terms of fostering identity development was very limited. Conversely, student services that address life issues typically do not tap into learning. Thus, the idea of a peer activist learning community where faculty and students could work collaboratively to promote synergistic connections between learning and identity development. My co-investigator, Naja Hougaard, and I conceived of this work as a type of participatory action research where students could be introduced to social science research as we collaboratively investigate our learning and development.

Medina: What's the most challenging thing about the group?

Vianna: There are many challenges. One is to have students commit to this work given their crazy schedules. This project functions on a volunteer basis. Hopefully we will be able to get grants in the near future to support student involvement. Another challenge is to find topics everyone is interested and have time to devote to learning materials (academic readings, news articles, etc.). This work also depends on developing trust and commitment, which is a serious issue for many people. There are other challenges but I will stop here for now.

Medina: Do you think that members have progressed? If so

how?

Vianna: Certainly. Those who become consistently involved in the group for a while (it takes at least a couple of months) expand both their knowledge of learning and identity (connecting academic theories with their own experience-based knowledge) and how they see themselves, their place in society, what they want from life. We have seen a few dramatic changes, although others have left the group or attended it inconsistently, making it hard to assess their development. We have barely begun our analysis in earnest, though. We still need to go over our data more systematically, and we need research assistants.

Medina: Has the original purpose of the group changed?

Vianna: Not the purpose, but our method is constantly evolving. Not only are we refining our data collection methods but we are constantly reflecting on how best to engage members, how best to respond to their needs and concerns. We want group members to become actively involved in the curriculum of activities and in expanding the group.

Medina: Have you learned/gained something from the group?

Vianna: I am gaining an invaluable experience as a researcher and scholar. This has helped me move forward with the Vygotskian insight that learning and development are intimately related, including this search for democratic and critical

pedagogical practice that opens up developmental processes.

Medina: What has been [if any] the most surprising thing about the group?

Vianna: Right now we are uncovering many intricate ways in which our cultural identity is implicated in how we connect learning with our lives.

Ideology and the State

by Michael Rifino

What is the Role of ideology in society? In "Ideology and the State" Althusser proposed that ideology is crucial for the reproduction of capitalist society (1970). According to him, in addition to reproducing productive forces, reproducing 'relations of production' is also indispensable for capitalism, which means that the reproduction of labor power is a key aspect of the reproduction process. Following Marxist theory, Althusser claims that the state plays a key role in the reproduction of 'relations of production' and in the reproduction of labor power, which is accomplished by two interrelated but separate apparatuses, the repressive state apparatus (RSA) and the ideological state apparatus (ISA). The former, which operates by a singular voice and through the use of force, consists of the police, the army, and prisons. The latter, comprising the educational system, religions, family, and other institutions, plays a key role

in ensuring the reproduction of labor power with the requisite knowledge, skills, dispositions and attitudes. Thus, he places ideology as part of the state's function of reproducing 'relations of production'. In this paper I will investigate what Althusser means by schools as one of the key sites where capitalist society is reproduced and as privileged site of the ISA.

According to Althusser, the educational apparatus is the dominant ISA because this is a main site where ideology is constructed, throughout history it has become the training ground for the reproduction of labor power. In order to collaborate with new technologies, skills have to be mastered. At one point in time it was sufficient to develop diversified skills to serve capitalist production under apprenticeships. Later on, due to historical development of production, requiring increasingly diversified skills, it was no longer enough for labor power to reproduce itself only in the work site in the firm. Thus, there was a shift toward schools as a key site that serves to sustain the reproduction of labor power. In schools, students learn how to read, write, and do basic math. These skills guide them to certain job positions required for production. However, school learning goes beyond subject matter. As Althusser points out, students also learn etiquette, how to behave in public, and how to handle human relations. Moreover, skills are taught in a conformist way and knowledge is presented as neutral, not connected to ideology. Thus,

schools lead students to learn the rules set by the ruling social class, which produce skilled, docile workers that will not question their subjection to the status quo. This is the crux of Althusser's argument of how schools reproduce labor power in capitalist society. In other words, schools not only lead to the reproduction of skills, but also to the reproduction of an ideology of passive positioning towards the status quo. For this reason, Althusser claims that the proper role of schools should be to teach against the ruling ideology, to teach for the practice of uplifting the veil of the ideology that is submerged in schools.

In sum, Althusser argues that ideology plays a key role in reproducing class-based society, and he points to schools as the main site where this takes place. I am persuaded by his arguments on schools as teaching an ideology that subjects students to the ruling class. After reading 'Ideology and the State', it is clear where to connect his argument with what I experienced in the schools I attended. For example, my high school did not offer courses that taught critical social concepts. The curriculum of the courses fit what Freire described as a banking type of education. Borrowing Freire's notion, knowledge is transmitted in schools as deposits made in students' heads who receive those as absolute truths whose assumptions they need not question or critique. Courses that concentrated on building technical skills dominated the curriculum and vocational school was heavily

instilled upon us. No wonder we conformed to the rules (although some rebelled against them) and accepted our limited role in society. Luckily my experiences in college helped me recast all that.

