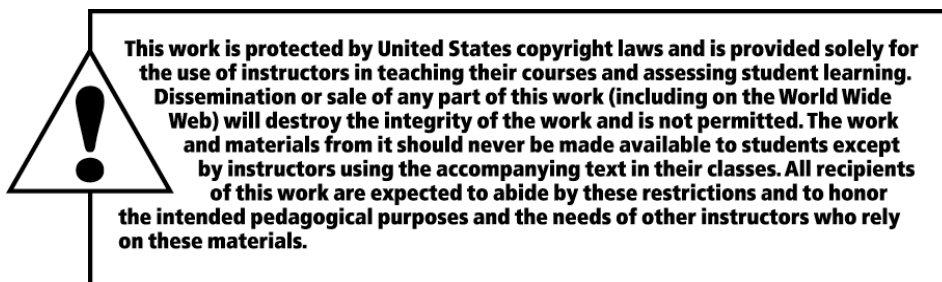


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Test Item File

for

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Abnormal Psychology: Core Concepts

Second Edition

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MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Which of the following is an example of family aggregation? 1) _____
- A) Kim's suicide was apparently a reaction to her mother's abuse.
 - B) Jim and John, 21-year-old twins, are both schizophrenic.
 - C) Karen, her mother, and her grandmother all have been diagnosed with generalized anxiety disorder.
 - D) Both Jane and her husband are alcoholic.

Answer: C

Diff: 2 Type: MC Page Ref: 2
Topic: Abnormal Psychology/An Overview
Skill: Applied

- 2) What do the cases of Monique and Donald best illustrate? 2) _____
- A) Mental illness can have a significant impact on one's life.
 - B) Women are more likely to commit suicide than men.
 - C) Most individuals who experience a mental breakdown are clearly unwell long before treatment is sought.
 - D) Most individuals with mental disorders are violent.

Answer: A

Diff: 1 Type: MC Page Ref: 2
Topic: Abnormal Psychology/An Overview
Skill: Conceptual

- 3) What do the cases of Monique and Donald best illustrate? 3) _____
- A) Abnormal behavior usually produces more distress in others than the person who engages in the abnormal behavior.
 - B) Abnormal behavior covers a wide range of behavioral disturbances.
 - C) When people suffer from mental disorders they are unable to work or live independently.
 - D) Most people who suffer from abnormal behavior are quickly identified as deviant by other people.

Answer: B

Diff: 1 Type: MC Page Ref: 2
Topic: Abnormal Psychology/An Overview
Skill: Conceptual

- 4) What makes defining abnormality difficult? 4) _____
- A) Criteria for abnormality have yet to be developed.
 - B) There is not a clear dividing line that serves to distinguish different behavior from that which is abnormal.
 - C) There are so many types of abnormal behavior that they can't be accurately described.
 - D) Most of us are abnormal much of the time.

Answer: B

Diff: 2 Type: MC Page Ref: 3
Topic: What Do We Mean by Abnormal Behavior?
Skill: Factual

- 5) Which of the following is a sufficient element to determine abnormality? 5) _____
- A) there is no sufficient element
 - B) suffering
 - C) deviancy
 - D) maladaptiveness

Answer: A

Diff: 2 Type: MC Page Ref: 3
Topic: What Do We Mean by Abnormal Behavior?
Skill: Factual

- 6) The fact that body piercings are commonplace today while they would once have been viewed as abnormal illustrates that 6) _____
- A) what is acceptable for men and women is no longer different.
 - B) modern society is always open to change.
 - C) American culture values independence.
 - D) the values of a society may change over time.

Answer: D

Diff: 2 Type: MC Page Ref: 5
Topic: What Do We Mean by Abnormal Behavior?
Skill: Conceptual

- 7) What is a reason for classifying mental disorders? 7) _____
- A) A classification system allows information to be organized.
 - B) Then professionals can make assumptions about people based on their diagnosis.
 - C) The diagnosis then often has an effect on peoples' behaviors.
 - D) Then professionals won't need to look at as much information about a person.

Answer: A

Diff: 1 Type: MC Page Ref: 5
Topic: What Do We Mean by Abnormal Behavior?
Skill: Factual

- 8) _____ is a necessary first step toward introducing order to any discussion of the cause or treatment of abnormal behavior. 8) _____
- A) Classification B) Brain research C) Labeling D) Epidemiology

Answer: A

Diff: 1 Type: MC Page Ref: 5
Topic: Classifying Abnormal Behavior
Skill: Conceptual

- 9) Which of the following is a disadvantage of having a classification system for mental disorders? 9) _____
- A) A classification system allows for research to advance.
 - B) Identifying the disorder that an individual has guides treatment.
 - C) When a label is used to describe an individual's behavior information is lost.
 - D) A classification system establishes the types of problems that mental professionals can treat.

Answer: C

Diff: 1 Type: MC Page Ref: 5
Topic: What Do We Mean by Abnormal Behavior?
Skill: Conceptual

- 10) Which of the following statements is true concerning classification systems for mental disorders? 10) _____
- A) It is far more important that they be reliable than it is for them to be valid.
 - B) Although they assist scientists who are researching disorders, they inhibit our ability to communicate about abnormal behavior in a precise way.
 - C) Classification systems make it more difficult to gather statistics on the incidence and prevalence of disorders.
 - D) Classification systems meet the needs of medical insurance companies who need diagnoses in order to authorize payment of claims.

Answer: D

Diff: 2 Type: MC Page Ref: 5
Topic: Classifying Abnormal Behavior
Skill: Conceptual

- 11) Stereotyping is an example of the stigma of mental illness. It means 11) _____
- A) people feel very sad and upset when they find out they have a mental illness.
 - B) people are reluctant to discuss their psychological problems because they are afraid others won't like them.
 - C) the problem of removing the diagnosis, even if people make a full recovery from mental illness.
 - D) the automatic and often incorrect beliefs people have about people with mental illness.

Answer: D

Diff: 1 Type: MC Page Ref: 5
Topic: What Do We Mean by Abnormal Behavior?
Skill: Factual

- 12) The DSM-IV-TR does not refer to the etiology of mental disorders. This is because 12) ____
 A) no one knows the cause(s) of mental disorders.
 B) the DSM tries to be atheoretical.
 C) etiology is not considered important enough to put in the DSM.
 D) the DSM does not use the medical model.
 Answer: B
 Diff:1 Type:MC Page Ref: 5
 Topic: What Do We Mean by Abnormal Behavior?
 Skill: Factual
- 13) All of the following are disadvantages of classifying and diagnosing mental disorders EXCEPT 13) ____
 A) providing structure. B) labeling.
 C) stereotyping. D) the potential stigma.
 Answer: A
 Diff: 1 Type: MC Page Ref: 5-6
 Topic: What Do We Mean by Abnormal Behavior?
 Skill: Factual
- 14) What is wrong with describing someone as being "schizophrenic"? 14) ____
 A) The behavior of the schizophrenic changes so rapidly that this is only true a small percentage of the time.
 B) Such a definitive diagnosis is rare.
 C) Nothing.
 D) Labels should be applied to disorders, not to people.
 Answer: D
 Diff: 2 Type: MC Page Ref: 6
 Topic: What Do We Mean by Abnormal Behavior?
 Skill: Conceptual
- 15) What does DSM stand for? 15) ____
 A) Diagnostic and Statistical Manual of Mental Disorders
 B) Diagnostic Science of Mental Disorders
 C) Descriptors for the Science of Mental Illness
 D) Disorders, Science, and Mental Illness
 Answer: A
 Diff: 1 Type: MC Page Ref: 6
 Topic: What Do We Mean by Abnormal Behavior?
 Skill: Factual
- 16) Which of the following is included in the DSM? 16) ____
 A) a discussion of the various causes of mental disorders
 B) a means of identifying different mental disorders
 C) a description of all of the possible treatments for each disorder
 D) a description of the necessary and sufficient conditions for mental illness
 Answer: B
 Diff: 1 Type: MC Page Ref: 6
 Topic: What Do We Mean by Abnormal Behavior?
 Skill: Applied
- 17) In the United States, the standard for defining types of mental disorders is contained in the 17) ____
 A) American Psychological Association's bylaws.
 B) Diagnostic and Statistical Manual of Mental Disorders.
 C) American Psychiatric Association's bylaws.
 D) World Health Organization's classification code.
 Answer: B
 Diff: 1 Type: MC Page Ref: 6
 Topic: What Do We Mean by Abnormal Behavior?
 Skill: Factual

