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Emotion

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It is virtually impossible to give a definition of emotion that all psychologists will accept, although there is fair agreement that such phenomena as fear, anger, joy, disgust, and affection should be classified as emotions. Nearly all theorists relate emotion in some way to motivation, and all assign important roles in emotion to the functioning of the autonomic nervous system. All, except the most rigidly behavioristic, classify emotions as *affective* phenomena.

One difficulty in defining emotion is that emotional phenomena are exceedingly complex and must be observed and analyzed from different points of view. An emotional episode can be observed and studied as a conscious experience from the point of view of the experiencing individual. It can be analyzed from the point of view of a behavioral scientist, a physiologist, a social scientist, or a psychiatrist.

Emotion as a conscious experience

Emotions and other affective processes. The term "emotion" is sometimes used to include the whole gamut of affective experiences, but this usage is too broad. Traditionally, the term applies to a single variety of the affective process. The term "affect," in psychiatry, designates a class of experiences including, among others, emotions, moods, and guilt feelings.

The main varieties of affective processes can be classified as follows: (1) A simple feeling of *pleasantness* is associated with such sensory stimulations as the odor of a perfume, a sweet taste, or a musical harmony, and a feeling of *unpleasantness* with a painful burn, a bitter taste, or a bad odor. (2) Pleasant *organic feelings* are associated with good health, buoyancy, or sexual satisfaction, and unpleasant feelings with hunger, thirst, fatigue, cramps, or headaches. (3) *Interests* are mild feelings of pleasantness associated with games, sports, plays, and other activities. *Aversions* are unpleasant affects associated with the rejection of foods, persons, and activities. (4) *Sentiments* are feelings associated with something valued or held sacred; they are based upon past experience and training. There are patriotic, moral, religious, aesthetic, and intellectual sentiments. The term "sentiment" also refers to a stable disposition to react with feeling to a class of objects or situations. (5) *Emotions* are acute affective disturbances arising from the psychological situation and expressing themselves in conscious experience, behavior, and physiological processes. (6) *Moods* are typically less intense and more chronic than emotions but are similar in affective tone and underlying dynamic mechanisms. (7) *Temperament* designates the affective aspect of personality as a whole. Temperaments are said to be

apathetic, moody, phlegmatic, cheerful, vivacious, depressed, sanguine, etc. Although temperaments are stable, they are known to change with age, health, and environmental conditions.

In this classification, it will be noted that emotions and moods are distinguished, but they are closely related. An emotion may calm down into a mood or a mood build up into an emotion. Thus a fright may taper off into a mood of anxiety; anger may subside into a mood of hostility or resentment; laughter may become a mood of cheerfulness; weeping, a mood of sorrow or grief. Depression is a mood characterized by the decrease of an individual's vitality, hopes, aspirations, and self-esteem. The mood may be a mild feeling of tiredness or sadness. In psychopathic states a depression may become a profound apathy with psychotic disregard for reality and with suicidal tendencies. Moods and emotions cannot be sharply distinguished; any line of distinction is arbitrary.

“Emotion” is a substantive term; the adjective “emotional” would better characterize the process. Emotional activities are commonly contrasted with Page 36 | Top of Article rational, intellectual, or even mental processes, as well as with motivational processes.

Emotions and cognition. Emotions are elicited by the awareness of a situation in which an individual finds himself. Magda B. Arnold (1960) argued that emotional behavior follows the intuitive appraisal of a situation. She defined emotion as a felt tendency to move toward anything intuitively appraised as good (beneficial) or away from anything intuitively appraised as bad (harmful). Thus, the feelings of a male enticing a female are emotional; the feelings of a man running a race for his life are emotional.

The cognitive basis of emotion becomes clear when we consider conditions that elicit emotions in different societies. For example, among the Negroes of the Niger delta, it is a rule that if a woman gives birth to twins, she and the twins are put to death. If the mother is allowed to live, her life is little better than a living death, for she becomes an outcast and must live the rest of her days in the forest. But among the Bankundo of the Congo valley, the mother of twins becomes an object of veneration. She is entitled to wear a special badge and her name is changed to “Mother-of-Twins.” Obviously, the type of affective arousal by such an event as the birth of twins depends upon the beliefs, attitudes, and practices of a group.

Emotion and motivation. Although it is generally agreed that emotions bear an important relation to motivation, there is disagreement concerning the exact nature of the relationship. In general, there are two main views: First, it is claimed that emotion is a conscious experience associated with purposive, organized activity. Second, it is claimed that emotion is a disorganized experience due to conflict, frustration, thwarted expectation, tension, or the release of tension.