Drug Treatment Center Interview and the Importance of Harm Reduction

by Mark Houston

Encompassing nearly a full block between 9th and 10th avenues on 57th street sits St. Luke's Roosevelt Hospital. As you pass the valet attendant in the drive, and enter the building without being questioned by security, you start to get a feel for the clientele inhabiting the wings of the hospital. St Luke's is a private facility and appears to cater to those with private insurance. The occupants of the 8th and 9th floors arrived here, not only by their own hand, but also by their own will. These floors host The Addiction Institute of New York's intake, individual and group therapy, and residences. In a converted patient room on the 8th floor, still equipped with tracked curtains, a hand wash sink, and papered with religious words of inspiration, Robert Corsidine, L.M.S.W. sits contemplating the most effective treatment for the clients in his group session. A thin frail girl in her early twenties enters the makeshift office. Her long blonde hair is disheveled and it is difficult for her to maintain eye contact with Robert. As if a child, ashamed and shy, she crosses her legs and twists her body back and

forth. Standing there in a miniskirt, her legs look even thinner in the stance than had first appeared. Outside the door are packages containing all of her possessions, wrapped tight and ready for a move. Through the conversation I learn the feeble girl was released the week prior and returned, as Robert put it, "Without a plan." Her request was to rejoin the group. By the quiver in her voice the hospital seemed as the only safe place she had, and she was once again the responsibility of Robert. After reassuring her acceptance, Robert asked her to step outside so we may begin our interview.



Photo By: Ambro

Robert is in his mid forties, short hair and a five o'clock shadow that appeared the day prior. He is wearing black denim, loafers and a vertically striped maroon and faded black button down shirt. He is friendly, but formal, and polite, yet reserved. I learn that Robert has been at The Addiction Institute of New York (AINY) for close to 15 years. Having been placed there for an internship with the M.S.W. program from St. John's University, he took to the design of group therapy and was eventually hired as a Substance Abuse Clinician. Robert is now

attending Hunter's doctoral program for Psychology.

I began by asking Robert how someone finds his facility. According to Robert, clients find the AINY mainly by referral from either their primary care physician or word of mouth from those who have received treatment prior. There is also the possibility of a recommendation from an ER nurse or doctor. What is evident is that if you did not have health insurance, AINY was not the place for you. Robert mentioned those without health insurance had the option of visiting an office in the lobby where you would encounter someone who would assist with applying for Medicare or Medicaid. Being a private hospital, I got the feeling this was not a common occurrence.

All patients undergo an initial evaluation determining their immediate needs. If the patient is in the process of withdrawal they are sent to a clinic that can manage the process most effectively. After completing this stage they are admitted into the program. My initial thought was about the services provided to one who enters into the program and how they are assisted in being successful. By successful I meant abstinent. It soon became apparent that AINY's focus was on survival and the next step for their patients. I would come to find out that AINY practices a method called Harm Reduction. Robert describes his intake interview process as:

"client driven... [I]t's my job to find out what a client wants to

do about their substance abuse... So some people, for example, want to come here and not use anything that's considered recreational or not prescribed... [T]hat's the clear-cut abstinence approach to recovery. At the same time, we will have people come here who want...to use [drugs in] less chaotic ways, who just want a glass of wine at dinner, who only want to use coke for special occasions. So it's my job to engage with that person to find out if that could work for them."

I was a bit taken aback by his willingness to aide in his patients continued drug use. But after I thought about it, the point of Harm Reduction is to remove the user and society from immediate harm. We understand drug use is a complex issue and has no immediate remedy. The process is multi dimensional and many factors play into addiction. The point is to build upon steps in hopes that the user sees a value in safer and reduced use. Therefore, if the user is willing to use clean needles as a first step, then they are advancing towards improvement. At the same time Robert is committed to assisting the alcoholic who wants to stop drinking at lunch so they may keep their job. Although the user will continue to drink once they get home, their personal goal of not drinking during work is seen as a success because the user has accomplished their goal of keeping their job. This is also a part of Harm Reduction I did not initially think of. Harm does not have to imply physical pain or damage. Harm Reduction also

pertains to psychological and social issues of an individual.

The way in which Robert described his approach presented itself as casual. He did not come across as someone who gave instruction as much as advice or recommendations. The information he provided his patients was informative and not at all judgmental. He described a case where a meth user, who wanted to stop using, came to him for assistance. They said they, "never developed a problem with alcohol and they want to continue to drink". Robert's concern was that if one addiction were taken away the emphasis would be placed on the non-addicted drug. Through their therapy sessions Robert evaluated his patient's progress and looked for signs of alcoholism in the absence of meth use. For instance, if the patient had missed work, was it the result of increased alcohol abuse or continued drug use. If due to alcohol, it was Robert's responsibility to shine some light on the interference of alcohol in the user's life.

Robert's practice of Harm Reduction could very well have aided in keeping that waif like girl safe for one more day. He accepts her limitations and understands that he cannot make her want something she does not want for herself. His goal is to assist in her here and now. One struggle at a time, Robert supports his clients in making steps towards self-made goals to live a healthier, more productive life.

