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Induced goal conflicts affect motivation, wellbeing, and strategies in complex problem solving.

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Managing multiple and conflicting goals is a demand typical to both everyday life and complex coordination tasks. Our approach combines elements from classical motivation psychology (field theory, achievement motivation) and empirical work on conflicts among long-term personal strivings (e.g., Emmons and King) and places them into the context of experimental, cognitive psychology. In Experiment 1 ($N = 69$), participants dealt with a game-like computer simulation involving a predefined relation among two goals: independent, mutually facilitating, or interfering with one another. As expected, goal conflicts entailed lowered motivation and wellbeing. Participants' understanding of causal effects within the simulation was impaired, too. Behavioral measures of subjects' interventions support the idea of adaptive, self-regulatory processes: reduced action with growing awareness of the goal conflict and balanced goal pursuit. Experiment 2 ($N = 42$) endorses the hypotheses in an extended problem-solving paradigm of four conflicting goals and supports the results and interpretation.

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The affective body: How embodied posture determines emotional experience.

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We tested the idea that body posture that was either congruent or incongruent with an action tendency of an emotion would influence the emotional experience. Recently, Harmon-Jones and Peterson (2009) found that participants who were supine and then received an insult showed less shifts in left frontal cortical asymmetry than individuals who were upright and insulted, suggesting that body positioning dampened the experience of anger. We examined the full complement of this idea in a 2 (emotion: shame, anger) \times 3 (body position: withdraw, neutral, approach) design. All participants completed a math task which was designed to either evoke shame or anger while participants were either positioned in a withdrawal orientation (leaning back, arms crossed in front of chest, chin down), approach orientation (leaning forward, arms out) or naturally. We measured self-report, autonomic nervous system reactivity changes, and behavioral outcomes. Early data suggest that body positioning interacted with the emotion manipulation such that incongruent body positions attenuated physiological responses.

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Don't argue with yourself when you want to fall asleep: The links between impulsivity, self-attacking, and insomnia.

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The present study explored how people cope with feelings of shame in the wake of impulsive behavior and how their motivational stances toward shame interfere with sleep. A sample of 290 university students completed the UPPS Impulsive Behavior Scale, the Compass of Shame Scale, the Bedtime Counterfactual Processing Questionnaire, and the Insomnia Severity Index. The Compass of Shame Scale assesses the use of four distinct strategies of shame regulation: self-attacking, attacking somebody else, withdrawal, and avoidance. Path analyses revealed that the effect of impulsive urgency on counterfactual processing at bedtime is partly mediated by the use of self-attacking in response to feelings of shame. In accord with previous findings on regret-related insomnia in elderly people (Schmidt, Renaud, & Van der Linden, submitted), these results suggest that self-attacking is particularly pernicious to the process of falling asleep because this motivational stance leads to a rise of counterfactual thoughts and emotions at bedtime.