Emotion as organized experience. The first view of emotion is illustrated in the writings of William McDougall (1908), who defined emotion as the consciously felt aspect of instinctive activity. He paired instincts with emotions: the instinct to flee from danger was paired with the emotion of fear; the instinct of pugnacity was paired with the emotion of anger; parental instinct, with tender emotion; sexual instinct, with lust; self-abasement, with the emotion of subjection; self-assertion, with the emotion of elation. McDougall regarded instinctive behavior as always purposive, goal-directed, and integrated, and emotion as the felt equivalent of instinctive behavior.

Other psychologists, e.g., Carl R. Rogers, have emphasized that “emotion” facilitates goal-directed behavior. Feelings of success, self-confidence, and cheerfulness do, in fact, facilitate performance. A question can be raised, however, whether these feelings are properly classified as emotions.

Emotion as disorganized experience. The second view—that emotion is a disorganized experience dependent upon a dynamic disturbance—is widely held by psychiatrists, clinical psychologists, and others who are concerned with health, counseling, and human adjustment. Thus, the psychologist Edouard Claparede argued that emotion occurs precisely when adaptation is hindered for any reason whatever: the man who can run away does not have the emotion of fear; fear occurs only when flight

is impossible. Anger is experienced only when one cannot strike his enemy. The uselessness, or even the harmfulness, of emotion is known to everyone, said Claparede.

There has been considerable controversy over these basic concepts. Robert W. Leeper (1948) regards disorganization as a concept inadequate to define emotion and prefers a “motivational” definition. Paul T. Young (1949), in a reply to Leeper, pointed out that the problem is one of definition and emphasis. Some affective reactions are organized and organizing; some facilitate performance. But the term “emotion” has been used traditionally to define a special class of affective processes characterized by disturbance, upset, and disorganization. Affective disturbances, both pleasant and unpleasant, assuredly exist. If there were no disturbances, the term “emotion” could be dropped from the psychological vocabulary, because existing motivational and affective terms and concepts are fully adequate for the descriptive analysis of organized, adaptive activity.

Emotional behavior

The radical behaviorist does not recognize conscious feelings as such but restricts the science of psychology to the phenomena of behavior and associated bodily processes that can be objectively observed. It was John B. Watson, the founder of American behaviorism, who defined emotion as “an hereditary pattern-reaction involving profound changes of the bodily mechanism as a whole, but particularly of the visceral and glandular systems” (1919, p. 165). He described the stimulating situations and the pattern-reactions for three basic emotions in the infant: fear, rage, and love.

The pattern-reaction theory of emotion has been popular with physiologists and physiological psychologists for obvious reasons: The patterns of reaction appear reflectively under specified conditions of stimulation. They resemble simple reflexes but are more complex. They are well integrated. The emotional patterns can be conditioned and extinguished. The neural mechanisms that regulate many of the emotional patterns have been described and localized within subcortical regions of the brain.

Among the patterns of reaction that have been described and analyzed are the following: There is the rage pattern in cats, dogs, and other animals, as well as a similar pattern called “sham rage” in decorticate animals. There are patterns of escape, including impulses to run or fly or dart away when startled and patterns of defense that differ from species to species. There are male and female patterns of sexual response, the startle pattern in man and other animals, and the disgust pattern. There are internal patterns of visceral and glandular response that differ in hostility and fear. There are human patterns of facial expression—smiling, laughing, crying, and weeping. There is no doubt about the objective existence and functional importance of these patterns of reaction.

Critique of the pattern-reaction theory. Despite the obvious advantages of a pattern-reaction theory of emotion, there are certain difficulties. The theory does not distinguish between emotional and non-emotional patterns. Coughing, sneezing, hiccoughing, sucking, swallowing, and blinking are well-integrated reflexive patterns that are frequently accompanied by changes regulated through the autonomic nervous system. No one regards these reflexes as emotions. Again, the startle pattern, described in detail by Carney Landis and William A. Hunt, was regarded by them as a general skeletal reflex rather than as a true emotional pattern, because startle is completed in the fraction of a second before visceral responses can get under way.

Further, it is difficult to specify the grouping of elements that constitute an emotional pattern. For example, Watson claimed that “fear” is an innate emotional pattern in infants; but his description of “fear” included patterns known to be more elementary: crying, catching the breath, the startle response, possibly the Moro reflex, and an impulse to crawl away. Watson’s “fear” is thus a complex of more elementary patterns.