- 18) According to the DSM-IV's definition of mental disorder, impairment in one or more areas of functioning (disability) 18) _____
- A) must be present in order to make a diagnosis.
 - B) must be present for at least six months to be considered a true disability.
 - C) may be present but is not a necessary condition for making a diagnosis.
 - D) is one of the less important features of a mental disorder.
- Answer: C
Diff: 2 Type: MC Page Ref: 6
Topic: What Do We Mean by Abnormal Behavior?
Skill: Conceptual
- 19) The Solarists are a cult whose members believe that they control the movements of the sun with special hand gestures. What would the DSM-IV say about this group? 19) _____
- A) The group suffers from Shared Delusion Psychosis.
 - B) The group is diagnosable because they are a cult.
 - C) While some of this group's individual members may meet criteria for a DSM-IV diagnosis, the DSM-IV does not diagnose groups.
 - D) Because a group of persons share a belief, however strange, the group must be considered emotionally healthy.
- Answer: C
Diff: 2 Type: MC Page Ref: 6
Topic: What Do We Mean by Abnormal Behavior?
Skill: Applied
- 20) Brett persistently injects himself with pain killers. This has greatly increased his chance of overdosing and dying. His behavior harms no one else. According to the DSM, is Brett's behavior consistent with the definition of a mental disorder? 20) _____
- A) No, because his behavior must also harm the well-being of others in the community.
 - B) Yes, because very few people in society engage in this behavior.
 - C) Yes, because he is persistently acting in a way that harms him.
 - D) No, because there is no evidence that his actions are out of his own control.
- Answer: C
Diff: 3 Type: MC Page Ref: 6
Topic: Abnormal Behavior Mental Disorder as Maladaptive Behavior
Skill: Applied
- 21) Jerome Wakefield's definition of "mental disorder" has three components. They are 21) _____
- A) distress or disability, unexpected response to events, and mental dysfunction.
 - B) biological deficit or dysfunction, social condemnation, and statistical rarity.
 - C) statistical rarity, distress to others in society, and unexpected behavior.
 - D) distress, dangerousness, and mental dysfunction.
- Answer: A
Diff: 2 Type: MC Page Ref: 6
Topic: What Do We Mean by Abnormal Behavior?
Skill: Factual
- 22) According to the DSM, when is deviant behavior viewed as indicative of a mental disorder? 22) _____
- A) only when the behavior is inconsistent with cultural norms
 - B) when it is a symptom of a dysfunction in the individual
 - C) always
 - D) never
- Answer: B
Diff: 1 Type: MC Page Ref: 6
Topic: What Do We Mean by Abnormal Behavior?
Skill: Factual

- 23) Which of the following best describes the DSM? 23) _____
A) an objective guide to diagnosing mental disorders
B) a fundamentally flawed collection of unfounded assumptions about mental disorders
C) a complete guide to the origin, diagnosis and treatment of mental disorders
D) a work in progress that classifies mental disorders based on what is currently known
Answer: D
Diff: 2 Type: MC Page Ref: 6
Topic: Classifying Abnormal Behavior
Skill: Conceptual
- 24) What do the textbook authors identify as the most problematic element of Wakefield's definition of mental disorder? 24) _____
A) Most mental disorders do not cause distress.
B) We have yet to discover the dysfunction that underlies most mental disorders.
C) He describes mental disorders as mental conditions.
D) The role of biology is not recognized.
Answer: B
Diff: 3 Type: MC Page Ref: 7
Topic: What Do We Mean by Abnormal Behavior?
Skill: Conceptual
- 25) The DSM-TR-IV 25) _____
A) does not consider the differences that exist across cultures when defining a disorder.
B) only includes information about cultures in the United States.
C) explicitly acknowledges that differences across cultures must be considered when defining disorders.
D) endorses the belief that disorders are the same across cultures.
Answer: C
Diff: 1 Type: MC Page Ref: 7
Topic: What Do We Mean by Abnormal Behavior?
Skill: Factual
- 26) What does the case of JGH, a Native American elder, illustrate? 26) _____
A) Culture influences the presentation of psychological disorders.
B) Depression is universal.
C) Alcoholism has long lasting effects on mood and behavior, even when drinking has ceased.
D) The symptoms of some illnesses are not apparent until after lengthy psychological evaluation.
Answer: A
Diff: 1 Type: MC Page Ref: 7
Topic: What Do We Mean by Abnormal Behavior?
Skill: Applied
- 27) What is a culture-specific disorder? 27) _____
A) a disorder that is a product of cultural stressors
B) a disorder seen in all cultures
C) a disorder seen only in certain cultures
D) a disorder that is seen universally, but presents itself differently depending on cultural factors
Answer: C
Diff: 2 Type: MC Page Ref: 8
Topic: What Do We Mean by Abnormal Behavior?
Skill: Factual
- 28) Practically speaking, "abnormal" behavior means 28) _____
A) any behavior that causes the person distress.
B) any behavior that causes us to consider our values.
C) any behavior that is "away from the normal" and causes distress.
D) unusual behaviors that are not consistent with the norms of the society in which they are displayed.
Answer: D
Diff: 1 Type: MC Page Ref: 8
Topic: What Do We Mean by Abnormal Behavior?
Skill: Conceptual

- 29) Maria believes that her dead grandmother occasionally speaks to her. In deciding if Maria has a mental illness or not, which of the following is important? 29) _____
- A) Do people in general consider Maria's belief abnormal?
 - B) Does her belief match any of the symptoms in the disorders in the DSM?
 - C) Is Maria's belief consistent with the beliefs of her culture?
 - D) How old Maria is?
- Answer: C
Diff: 1 Type: MC Page Ref: 8
Topic: What Do We Mean by Abnormal Behavior?
Skill: Conceptual
- 30) Why is it important to know how many people have diagnosable mental illnesses? 30) _____
- A) If the incidence of mental illness is rising there needs to be a corresponding increase in the level of funding for medical research.
 - B) Pharmaceutical companies need such information to ensure the appropriate level of drug production.
 - C) Such information is needed to plan for the provision of adequate services.
 - D) The number of people with mental illness and the level of crime are highly correlated.
- Answer: C
Diff: 1 Type: MC Page Ref: 8
Topic: The Extent of Abnormal Behavior
Skill: Factual
- 31) What is epidemiology? 31) _____
- A) a form of psychotherapy
 - B) the study of the role of genes in mental illness
 - C) the study of the distribution of a disorder in a population
 - D) the exploration of what forms of treatment are most effective
- Answer: C
Diff: 1 Type: MC Page Ref: 8
Topic: The Extent of Abnormal Behavior
Skill: Factual
- 32) Mental health epidemiology is 32) _____
- A) the study of epidemics in mental disorders among the general population.
 - B) a sociological study of psychological disorders.
 - C) the study of the distribution of mental disorders in a given population.
 - D) the study of organic brain diseases among different ethnic populations of a defined geographic region.
- Answer: C
Diff: 2 Type: MC Page Ref: 8
Topic: The Extent of Abnormal Behavior
Skill: Factual
- 33) What does it mean if a disorder is said to be highly prevalent? 33) _____
- A) It is not curable.
 - B) It is treatable.
 - C) It is common.
 - D) It is contagious.
- Answer: C
Diff: 1 Type: MC Page Ref: 8-9
Topic: Abnormal Psychology/An Overview
Skill: Factual
- 34) What type of prevalence estimate tends to be lowest? 34) _____
- A) lifetime prevalence
 - B) virtual prevalence
 - C) one-year prevalence
 - D) point prevalence
- Answer: D
Diff: 1 Type: MC Page Ref: 9
Topic: Prevalence and Incidence
Skill: Factual
- 35) _____ rates may be reported in terms of the lifetime risk of contracting a particular disorder. 35) _____
- A) Point prevalence
 - B) Point incidence
 - C) Incidence
 - D) Prevalence
- Answer: D

