Alexi-what?

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Specific Purpose: At the end of my speech, my audience will exhibit healthy emotional repression behaviors instead of exhibiting any kind of Alexithemic behaviors.

Central Idea: I will describe the differences between healthy emotional regulation and Alexithymia, as well as the results of Alexithymia, its presence in other cultures, and ways of coping with Alexithymia.

Analysis of Audience and Situation:

Demographic factors: My audience will be comprised mainly of students and a professor within the age range of 17- mid 30’s. The audience is predominantly female, but there are a few males. There is and assumed mixture of sexual orientation, religious preference, political affiliation, socioeconomic status, and membership in activism/awareness groups. There are also several international students within the class, mainly from China.

Taking into account the average age within the class, I will need to be aware of any subject matter that might go over the head of the average 17-21 year old, and will need to provide sufficient definitions for any complicated material. With my audience being primarily female, the subject of emotion will be a little more comfortable of a topic for them, but I will also need to provide adequate attention retaining material so that the males in the audience will stay involved in my presentation. I do not believe that sexual orientation, socioeconomic status or group membership will have much impact on my topic, but I will need to be constantly scanning the room so that I can address any issues of unintended offense of discomfort promptly. In regards to our international students, I have researched the affects of Alexithymia on Chinese youth and have included such information in my presentation so that we, as a class, can see the affects of this disorder within both cultures, and so that the presentation will be more relatable to this subgroup within my audience.

Psychological factors: Within this group of about 30 people, there is an assumed mixture of attitudes, beliefs and values which stem from the previously determined demographic mixture. As far as values are concerned, I don’t believe that my topic is in any way controversial. As far as attitudes and beliefs are concerned though, there is a common attitude and belief that men in general do not show their emotions, nor are they as comfortable discussing them. Because of this attitude and belief, the men in the audience may automatically tune out. Therefore, I will need to be vigilant and aware if I am losing their attention, and use one of the strategies mentioned in our textbook and bring information to the speech that pertains closely to them so that their focus will be on me.

Situational factors: I will be giving my required informational presentation in the late afternoon in room 330 of the HSS Building, to a group of 20-30 students and a professor. With my presentation being so late in the afternoon, this will probably be the last class of the day for several of my audience members; therefore, their attention may drift to their plans for later that evening or even the next day. The room is usually the perfect temperature for me, but I will dress in layers so that I am prepared for
any change that might occur in room temperature that day. As for the fact that these are required presentations, this means that the rest of the class will also be giving them. I intend to sign up to be one of the first to give their presentations, and therefore most of the students will be nervous or worried about their own presentations. To combat this, I will need to be dynamic and entertaining enough to hold their attention, without distracting from the seriousness of my topic.

**Organizational Pattern:** Topical

**Outline of Speech:**

**Introduction:** In China they call it qínggăn. In France it is émotion. In Italy, emozione. And in Russia, it is emotsiya. Four different words, from four different countries, all meaning the same thing in English; emotion. There are many ways to express emotion. Some choose words or tone, others use body language, and others use facial expression. Then there are those who choose to hide it all, to repress and regulate their feelings, which results in what happened to me. While what I went through was painful, it was extremely preventable. There are others who have no choice over what they feel and what they don’t, and whether they are able to express it or not. These people suffer from Alexithymia, a condition which isn’t preventable, and doesn’t have a magic medication to cure it. For the next few minutes, I will describe the differences between healthy emotional regulation and Alexithymia, as well as the results of Alexithymia, its presence in other cultures, and ways of coping with Alexithymia.

I. The following information about emotion regulation was gathered from articles in recent issues of *Anxiety, Stress & Coping* and *Journal of Happiness Studies*.
   A. Emotion regulation is defined as “the processes through which emotional awareness and experience are monitored, evaluated, maintained, and modified.”
   B. In lay terms: it is a psychological stress coping mechanism, which can be either a conscious decision or a subconscious act by our brain.
      1. Conscious emotion regulation of negative emotions is socially acceptable in many countries, and is therefore encouraged and taught through social interaction.
   C. There are two types of regulation.
      1. Cognitive reappraisal is considered a healthy coping strategy, which changes how you look at a situation in order to change its emotional impact on you.
         a. In America, we call this “Seeing the Silver Lining”, or seeing the good reason for a bad situation.
      2. Expressive repression is suppressing or hiding external signs of emotions from others, and is considered psychologically unhealthy.
         a. This is the coping strategy that I indulged in everyday until I was a senior in high school, causing my emotional break and my voyeur into cutting.

II. Now that I have defined emotion regulation, I will define that big medical word I mentioned earlier: Alexithymia.
A. According to the *Handbook of Emotions*, Alexithymia literally means “the absence of words for emotion,” and is the most severe form of emotion regulation, but is almost always subconscious.

B. The book *Educating People to be Emotionally Intelligent* states that there are three main identifiers that psychologists use to diagnose Alexithymia.

   1. The first is difficulty describing or identifying emotional feelings.
   2. Second is a limited imaginal capacity.
      a. This just means that the person has a very hard time tapping into their imagination.
      b. They live in a world of complete reality since they are unable to tap into a mental world of fantasy.
   3. The third identifier is an internally oriented style of thinking.
      a. Results of this are that the person is more introverted, task-oriented, socially awkward, and less inclined to be in a group setting.

C. The same book also mentions that Alexithymia is the result of a low emotional intelligence, which means that a person has a hard time identifying, stating and expressing their emotions because they lack a basic and innate understanding of emotions, an understanding that most of us posses.

III. After psychologists make the diagnosis of Alexithymia, they start to monitor the patient for the toll that this disorder takes on the human body and psyche.

A. One of the immediate results of this disorder is that the patient may become chemically dependent and have substance abuse issues with alcohol and illegal drugs.

   1. A study done among Chinese adolescents points out and emphasizes this point.

B. The article also comments that another common diagnosis among Alexithymia patients is chronic depression.

C. As far as long term affects, a British study found that Alexithymia negatively affects a human’s cardiovascular system.

   1. The article states that “the suppression of negative emotion leads to increased risk of cardiovascular disease.”
      a. In other words, if a person’s negative emotions are excessively repressed, such as with Alexithymia, that person is at greater risk for heart attack, dysrhythmia, and heart failure.

IV. Alexithymia is not only present in our American culture.

A. According to a study done throughout Western Civilizations, Alexithymia is becoming more present in countries such as Norway and Australia as well.

B. In the Chinese study that I mentioned earlier, we can see that China has also become a strong foothold for the disorder.

   1. The article states the reasoning behind this rise in Alexithymia is the emergence of youth culture within China which emphasizes autonomy and creates neuroticism.
V. According to *Educating People to be Emotionally Intelligent*, there are positive results of this disorder and its study. With our further understanding of Alexithymia, psychologists are finding new ways of treating the low emotional intelligence rate that afflicts these patients.

A. The most successful treatment for this disorder is the raising of emotional intelligence through repeated psychological interventions.

1. Through these interventions, the psychologist will help the patient develop stress coping skills, recognize and manage emotions, develop the use of nonverbal cues to communicate, develop a use of humor and play as a coping mechanism, and come up with positive resolutions to conflict.

**Conclusion:** Although there is no magic cure or prescription to aide those afflicted by Alexithymia, psychologists are learning more about this disorder with every new patient. Each patient adds another piece to the puzzle, and our research of Alexithymia in other cultures aids us in finding ways to cope with this disorder that crosses cultural lines and differences. No matter how we say it, emotion is a part of us all, and learning how to deal with it in a healthy way is important for everyone.