The pattern-reaction concept disregards the acute affective disorganization that is characteristic of emotion. And, further, the observed patterns do not correspond to the “emotions” of everyday life. What patterns, for example, correspond to mother love, pride, embarrassment? It would be wiser, we believe, to describe the patterns of reaction that occur *in* or *during* emotion for their own sake than to define emotion as a pattern of reaction.

The expressions of emotion. The objective expressions of emotion have been observed and studied since the earliest times. Charles Darwin (1872) made detailed observations on emotional behavior in man and other animals. After studying the data, he formulated three principles of emotional expression.

First, Darwin believed that many expressions of emotion are reduced segments of biologically serviceable acts or acts that once were serviceable in an earlier stage of evolution. Thus an angry man raises the lips involuntarily and shows the canine teeth although he does not intend to bite. The complete expression would be biting and hostile attack.

When a dog is about to attack, it approaches its enemy with a stiff gait and tail erect; the head is slightly raised; the hair, especially along the neck and back, bristles; the ears are pricked up and directed forward; the eyes are wide open and have a fixed stare; the animal shows its teeth and growls. No one is likely to misinterpret the significance of this emotional behavior. Even a small part of the total reaction, e.g., showing the teeth and growling, expresses hostility.

Second, Darwin pointed out that some emotional expressions are directly antithetical to biologically serviceable behavior. To illustrate, suppose the hostile dog suddenly perceives that a man it is approaching is not an enemy but its beloved master. The bearing of the animal instantly changes. Instead of walking upright with a stiff gait, the body sinks downward or even crouches; the animal's movements are flexuous and supple; its tail, instead of being stiff and upright, is lowered and wagging from side to side; the hair is smooth; the ears are depressed and relaxed backwards; its lips hang loosely, and it salivates; the eyelids become elongated, and the eyes no longer appear round and staring. The behavior of the friendly dog is directly antithetical to that of the hostile animal.

Third, Darwin recognized that the above two principles do not explain all expressions of emotion. He formulated a third principle: Some emotional expressions can be explained only in terms of the constitution of the nervous system and associated bodily mechanisms. For example, the writhing of an animal during the birth of young can be explained only in terms of bodily constitution. The excessive activity is neither biologically serviceable nor antithetical to a serviceable act.

Emotional and social expressions. In an experiment on the facial expressions of emotion, Carney Landis (1924) drew an important distinction between *emotional* and *social* expressions'. The emotional expressions, he said, are involuntary and reflexive. They involve changes in the skeletal musculature, glands, and smooth muscles. They are regulated by neural mechanisms that include processes within the autonomic nervous system. The social expressions are voluntary and learned.

Otto Klineberg (1938) studied expressive behavior as recorded in the Chinese novel and drama. He found that many phrases in the Chinese language describe involuntary changes that anyone will recognize as emotional. For example, fear is indicated by such expressions as “every one of his hairs stood on end, and the pimples came out on the skin all over his body” and “they were so frightened that their waters and wastes burst out of them.” The meaning of other expressions, however, would not be recognized by persons in Western society. For example, the phrase “they stretched out their tongues” indicates surprise; “he made his two eyes round and stared at him” means anger; “he scratched his ears and cheeks” (in the novel *Dream of the Red Chamber*) means happiness; “he clapped his hands” is likely to mean worry or disappointment.

These conventional expressions are culture-bound. They serve to communicate feelings within a group as spoken words convey meanings. We have all learned, of course, to express joy, sorrow, concern, amusement, and other feelings sympathetically, as actors do on the stage. The voluntary and conventional expressions are not true reflexive patterns of emotion. [See EXPRESSIVE BEHAVIOR.]

The physiology of emotion

Walter B. Cannon (1915) supplemented and extended the Darwinian doctrine of biological utility by carrying the principle of adaptation to the interior of the body. In a series of experiments, he showed how the bodily changes in pain, fear, and rage are serviceable and adaptive in a struggle for existence. During a biological crisis, widespread organic changes mobilize the energy reserves of the body for a prolonged fight or flight.

During an emergency there is a diffuse discharge across the sympathetic nervous network and increased secretion of the adrenal glands. This neural and glandular discharge produces widespread bodily changes: (1) cessation of processes in the alimentary canal, thus freeing the energy supply for muscles and brain; (2) shifting of blood from abdominal organs to the organs immediately essential to muscular exertion; (3) increased vigor of contraction of the heart; (4) discharge of extra blood corpuscles from the spleen, thus facilitating the process of oxygenation; (5) dilation of the bronchioles, along with deeper respiration; (6) quick abolition of the effects of muscular fatigue through adrenal discharge; and (7) mobilization of sugar in the circulation. All of these changes, Cannon claimed, are directly serviceable in making the organism more effective in the violent display of energy that fear, rage, or pain may involve.