Diff: 1 Type: MC Page Ref: 9
Topic: The Extent of Abnormal Behavior
Skill: Factual

- 36) Which of the following is an example of point prevalence? 36) _____
- A) Forty people had a panic attack in the last year.
 - B) 15% of women will suffer from an anxiety disorder before the age of thirty.
 - C) 1% of the population is currently experiencing depressive symptoms.
 - D) Seventy people in her graduating class had been diagnosed with anorexia at some time during the past four years.

Answer: C

Diff: 2 Type: MC Page Ref: 9
Topic: Prevalence and Incidence
Skill: Applied

- 37) What type of prevalence data only counts active cases of a disorder? 37) _____
- A) one-year prevalence
 - B) lifetime prevalence
 - C) point prevalence
 - D) All prevalence data count both those who have the disorder and those who have recovered.

Answer: C

Diff: 2 Type: MC Page Ref: 9
Topic: Prevalence and Incidence
Skill: Applied

- 38) The mayor of a city wants to know the number of new cases of a disorder over the past year. The mayor should ask an epidemiologist for the _____ of the disorder. 38) _____
- A) point prevalence
 - B) incidence rate
 - C) prevalence rate
 - D) acute occurrence

Answer: B

Diff: 2 Type: MC Page Ref: 9
Topic: The Extent of Abnormal Behavior
Skill: Applied

- 39) What type of prevalence estimate tends to be highest? 39) _____
- A) virtual prevalence
 - B) lifetime prevalence
 - C) point prevalence
 - D) one-year prevalence

Answer: B

Diff: 1 Type: MC Page Ref: 9
Topic: Prevalence and Incidence
Skill: Factual

- 40) What term refers to the number of new cases of a disorder that occur over a given time period? 40) _____
- A) incidence
 - B) point prevalence
 - C) valence
 - D) one-year prevalence

Answer: A

Diff: 1 Type: MC Page Ref: 9
Topic: Prevalence and Incidence
Skill: Factual

- 41) Why is it believed that the surveys used to estimate the prevalence of mental illness underestimate that prevalence? 41) _____
- A) Few people report symptoms of mental illness when completing surveys.
 - B) The incidence of comorbidity is too high.
 - C) Most problems are acute.
 - D) Measures of several types of disorders were not included.

Answer: D

Diff: 2 Type: MC Page Ref: 9

Topic: Prevalence and Incidence

Skill: Factual

- 42) What is the most prevalent kind of psychological disorder? 42) _____
- A) anxiety disorders
 - B) dissociative disorders
 - C) substance abuse disorders
 - D) depressive disorders

Answer: A

Diff: 1 Type: MC Page Ref: 9

Topic: Prevalence and Incidence

Skill: Factual

- 43) What is important to remember about the apparent high lifetime rate of mental disorders? 43) _____
- A) Many people were probably misdiagnosed.
 - B) A large majority of people with disorders seek treatment, so the problem is not as bad as it seems.
 - C) Many people with disorders are not seriously affected by them or may have them for only a short time.
 - D) So many people have disorders and have them seriously that this has become a major health issue.

Answer: C

Diff: 2 Type: MC Page Ref: 9

Topic: Prevalence and Incidence

Skill: Conceptual

- 44) What can be said about individuals who have a history of at least one psychological disorder? 44) _____
- A) Over 50% have at least two or more other disorders.
 - B) Individuals who have sought treatment for one illness are unlikely to ever experience another.
 - C) Most are effectively treated and never experience mental illness again.
 - D) Few have a comorbid disorder.

Answer: A

Diff: 2 Type: MC Page Ref: 10

Topic: Prevalence and Incidence

Skill: Factual

- 45) Comorbidity means 45) _____
- A) that a person has a more severe form of a disorder.
 - B) that a person has two or more disorders.
 - C) that a person is unlikely to recover from the disorder.
 - D) that a disorder is often fatal.

Answer: B

Diff: 2 Type: MC Page Ref: 10

Topic: Prevalence and Incidence

Skill: Factual

- 46) A major finding from the National Comorbidity Survey (NCS) was that 46) _____
- A) people who have one mental disorder are unlikely to have a second comorbid disorder.
 - B) over half of the people with a history of one disorder had two or more comorbid disorders.
 - C) those people who have three or more comorbid disorders have one or more mild and transitory disorders.
 - D) as people grow older they are more likely to have multiple severe disorders.

Answer: B

Diff: 2 Type: MC Page Ref: 10

Topic: The Extent of Abnormal Behavior

Skill: Factual

- 47) In ancient societies, if a person's abnormal conduct consisted of speech that appeared to have a religious or mystical significance, then the person was 47) _____
- A) assumed to have something physically wrong with the heart.
 - B) assumed to have willingly entered into a pact with the devil.
 - C) thought to be possessed by a good spirit or god.
 - D) thought to be a witch.

Answer: C

Diff: 2 Type: MC Page Ref: 10
Topic: Historical Views of Abnormal Behavior/Demonology
Skill: Factual

- 48) Prayer, incantations, and noise-making were all techniques for _____
A) altering a person's brain functioning.
B) improving a person's dreams.
C) exorcising demons.
D) helping a person become possessed by good spirits.

Answer: C

Diff: 1 Type: MC Page Ref: 11
Topic: Historical Views of Abnormal Behavior/Demonology
Skill: Factual

- 49) Each of the following is one of the "four humors" EXCEPT _____
A) phrenitis. B) phlegm. C) bile. D) blood.

Answer: A

Diff: 1 Type: MC Page Ref: 11
Topic: Later Greek and Roman Thought
Skill: Factual

- 50) The belief in the four humors as a means of explaining temperament _____
A) has yet to be disproven.
B) is inconsistent with a biological explanation for mental illness.
C) proposed that mental disorders were the result of an imbalance.
D) provides that first indication that ancient people recognized the significance of the brain in determining behavior.

Answer: C

Diff: 2 Type: MC Page Ref: 11
Topic: Later Greek and Roman Thought
Skill: Conceptual

- 51) The doctrine of the four humors _____
A) was an explanation for personality traits.
B) was an attempt to support moral management.
C) was the first psychological explanation of mental disorders.
D) was an early suggested treatment for melancholy.