On the Paradox of Choice

by Allan Rodriguez

Over the years, things seem to be getting better and better, and we don't find ourselves satisfied with the choices that we make. Choosing a pair of pants that does not fit seems impossible when there are so many options available. In this case, who is to blame? The world delivered, so maybe it is the individual that is the problem. The blame shifts from the product to the person. This is an example in the trivial sense, but can be applied to more important issues. Buying a pair of pants is not the same as buying a home, or choosing which college to go to. The latter demands that we spend more time thinking about it. What happens when we pick a college that isn't the best? And how are we supposed to know which is better without comparing it to the alternatives. Ironically it is the idea of comparison that takes away from the joy that could've been had.

It's the question of "what could've been?" that lingers in the air like bad breath. This is a common question that arises every time one finds himself presented with a choice. Think of all the choices that you have throughout your day. Some may not be important as others, but an increase in options has made it harder for one to choose. After you have gone through the process of elimination, you are left with the memory of the other choices. The question of "what could've been?" haunts whatever

choice you have made. Whenever we choose something, we are at the same time, not choosing something else.

How many times have you heard the phrase "sure this is good, but I've had better?" This addresses the idea of expectations that, as a society, has collectively become more demanding. Our expectations have grown to a colossal size that, even something that is the best we've had, is robbed of its value since it does not live up to our expectation. It has become an idealized version of something that doesn't exist in the real world. This is the type of thinking that keeps people searching, waiting, or leaving them miserable because they can't find what they think is the "best." The truth is that there is no such thing as the "best." Why? Because there will always be something that is better. It is until we become satisfied with the choices we make, that we can enjoy our decision.

Let's take the opposite view of what I have said so far. Imagine, as hard as it may be, a world where we had fewer choices. Let's make it, in this example, that for everything we only have two choices. Then we would be forced to choose one or the other. It would seem as if we had less freedom than we did when we had more choices. We would most likely expect our choice to be disappointing. This is where the surprise comes in. What happens when, what we thought would be a bad experience, turns out to be good? We go from bad to good, instead of good to bad. Starting off with lower

expectations leaves room for happiness, whereas having high expectations and not getting what we expect, can only lead to unhappiness. But getting rid of options would simplify our choice. I think it is safe to say that people want more control over their own lives; to express themselves whichever way they choose.



Photo: David Castillo Dominici

I have recently experienced something that, I think, is common to all college students that will transfer to another school. According to all of the research that I have done, each college describes itself as unique, and each college offers different programs. This means that I have to spend more time on my decision, since it has become more complex. The consequences of making the wrong decisions could all be pinpointed into how they were presented to begin with. Because there are so many choices, one might be put off in actually choosing one, and leave it for later. And when one makes a decision, it's hard not to think about the other options that you did not have time to research. It also puts the blame on the individual since there are a lot of options available, there is no reason one shouldn't find one that is the "best." Even though it is also

rare to find something that is better in all possible ways than the alternatives. So if the school does not feel like the best, all the effort put in the decision makes one feel disappointed and continues to blame themselves. There is a feeling of regret that comes in when we compare something to the other possible choices. We demand a satisfying result with the effort we put in, but as the number of options increases, so does the likelihood of failure.

We have to accept the fact that we have no choice, but to have choices. The problem is not the choice; it is that in our society there is so much that "more becomes less." Psychologist Barry Schwartz said "freedom of choice eventually becomes a tyranny of choice." Imagine a fish in a fishbowl who thinks he can be anything he wants to be, with no limits. At first, it seems unlikely since the fish is constrained within the fishbowl where not a lot is possible. But if we break the fishbowl so the fish has endless possibilities, it will debilitate the fish. The same idea can be applied to us.



ABSOLUTE THRESHOLD

THE PSYCHOLOGY CLUB PUBLICATION

On behalf of the Psychology Club at LaGuardia Community College, we would like to thank all involved in the introductory issue of *ABSOLUTE THRESHOLD*. Specifically we would like to thank Mayra Vega and Oscar Russi for assisting in editing down the student submissions to a publishable size. We would also like to thank Dr. Lara Beaty for her knowledge as well as the guidance she continues to give to the club members and officers.

We are extremely proud of the accomplishments of the student body and hope to see even more submissions to our journal in the coming sessions.

Mark Houston and Francisco Medina
Editors-In-Chief

Events for this Semester:

First Annual Social Science Student Conference

- Monday, May 21
Little Theater 10am-12pm
E242 12pm-6pm
- Tuesday, May 22
E242 10pm-6pm

Club Meeting Topics:

- Student Depression
- Which CUNY 4-year is best for your psychology interests?

Feel like talking about any of these articles? Feel like writing an article in the next publication? Come talk to us! For more information visit studev.laguardia.edu/psychologyclub or facebook.com/groups/42615627844.

Club Info:

Meeting times Wednesdays 2:15 PM to 4:15 PM
Special Events Fridays 2:15 PM to 4:15 PM
Room numbers TBA
Mentor: Professor Lara Beaty