Critique of the emergency theory. Physiological studies (for example, Arnold 1960) have pointed to weaknesses in Cannon's emergency theory of emotion. Critics agree on the following points: (1) Emotional processes are a function of the entire autonomic nervous system, not of the sympathetic division alone. The sympathetic and para-sympathetic divisions of the autonomic system function simultaneously and reciprocally in fear, rage, "sham rage," pain, general excitement, and sexual and other emotions, producing patterns of visceral response that differ from one emotional state to another. (2) Whereas Cannon thought that the secretion of epinephrine was the main hormone in the defensive fight-flight reactions, it is now known that there are two chemical factors—norepinephrine and epinephrine—involved in this reaction. These two hormones are secreted independently and have different physiological effects: norepinephrine appears to be concerned with hostile states, and epinephrine with fear and anxiety. Hormones from the pancreas and pituitary body also are involved in emotional reactions. (3) The autonomic nervous system is on continuous duty 24 hours a day, and the bodily changes produced during a biological crisis correspond to departures from normal conditions. The autonomic system has two main functions: first, it prepares the body to respond defensively to danger; second, it plays its major role in maintaining homeostasis. (4) Cannon emphasized the utility of bodily changes in emotion, but many changes are disruptive, disturbing, and disintegrating rather than an aid in adaptive behavior.

Cannon's work should be brought into relation with that of Hans Selye (1956) upon the general adaptation syndrome and the adjustments of the organism to stress [see STRESS].

The neural basis of emotion. The phylogenetically older structures, collectively, and the limbic system and hypothalamus, in particular, are actively involved in pleasurable and painful experiences, in emotional behavior associated with fight, flight, food, and sex. We are just beginning to understand the central dynamics of the emotional reactions.

The hypothalamus is of critical importance in the regulation of emotional behavior. It has long been recognized as a center of endocrine and auto-nomic-nervous-system control. It forms a critical Page 39 | Top of Article juncture in the circular feedback system that regulates neural impulses concerned with emotions and neuroendocrine activity. The hypothalamus influences and is influenced

by the reticular activating system, the limbic system, secretions of the pituitary, and other endocrine glands, as well as by the neocortex.

The explorations of the reticular activating system by Magoun and associates (Magoun 1958) have altered neurophysiological thinking about motivation and emotion. It is now known that every sensory stimulation has two kinds of effects upon the cerebral cortex: (1) impulses discharged through thalamic nuclei are relayed to the cortex, where they provide sensory information; (2) sensory stimulation also sends impulses through collaterals into the reticular activating system. These impulses are conducted over multisynaptic pathways to the cortex, where they have a nonspecific activating influence. The degree of activation varies with intensity of stimulation. In emotional excitement there is a high level of cortical activation, as Donald B. Lindsley has shown in studies with the electroencephalograph.

The limbic system has been called the “visceral brain” by McLean (1949), who considers that it mediates visceral needs rather than ideational processes; it is concerned with feelings rather than with symbolic activities. The frontotemporal limbic activities may be concerned with self-preservative behavior; the more posterior regions, with sexual behavior and sexual hormones.

The limbic system is involved in positive and negative affective arousals. James Olds (1955) implanted bipolar needle electrodes within the limbic system of rats' brains and demonstrated that electrical stimulation of subcortical points could be either rewarding or punishing. When stimulated within the septal area, the rats acted as if they were pleased; but when stimulated within the *medial lemniscus*, the animals acted as if the stimulation had hurt them and had been unpleasant. Clearly the neural locus of affective arousals, physiological drives, and emotions is being penetrated. [See NERVOUS SYSTEM, *article on* BRAIN STIMULATION.]

The dynamics of emotion

A dispositional approach. According to David Rapaport (1942), a good deal of confusion concerning the definition of emotion has been the result of a failure of investigators to distinguish between the phenomena of emotion and the underlying dynamic mechanisms. The phenomena of emotion are complex but can be analyzed from several points of view. The phenomena include (1) the consciously experienced affect, (2) the emotional behavior, and (3) the physiological processes occurring during emotional upheavals. The dynamic mechanisms, in contrast, are always inferred or assumed.