Answer: A

Diff: 2 Type: MC Page Ref: 11
Topic: Later Greek and Roman Thought
Skill: Factual

- 52) According to early beliefs, what would characterize an individual with an excess of blood? _____
A) happiness B) irritability C) depression D) schizophrenia

Answer: A

Diff: 2 Type: MC Page Ref: 11
Topic: Later Greek and Roman Thought
Skill: Applied

- 53) Hippocrates suggested marriage as a cure for _____
A) hysteria in women. B) melancholia.
C) impotence. D) phrenitis (brain fever) in men.

Answer: A

Diff: 1 Type: MC Page Ref: 11
Topic: Later Greek and Roman Thought
Skill: Factual

- 54) Cicero was feeling depressed. He sought help from Hippocrates. Hippocrates would probably have _____
A) prescribed the roots of certain plants and unusual elixirs.
B) prescribed exercise, tranquility, and celibacy.
C) utilized a talking cure.
D) performed an exorcism.

Answer: B

Diff: 2 Type: MC Page Ref: 11

Topic: Later Greek and Roman Thought

Skill: Applied

- 55) The physicians of Alexandria, Egypt in the era after Alexander the Great were most likely to treat mental patients by _____
A) providing activities, massage, and education.
B) using brutal forms of exorcism.
C) putting them in prisons.
D) having them make sacrifices to gods.

Answer: A

Diff: 2 Type: MC Page Ref: 11-12

Topic: Later Greek and Roman Thought

Skill: Factual

- 56) What is Galen credited with _____
A) performing the first human autopsies.
B) recognizing that psychological disorders could have both biological and psychological causes.
C) demonstrating that the doctrine of the four humors was flawed.
D) providing the first biological explanation for mental disorders.

Answer: B

Diff: 2 Type: MC Page Ref: 12

Topic: Later Greek and Roman Thought

Skill: Conceptual

- 57) Which of the following would be characteristic of the treatment provided by the 1st mental hospitals in the Middle East? _____
A) the use of trephining and other biological approaches
B) warm baths and massages
C) exorcisms
D) psychodynamic therapy

Answer: B

Diff: 1 Type: MC Page Ref: 12

Topic: Abnormality During the Middle Ages

Skill: Applied

- 58) Which statement about treatment of abnormal behavior in the Middle Ages is accurate? _____
A) The Chinese emphasized prayer, the Europeans emphasized exercise, and the Islamic peoples emphasized balancing the four bodily humors.
B) Although the Hippocratic tradition was continued in most of Europe, Islamic countries emphasized demonology.
C) Scientific reasoning and humane treatments were valued in both European and Islamic societies.
D) Islamic forms of treatment were more humane than European approaches.

Answer: D

Diff: 2 Type: MC Page Ref: 12

Topic: Abnormality During the Middle Ages

Skill: Conceptual

- 59) The approaches to treatment of the mentally ill during the Middle Ages in Europe are best characterized as _____
A) superstitious. B) scientific. C) humane. D) medical.

Answer: A

Diff: 1 Type: MC Page Ref: 12

Topic: Abnormality During the Middle Ages

Skill: Factual

- 60) What is lycanthropy? 60) _____
A) a form of mass hysteria now known to have been drug-induced
B) a form of mass hysteria characterized by wild dance-like movements
C) a form of mass madness seen only in men
D) a condition in which people believe themselves to be possessed by wolves
Answer: D
Diff: 2 Type: MC Page Ref: 12
Topic: Abnormality During the Middle Ages
Skill: Factual
- 61) A common treatment for mental illness during the Middle Ages in Europe was 61) _____
A) fresh air and supportive surroundings.
B) an early form of psychoanalytic dream interpretation.
C) banishment.
D) exorcism.
Answer: D
Diff: 1 Type: MC Page Ref: 12
Topic: Abnormality During the Middle Ages
Skill: Factual
- 62) During the middle ages in Europe, which of the following was most likely to treat mental illness? 62) _____
A) a scientist B) a surgeon C) a priest D) a physician
Answer: C
Diff: 2 Type: MC Page Ref: 12
Topic: Abnormality During the Middle Ages
Skill: Applied
- 63) Recent historical reviews of the literature indicate that the typical accused witch in the Middle Ages in Europe was 63) _____
A) a priest who was a rival of a more powerful priest.
B) a person we would now consider to have a mental illness.
C) a person we would now consider to have mental retardation.
D) an ill-tempered, impoverished woman.
Answer: D
Diff: 2 Type: MC Page Ref: 13
Topic: Historical Views of Abnormal Behavior/Demonology
Skill: Factual
- 64) People in the Middle Ages 64) _____
A) believed that witches were mentally ill.
B) believed that mentally ill people were witches.
C) believed that mentally ill witches should be treated differently than other types of witches.
D) believed that most witches and mentally ill people were possessed by demons, but in different ways.
Answer: D
Diff: 2 Type: MC Page Ref: 13
Topic: Abnormality During the Middle Ages
Skill: Factual
- 65) What was the purpose of the early asylums? 65) _____
A) to offer biological approaches to the treatment of mental disorders
B) to remove those who could not care for themselves from society
C) to offer humanitarian treatment to those afflicted with mental illnesses
D) to provide exorcisms
Answer: B
Diff: 2 Type: MC Page Ref: 13
Topic: Establishment of Early Asylums and Shrines
Skill: Conceptual

- 66) Who was one of the first physicians to reject the idea that mental illness was due to demon possession (although he did believe the moon influenced the brain)? 66) _____
 A) Pinel B) Galen C) Hippocrates D) Paracelsus
 Answer: D
 Diff: 2 Type: MC Page Ref: 13
 Topic: Establishment of Early Asylums and Shrines
 Skill: Factual
- 67) If you visited an asylum in the 16th Century in Europe you would likely find 67) _____
 A) a place where people were given good food, work, and rest so they could recover.
 B) mentally ill people living in conditions of filth and cruelty.
 C) exorcisms being done by priests.
 D) a place which mixed together the mentally ill, the poor, criminals, and the physically ill.
 Answer: B
 Diff: 1 Type: MC Page Ref: 13
 Topic: Establishment of Early Asylums and Shrines
 Skill: Applied
- 68) The early asylums 68) _____
 A) were designed to treat the mentally ill with physiological treatments, such as bloodletting.
 B) were similar to the places the early Greeks used for people with mental illness.
 C) were primarily warehouses for the mentally ill.
 D) were designed to be places of refuge for the mentally ill.
 Answer: C
 Diff: 1 Type: MC Page Ref: 14
 Topic: Establishment of Early Asylums and Shrines
 Skill: Factual
- 69) Shackling a patient to a wall with little food or heat would be most typical of 69) _____
 A) the treatment advocated by Hippocrates. B) the early asylums in Europe.
 C) the hospitals run by Philippe Pinel. D) the sanatoriums of Alexandria, Egypt.
 Answer: B
 Diff: 1 Type: MC Page Ref: 14
 Topic: Establishment of Early Asylums and Shrines
 Skill: Factual
- 70) Humanitarian treatment would be most typical of 70) _____
 A) the hospitals run by Philippe Pinel. B) the early asylums in Europe.
 C) Bedlam. D) the early asylums in the United States.
 Answer: A
 Diff: 1 Type: MC Page Ref: 14
 Topic: Humanitarian Reform
 Skill: Factual
- 71) Phillipe Pinel 71) _____
 A) believed that mental illness was purely a physiological phenomena, and could only be treated by physical means such as bloodletting.
 B) believed that mental illness was due to possession by demons and exorcism was the only useful treatment.
 C) believed that mental patients were ill and needed to be treated as such—with kindness and caring.
 D) believed that mental patients needed to choose rationality over insanity, so treatment was aimed at making their lives as patients uncomfortable.
 Answer: C
 Diff: 1 Type: MC Page Ref: 14
 Topic: Humanitarian Reform
 Skill: Factual
- 72) A contemporary of Pinel's in England who started a Quaker religious retreat for the mentally ill was 72) _____
 A) Dorothea Dix. B) John Wesley. C) William Tuke. D) Benjamin Rush.
 Answer: C
 Diff: 1 Type: MC Page Ref: 14
 Topic: Humanitarian Reform
 Skill: Factual

- 73) Which of the following is credited with continuing the work of Pinel in the United States? 73) _____
 A) Benjamin Rush B) Samuel Hitch C) John Connolly D) John Wesley
 Answer: A
 Diff: 1 Type: MC Page Ref: 14
 Topic: Humanitarian Reform
 Skill: Factual
- 74) Benjamin Rush is credited with all of the following EXCEPT 74) _____
 A) signing the declaration of independence.
 B) encouraging more humane treatment of the mentally ill.
 C) being the first American to organize a course in psychiatry.
 D) taking a scientific approach to the study and treatment of mental disorders.
 Answer: D
 Diff: 2 Type: MC Page Ref: 14
 Topic: Humanitarian Reform
 Skill: Conceptual
- 75) Benjamin Rush, who encouraged more humane treatment of the mentally in the U.S., used as his principal 75) _____
 remedies
 A) bloodletting and the tranquilizer chair. B) the tranquilizer chair and relaxation.
 C) rest and talk. D) exorcism and purging.
 Answer: A
 Diff: 2 Type: MC Page Ref: 14
 Topic: Humanitarian Reform
 Skill: Factual
- 76) Who is considered the founder of American psychiatry? 76) _____
 A) William Tuke B) Clifford Beers C) Benjamin Rush D) Dorothea Dix
 Answer: C
 Diff: 1 Type: MC Page Ref: 14
 Topic: Humanitarian Reform
 Skill: Factual
- 77) The moral management treatment 77) _____
 A) focused on the physiological problems that mental patient's supposedly had rather than their mental state.
 B) focused on the moral and spiritual development of mental patient's rather than their disorder.
 C) focused on warehousing and punishing mental patients, so that they would choose to become well.
 D) focused on the symptoms that mental patients had rather than on their moral character.
 Answer: B
 Diff: 2 Type: MC Page Ref: 15
 Topic: Humanitarian Reform
 Skill: Factual
- 78) All of the following were likely to be part of moral treatment in the 1800's EXCEPT 78) _____
 A) character development. B) manual labor.
 C) spiritual discussions. D) antipsychotic medication.
 Answer: D
 Diff: 2 Type: MC Page Ref: 15
 Topic: Humanitarian Reform
 Skill: Factual
- 79) The level of success achieved with the use of moral management is surprising because: 79) _____
 A) the drugs used were usually inappropriate.
 B) most mental illnesses are not treatable.
 C) the majority of those hospitalized for mental illness were schizophrenic.
 D) many patients suffered from a disease that was, at the time, incurable.
 Answer: D
 Diff: 2 Type: MC Page Ref: 15
 Topic: Humanitarian Reform
 Skill: Conceptual

- 80) Which of the following was a form of treatment that addressed a patient's social, individual, and occupational needs? 80) _____
- A) Anton Mesmer's approach to treating the mentally ill
 - B) the treatments provided at the Geel Shrine
 - C) the treatment started by the Nancy School
 - D) moral management
- Answer: D
Diff: 1 Type: MC Page Ref: 15
Topic: Humanitarian Reform
Skill: Factual
- 81) Which of the following contributed to the virtual absence of moral management by the 19th Century? 81) _____
- A) society's displeasure with the idea that mentally ill people were morally inferior
 - B) the shrinking of the size of most mental hospitals
 - C) the fact that it was rarely effective in treating the mentally ill
 - D) advances in biomedical science
- Answer: D
Diff: 1 Type: MC Page Ref: 15
Topic: Humanitarian Reform
Skill: Factual
- 82) Which of the following approaches to treatment focuses almost exclusively on physical well-being? 82) _____
- A) humanitarian
 - B) mental hygiene
 - C) deinstitutionalization
 - D) moral management
- Answer: B
Diff: 2 Type: MC Page Ref: 15
Topic: Humanitarian Reform
Skill: Factual
- 83) Which of the following was a consequence of the rise of the mental hygiene movement and the occurrence of biomedical advances? 83) _____
- A) Physical comfort was neglected.
 - B) The social and psychological environments of mental patients were ignored.
 - C) Biological causes for most mental disorders were identified.
 - D) Most humanitarian gains were lost.
- Answer: B
Diff: 2 Type: MC Page Ref: 15
Topic: Humanitarian Reform
Skill: Conceptual
- 84) The demise of moral management occurred for all of the following reasons EXCEPT 84) _____
- A) hospital facilities got so large that it was difficult to maintain the staff-patient relationships necessary for moral management.
 - B) the rise of the moral hygiene movement put a focus on patient well-being.
 - C) the rise of biological explanations diminished the importance of the social environment.
 - D) research showed that it had never been effective.
- Answer: D
Diff: 1 Type: MC Page Ref: 15
Topic: Humanitarian Reform
Skill: Factual
- 85) Dorothea Dix 85) _____
- A) urged that religious conversion was a primary means of treatment for the mentally disturbed.
 - B) is credited with establishing numerous humane mental hospitals in many countries.
 - C) was a leading force in the emphasis on finding biological cures for mental disorders.
 - D) was a major impediment to the mental hygiene movement in this country.
- Answer: B
Diff: 1 Type: MC Page Ref: 15
Topic: Humanitarian Reform
Skill: Factual

- 86) Which one of the following increased the availability of treatment for the mentally ill in the United States? 86) _____
A) Phillipe Pinel. B) Emil Kraepelin. C) Benjamin Rush. D) Dorothea Dix.
Answer: D
Diff: 1 Type: MC Page Ref: 15
Topic: Humanitarian Reform
Skill: Applied
- 87) At the start of the twentieth century in America, public attitudes toward the mentally ill 87) _____
A) were characterized by fear, horror, and ignorance.
B) had become enlightened and humane.
C) had become a conviction that the mentally ill were incurable and should be executed or jailed for the rest of their lives.
D) associated mental disorder with "tainted genes" and divine retribution.
Answer: A
Diff: 1 Type: MC Page Ref: 16
Topic: Changing Attitudes Toward Mental Health Early 20th Century
Skill: Conceptual
- 88) During the early 20th Century, 88) _____
A) hospital stays tended to be brief.
B) more asylums and mental hospitals were established.
C) most of the institutionalized mentally ill received moral therapy.
D) housed very few people.
Answer: B
Diff: 1 Type: MC Page Ref: 16
Topic: Mental Hospital Care in the 20th Century
Skill: Factual
- 89) During the first half of the 20th Century, mental hospital care would best be characterized as 89) _____
A) moral. B) punitive. C) effective. D) humane.
Answer: B
Diff: 1 Type: MC Page Ref: 16
Topic: Mental Hospital Care in the 20th Century
Skill: Factual
- 90) The Hill-Burton Act 90) _____
A) ended the moral hygiene movement.
B) provided funding for mental health treatment in the community.
C) legislated the creation of 50% more inpatient facilities for the mentally ill.
D) contributed to the practice of warehousing the mentally ill.
Answer: B
Diff: 2 Type: MC Page Ref: 16
Topic: Mental Hospital Care in the 20th Century
Skill: Applied
- 91) Which of the following occurred in the late twentieth century? 91) _____
A) the inpatient mentally ill population doubled
B) dramatic increases in the cost of caring for the mentally ill
C) a movement of the mentally ill from institutions to the community
D) the establishment of large inpatient facilities for the mentally ill
Answer: C
Diff: 1 Type: MC Page Ref: 16
Topic: Mental Hospital Care in the 20th Century
Skill: Factual

- 92) The rationale behind deinstitutionalization was 92) _____
- A) a concern that prolonged hospitalization could keep patients from being able to adjust to and function in the outside world.
 - B) a belief that most mental patients were faking and would cease to do so if they weren't "rewarded" by allowing them to stay in the hospital.
 - C) a belief that physicians could better medicate and give physical treatment to patients in their own homes.
 - D) a concern that mental hospitals were such unpleasant places that for mental patients, living on their own could only be better.