Psychologists assume persistent dispositions that were originally formed by emotional experiences. For example, an intense fright may produce a phobia for high places, enclosures, blood, or some other thing. The grounds of a phobia may seem unreasonable to the subject, but nevertheless the fear persists. Children normally develop fears of thunder, darkness, death, insects, ghosts, and other things on the basis of some fright. The emotion clearly leaves a disposition to fear [see PHOBIAS].

Attitudes and motives are formed on the basis of emotional experiences. The story is told that when Abraham Lincoln saw slaves being sold on the New Orleans market, he was so disturbed emotionally that he resolved: “If ever I have the chance, I will hit that thing hard.” The emotional disturbance left upon him an indelible imprint that later may have influenced his decisions and actions.

A dispositional approach to the study of emotion implies a *temporal* dimension. Whenever we speak of emotional development, emotional maturity, or emotional stability, we imply a persisting individual with persisting dispositions.

Dispositions include memory traces, attitudes, beliefs, specific motives, expectancies, hopes, and desires, as well as conflicts and unsolved problems. All of these are residues from the past. Among the dynamic conditions that produce emotional upsets, moods of anxiety, depression, and the like are conflicts, frustrations, thwarted expectations, successes, failures, tensions and the release of tensions,

painful stimulations, and other factors of stress. A dispositional approach to the complex phenomena of emotion can bring unity out of the diverse data.

Emotion and mental health. In an address to the American Neurological Association in New York City in 1876, George M. Beard maintained that disease might appear and disappear without the influence of any other agent than some form of emotion. Fear, terror, anxiety, grief, anger, wonder, and a definite expectation he regarded as mental conditions likely to produce disease [see Lewis 1959, p. 8]. Beard argued that certain emotional states could neutralize therapeutics and increase the effects of drugs. At the time, his ideas were new and startling; later the ideas were recognized in a movement known as psychosomatic medicine.

Today, it is widely accepted that persistent emotional disturbances constitute an important factor in certain disorders, such as peptic ulcer, essential hypertension, rheumatoid arthritis, ulcerative colitis, bronchial asthma, hyperthyroidism, and neurodermatitis. The health of a patient is strongly influenced by stressful conditions of living that produce emotional traumata, such as financial failure, bereavement, insult, injury, unrequited love, threatened divorce, and loss of self-esteem. These several factors are well recognized by clinical psychologists and psychiatrists.

Emotion plays an important role in psychotherapy. The psychiatric examination is concerned with the whole personality but places special emphasis upon emotions as related to thought processes. During an interview the psychiatrist observes emotional reactions as the patient talks and seeks to elicit thoughts that accompany the emotional reactions. A dominant emotion is associated with something important to the patient, something that affects him deeply. Why it is important can be learned only by getting the patient to tell his thoughts.

Psychoanalysts have long recognized the importance of affects, especially repressed emotional experiences, in the etiology and treatment of neuroses. Some repressed hostility or an unsolved emotional conflict, possibly unknown to the patient, may underlie neurotic symptoms. Free association, aided recall, and the interpretation of dreams, along with free emotional expression, may reveal unconscious motivations and alleviate the mental disorder.

According to Robert W. White (1948), psychotherapy is not an intellectual process. It has wrongly been said that the way to bring about readjustment is to help an individual understand his problems. Awareness of motivations and frustrations on the cognitive level is helpful but not enough to effect a cure. Psychotherapy operates in the sphere of emotion. The main aim of psychotherapy is to provide corrective emotional experience by relaxing the subject's defenses and permitting him to reappraise his anxieties. In the major methods of psychotherapy, the subject is encouraged to *feel*, to express his emotions.

It should be pointed out that emotional upsets are only one manifestation of neurosis. There are other aspects, such as dissociation, delusion, amnesia, tics, and functional paralyses. Emotional upsets appear also in psychoses and disorders that have a definite organic basis as well as in normal everyday living.

In the light of the above discussion, an emotion may be defined as an acute affective disturbance originating within the psychological situation and expressing itself in conscious experience (affect), emotional behavior, and physiological processes. The dynamic determinants of emotion include conflict, frustration, thwarted (or satisfied) expectation, tension or its release, painful stimulation, threat, insult, and similar conditions of stress and relief. Clinically viewed, an emotion is a persisting dynamic disturbance within the individual that may influence his health, happiness, and well-being.

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[*Other relevant material may be found in* AFFECTION ; AGGRESSION ; CONFLICT ; DRIVES ; MOTIVATION ; SYMPATHY AND EMPATHY .]

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