Answer: A

Diff: 2 Type: MC Page Ref: 16
Topic: Mental Hospital Care in the 20th Century
Skill: Conceptual

- 93) All of the following are reasons for the growth of the deinstitutionalization movement EXCEPT 93) _____
- A) it was thought to be more humane.
 - B) it was thought to be more cost effective.
 - C) the belief that new medications might allow patients to successfully return to their former lives.
 - D) a desire to involve the family in the care of the mentally ill.

Answer: D

Diff: 2 Type: MC Page Ref: 16
Topic: Mental Hospital Care in the 20th Century
Skill: Applied

- 94) All of the following were effects of the deinstitutionalization movement EXCEPT that 94) _____
- A) most of the services once offered on an inpatient basis were available at community health centers.
 - B) a large number of psychiatric hospitals were closed.
 - C) some of those released would have been better off remaining hospitalized.
 - D) mental hospital populations declined.

Answer: A

Diff: 3 Type: MC Page Ref: 16-17
Topic: Mental Hospital Care in the 20th Century
Skill: Applied

- 95) The insanity associated with general paresis 95) _____
- A) has no known physical cause.
 - B) results from an infection of the brain.
 - C) is seen only in the aging who have compromised health.
 - D) is caused by excessive alcohol consumption.

Answer: B

Diff: 2 Type: MC Page Ref: 17
Topic: Perspectives on Mental Disorders/Biological Discoveries
Skill: Applied

- 96) Which of the following is recognized as a major biomedical breakthrough in psychopathology because it established the link between mental and physical illnesses? 96) _____
- A) the development of electroshock therapy for general paresis (syphilitic insanity)
 - B) the discovery of penicillin as a cure for syphilis
 - C) the discovery that brain injuries could be associated with mental disorders
 - D) the discovery of the cause and later a cure for general paresis (syphilitic insanity)

Answer: D

Diff: 1 Type: MC Page Ref: 17
Topic: Perspectives on Mental Disorders/Biological Discoveries
Skill: Factual

- 97) The use of malarial fever to treat paresis 97) _____
A) was the first time scientists used knowledge of brain chemistry to develop specific drugs for treating mental disorder.
B) proved to be so ineffectual, many professionals abandoned the biological explanation of mental disorders.
C) is an example of the barbaric treatment that mental patients received at the beginning of the Twentieth Century.
D) represented the first clear-cut defeat of a mental disorder by medicine.
Answer: D
Diff: 2 Type: MC Page Ref: 17
Topic: Perspectives on Mental Disorders/Biological Discoveries
Skill: Conceptual
- 98) Which one of the following is credited with developing a classification system for mental disorders? 98) _____
A) Alzheimer B) Pinel C) Dix D) Kraepelin
Answer: D
Diff: 2 Type: MC Page Ref: 18
Topic: Brain Pathology as a Causal Factor
Skill: Factual
- 99) Kraepelin is credited with 99) _____
A) discovering that penicillin was an effective treatment for malaria.
B) determining the cause of senile dementia.
C) writing the first edition of the DSM.
D) identifying different types of mental disorders.
Answer: D
Diff: 1 Type: MC Page Ref: 18
Topic: Brain Pathology as a Causal Factor
Skill: Factual
- 100) The first classification of mental disorders involved 100) _____
A) recognizing symptoms that occurred together often enough to be regarded as a type of mental disorder.
B) understanding the theoretical descriptions of different disorders.
C) identifying the biological causes of the disorders, so a person could be tested for them.
D) identifying the types of thoughts that people with different mental illnesses tended to have.
Answer: A
Diff: 1 Type: MC Page Ref: 18
Topic: Developing a Classification System
Skill: Factual
- 101) The ancestral roots of what we now know as psychoanalysis can be traced back to 101) _____
A) Dorothea Dix.
B) the discovery of the cause of general paresis.
C) the study of hypnosis.
D) early beliefs in demonology and possession.
Answer: C
Diff: 1 Type: MC Page Ref: 18
Topic: Establishing the Psychological Basis of Mental Disorder
Skill: Factual
- 102) Mesmer was a proponent of 102) _____
A) the mental hygiene movement. B) the power of animal magnetism.
C) community mental health clinics. D) humanitarianism.
Answer: B
Diff: 1 Type: MC Page Ref: 18-19
Topic: Establishing the Psychological Basis of Mental Disorder
Skill: Factual

- 103) "All people have a certain amount of magnetic fluid. When the fluid is poorly distributed in the body it causes illness. The planets and the magnetic forces in other people can redistribute magnetism and produce cures." Who was most likely to say something like this? 103) _____
A) a young Sigmund Freud B) Franz Mesmer
C) Jean Charcot D) Emil Kraepelin
Answer: B
Diff: 1 Type: MC Page Ref: 19
Topic: Establishing the Psychological Basis of Mental Disorder
Skill: Applied
- 104) Who is credited with making the first major steps towards understanding the psychological factors involved in mental illness? 104) _____
A) Wilhelm Griesinger B) Alois Alzheimer
C) Clifford Beers D) Sigmund Freud
Answer: D
Diff: 1 Type: MC Page Ref: 19
Topic: Establishing the Psychological Basis of Mental Disorder
Skill: Factual
- 105) The study of hypnosis and its relationship to hysteria was the starting point for 105) _____
A) psychoanalysis.
B) the mental hygiene movement.
C) the biological classification of mental disorders.
D) the medical model.
Answer: A
Diff: 1 Type: MC Page Ref: 19
Topic: Establishing the Psychological Basis of Mental Disorder
Skill: Factual
- 106) The Nancy School 106) _____
A) furthered our understanding of the role of biological factors in the development of mental illness.
B) advanced the recognition that psychological factors were involved in the development of mental disorders.
C) failed to recognize that most forms of psychopathology are incurable.
D) fell out of favor when the evidence supporting the views of Charcot accumulated.
Answer: B
Diff: 1 Type: MC Page Ref: 19
Topic: Establishing the Psychological Basis of Mental Disorder
Skill: Factual
- 107) The Nancy School/Charcot debate is best described as one that focuses on 107) _____
A) psychology vs. biology. B) learning vs. nurture.
C) biology vs. genes. D) drugs vs. surgery.
Answer: A
Diff: 1 Type: MC Page Ref: 19
Topic: Establishing the Psychological Basis of Mental Disorder
Skill: Applied
- 108) Freud is the first to describe the _____: that the mind could contain information of which it is unaware, but by which it is still affected. 108) _____
A) hysteria B) unconscious
C) operant conditioning D) catharsis
Answer: B
Diff: 1 Type: MC Page Ref: 19
Topic: Beginnings of Psychoanalysis
Skill: Factual
- 109) A catharsis is 109) _____
A) a type of hypnosis.
B) a type of hysteria.
C) the part of the brain where the unconscious exists.
D) an emotional release.

Answer: D

Diff: 1 Type: MC Page Ref: 19

Topic: Beginnings of Psychoanalysis

Skill: Factual

- 110) Free association and dream analysis 110) _____
- A) are techniques typically used in hypnotized subjects.
 - B) provide insight into the workings of the unconscious.
 - C) have been used extensively in behavioral therapy.
 - D) were developed in the early 1800's.

Answer: B

Diff: 1 Type: MC Page Ref: 20

Topic: The Beginnings of Psychoanalysis

Skill: Applied

- 111) Who established the first experimental psychology laboratory? 111) _____
- A) Kraepelin
 - B) Wundt
 - C) Freud
 - D) Watson

Answer: B

Diff: 1 Type: MC Page Ref: 20

Topic: The Evolution of the Psychological Research Tradition

Skill: Factual

- 112) Witmer is credited with 112) _____
- A) establishing psychology as a field in the United States.
 - B) bringing psychoanalysis to the United States.
 - C) being the founder of clinical psychology.
 - D) writing the first psychology text.

Answer: C

Diff: 1 Type: MC Page Ref: 20

Topic: The Beginnings of Psychoanalysis

Skill: Factual

- 113) Behaviorism was 113) _____
- A) an attempt to focus on the thinking styles of people with mental illness.
 - B) a reaction to what the behaviorists perceived as a lack of scientific rigor in psychoanalysis.
 - C) a reaction to the lack of moral and spiritual factors in most theories at the time.
 - D) a spin-off theory that elaborated on the psychoanalytic viewpoint.

Answer: B

Diff: 1 Type: MC Page Ref: 21

Topic: The Behavioral Perspective

Skill: Applied

- 114) A behavioral psychologist would be most likely to use 114) _____
- A) hypnotism.
 - B) free association.
 - C) observational techniques.
 - D) dream analysis.

Answer: C

Diff: 1 Type: MC Page Ref: 21

Topic: The Behavioral Perspective

Skill: Applied

- 115) A psychologist who takes a behavioral perspective would focus on 115) _____
- A) unconscious conflicts.
 - B) learning.
 - C) the role of behavioral factors.
 - D) early experiences.

Answer: B

Diff: 1 Type: MC Page Ref: 21

Topic: The Behavioral Perspective

Skill: Applied

- 116) Who is considered to be the "father" of behaviorism? 116) _____
- A) Watson
 - B) Wundt
 - C) Pavlov
 - D) Freud

Answer: A

Diff: 2 Type: MC Page Ref: 21

Topic: The Behavioral Perspective

Skill: Factual

- 117) The central principle of classical conditioning is that 117) _____
A) we repeat those actions that we see others engage in.
B) the interaction of genetics and social factors best explains human behavior.
C) the consequences of behavior influence its likelihood of being repeated.
D) after repeated pairings with a stimulus that naturally causes a response, a neutral stimulus will cause a similar response.

Answer: D

Diff: 2 Type: MC Page Ref: 21
Topic: Evolution of the Psychological Research Tradition
Skill: Conceptual

- 118) The role of learning is the central theme in 118) _____
A) the behavioral perspective.
B) Wundt's approach to psychological research.
C) the psychoanalytic approach.
D) Breuer's approach to treating people with mental disorders.

Answer: A

Diff: 1 Type: MC Page Ref: 21
Topic: The Behavioral Perspective
Skill: Conceptual

- 119) Both _____ and _____ studied the effects of consequences on the occurrence of behaviors. 119) _____
A) Pavlov; Freud
B) Skinner; Pavlov
C) Thorndike; Skinner
D) Pavlov; Thorndike

Answer: C

Diff: 1 Type: MC Page Ref: 22
Topic: The Behavioral Perspective
Skill: Factual

- 120) The central principle of operant conditioning is that 120) _____
A) certain reflexes cause us to engage in habitual behavior.
B) we repeat those actions that we see others engage in.
C) the interaction of genetics and social factors best explains human behavior.
D) the consequences of behavior influence its likelihood of being repeated.

Answer: D

Diff: 2 Type: MC Page Ref: 22
Topic: Evolution of the Psychological Research Tradition
Skill: Conceptual

- 121) Which of the following is NOT a problem of the case study method? 121) _____
A) Low generalizability.
B) Writer bias.
C) Subject dropout.
D) Narrow and possibly mistaken conclusions.

Answer: C

Diff: 1 Type: MC Page Ref: 22
Topic: Research Approaches in Abnormal Psychology
Skill: Conceptual

- 122) Which of the following is NOT something that can be learned from a case study? 122) _____
A) The cause of a disorder.
B) That a particular theory has limited support.
C) Evidence that challenges a prevailing theory or belief.
D) New ideas for research.

Answer: A

Diff: 1 Type: MC Page Ref: 22
Topic: Research Approaches in Abnormal Psychology
Skill: Conceptual

- 123) Why is it dangerous to make conclusions based on case studies? 123) _____
A) Case studies can provide little information about a disorder.
B) Conclusions based on so little data are likely to be flawed.
C) Few patients are willing to be used as case studies.
D) It is unethical.
Answer: B
Diff: 2 Type: MC Page Ref: 23
Topic: Research in Abnormal Psychology/Clinical Case Studies
Skill: Conceptual
- 124) Which of the following typically involves the use of trained observers? 124) _____
A) psychophysiological data collection B) direct observation
C) self report data collection D) case study method
Answer: B
Diff: 1 Type: MC Page Ref: 23
Topic: Research in Abnormal Psychology/Observation of Behavior
Skill: Factual
- 125) A psychologist reports a single case of a disorder, detailing the person's feelings and responses. This research strategy is 125) _____
A) weak because it rarely provides information we can generalize to others with the disorder.
B) weak because it confuses correlational data with experimental data.
C) very strong and widely used in abnormal psychology.
D) rarely used in abnormal psychology because few people are willing to examine their own lives closely.
Answer: A
Diff: 3 Type: MC Page Ref: 23
Topic: Research in Abnormal Psychology/Sampling and Generalization
Skill: Applied
- 126) Carl is asked to provide information about his drinking. Despite the fact that he has had several arrests for driving while intoxicated, Carl reports that he has no problems with drinking. This is an example of 126) _____
A) the problems of forming hypotheses. B) the problems of diagnosis.
C) the problems with case studies. D) the problems with self-report data.
Answer: D
Diff: 1 Type: MC Page Ref: 23
Topic: Research in Abnormal Psychology/Sources of Information
Skill: Applied
- 127) One strength of case studies is 127) _____
A) they are usually highly accurate.
B) they can generate hypotheses.
C) they do not involve bias.
D) they can help prove causal relationships between variables.
Answer: B
Diff: 1 Type: MC Page Ref: 23
Topic: Research in Abnormal Psychology/Forming Hypotheses
Skill: Factual
- 128) _____ are more or less plausible ideas used to explain something (e.g., a behavior) and can be tested using research methods. 128) _____
A) Observations B) Correlations C) Hypotheses D) Variables
Answer: C
Diff: 1 Type: MC Page Ref: 24
Topic: Research in Abnormal Psychology/Observation of Behavior
Skill: Factual
- 129) An important FIRST step in studying a particular disorder is 129) _____
A) deciding upon the appropriate statistical analyses to use on the data to be collected.
B) selecting the appropriate subjects for study.
C) selecting the best case study for analysis.
D) determining the criteria for identifying people who have the disorder.

Answer: D

Diff: 2 Type: MC

Page Ref: 24

Topic: Research in Abnormal Psychology/Sampling and Generalization

Skill: Conceptual

- 130) Upon deciding to study individuals with a given disorder, what is the next step that should be taken? 130) _____
- A) Determine what treatment approach will be tested.
 - B) Select criteria for identifying individuals with the disorder.
 - C) Gather survey data to determine where your subjects are most likely to reside.
 - D) Establish which subjects will be the control group and which will be in the experimental group.

Answer: B

Diff: 1 Type: MC

Page Ref: 24

Topic: Research in Abnormal Psychology/Sampling and Generalization

Skill: Factual

- 131) Ideally, a sample is described as what? 131) _____
- A) representative
 - B) random
 - C) demographically pure
 - D) generalizable

Answer: A

Diff: 1 Type: MC

Page Ref: 24

Topic: Research in Abnormal Psychology/Sampling and Generalization

Skill: Factual

- 132) Why is a representative sample desirable? 132) _____
- A) The more representative a sample is, the more generalizable the data.
 - B) Such samples are random.
 - C) Only representative samples yield meaningful results.
 - D) Hypotheses can only be tested on representative samples.

Answer: A

Diff: 1 Type: MC

Page Ref: 24-25

Topic: Research in Abnormal Psychology/Sampling and Generalization

Skill: Factual

- 133) Dr. Katz is researching the causes of phobias. He puts an ad in a newspaper asking for people who have an intense, distressing fear of snakes to come and participate in his study. The major problem with this is 133) _____
- A) he doesn't know if people are telling the truth about their fears or not.
 - B) his sample will be too small.
 - C) he is not getting a representative sample.
 - D) the people who come may not have a phobia.

Answer: C

Diff: 2 Type: MC

Page Ref: 24-25

Topic: Research in Abnormal Psychology/Sampling and Generalization

Skill: Applied

- 134) Why would a researcher want to insure that every person in the larger group of study has an equal chance of being included in the sample? 134) _____
- A) It provides important epidemiological information such as the prevalence and incidence of the disorder.
 - B) This helps eliminate a correlational relationship.
 - C) It increases the chances of finding a causal relationship.
 - D) It increases the researcher's ability to generalize findings to the larger group.

Answer: D

Diff: 2 Type: MC

Page Ref: 24-25

Topic: Research in Abnormal Psychology/Sampling and Generalization

Skill: Conceptual

- 135) A researcher interested in the health problems of people with schizophrenia interviews only those people diagnosed with the disorder who are in an inpatient facility. The most glaring weakness in this study is 135) _____
- A) the absence of correlational statistics.
 - B) nonrepresentative sampling.
 - C) the failure to use DSM-IV criteria for health problems.
 - D) having an inappropriate control group.

Answer: B

Diff: 3 Type: MC Page Ref: 24-25
Topic: Research in Abnormal Psychology/Sampling and Generalization
Skill: Applied

- 136) Dr. Z does a study on the connection between physical abuse in childhood and depression in adulthood. 136) _____
Her study has good external validity. This means
A) it clearly shows that being physically abused as a child causes a person to become depressed as an adult.
B) it was free of error and we can be confident in the results.
C) it had a control group and an experimental group.
D) its findings can be generalized to people outside the study sample.

Answer: D

Diff: 2 Type: MC Page Ref: 24
Topic: Internal and External Validity
Skill: Conceptual

- 137) If a study has internal validity, this means 137) _____
A) its' findings can be generalized to populations beyond the study sample.
B) its' findings are definitely true.
C) its' findings can be used to draw valid conclusions.
D) its' findings are only applicable to the study sample, not to any other group.

Answer: C

Diff: 2 Type: MC Page Ref: 24
Topic: Internal and External Validity
Skill: Conceptual

- 138) In Dr. Lu's study of eating disorders, she looked at the academic histories of girls with an eating disorder 138) _____
and girls who did not have such problem. In this example, the girls with eating disorders are the _____
group.
A) control B) criterion C) comparison D) treatment

Answer: B

Diff: 1 Type: MC Page Ref: 25
Topic: Research in Abnormal Psychology/Criterion and Control Group
Skill: Applied

- 139) In Dr. Lu's study of eating disorders, she looked at the academic histories of girls with an eating disorder 139) _____
and girls who did not have such problem. In this example, the girls without eating disorders are the
_____ group.
A) conforming B) treatment C) criterion D) control

Answer: D

Diff: 1 Type: MC Page Ref: 25
Topic: Research in Abnormal Psychology/Criterion and Control Group
Skill: Applied

- 140) In what significant way do observational (correlational) research designs differ from experimental research 140) _____
designs?
A) There is no comparison group in observational research.
B) Observational research does not generate hypotheses.
C) There is no manipulation of variables in observational research.
D) Observational research does not require the selection of a sample to study.

Answer: C

Diff: 1 Type: MC Page Ref: 25
Topic: Research in Abnormal Psychology/Experimental Strategies
Skill: Factual

- 141) To determine whether certain characteristics are true of people in general, and not just of people with 141) _____
mental disorders, it is important to use
A) a representative sample of individuals with the disorder.
B) an experimental design.
C) a criterion group.
D) a control group.

Answer: D

Diff: 2 Type: MC

Page Ref: 25

Topic: Research in Abnormal Psychology/Sampling and Generalization

Skill: Conceptual

- 142) What is a good control group for a research study on people with eating disorders? 142) _____
- A) A group that is drawn from the sample of people with eating disorders.
 - B) People who used to have eating disorders but no longer say they do.
 - C) People who have an eating disorder and a wide range of educational backgrounds.
 - D) A group that is comparable to those with eating disorders except they eat normally.

Answer: D

Diff: 1 Type: MC

Page Ref: 25

Topic: Research in Abnormal Psychology/Sampling and Generalization

Skill: Applied

- 143) Why are correlational (observational) research designs often used in abnormal psychology? 143) _____
- A) They give in-depth descriptions of the disorder being studied.
 - B) It is often unethical or impossible to directly manipulate the variables involved in abnormal psychology.
 - C) They are best at determining cause and effect.
 - D) They are the most useful for comparing groups.

Answer: B

Diff: 2 Type: MC

Page Ref: 25

Topic: Observational Research Designs

Skill: Conceptual

- 144) What is the most important limitation of correlational studies? 144) _____
- A) They cannot determine cause and effect.
 - B) They rarely have representative samples.
 - C) They are very subject to bias.
 - D) They are very difficult to do.

Answer: A

Diff: 1 Type: MC

Page Ref: 25

Topic: Observational Research Designs

Skill: Factual

- 145) Researchers have observed that women who wear bras for more than 16 hours a day are more likely to develop breast cancer than those who spend less time in a bra. In other words, there is a correlation between wearing a bra and breast cancer. Based on this finding, which of the following statements is true? 145) _____
- A) Wearing a bra causes cancer.
 - B) Some additional variable may serve to explain the relationship observed between wearing a bra and developing cancer.
 - C) All women should avoid wearing a bra for more than 16 hours a day.
 - D) There is no relationship between wearing a bra and breast cancer; these data are clearly flawed.

Answer: B

Diff: 2 Type: MC

Page Ref: 25

Topic: Research in Abnormal Psychology/Correlation and Causation

Skill: Conceptual

- 146) What research approach require subjects to recall the past? 146) _____
- A) reconstructive
 - B) retroactive
 - C) retrospective
 - D) repressed

Answer: C

Diff: 1 Type: MC

Page Ref: 25

Topic: Research/Abnormal Psychology Retrospective/Prospective

Skill: Factual

- 147) A researcher says, "These studies make it too easy for investigators to find the background factors they expect to find. However, they are more valid if we find documents like school reports that show the background factor before the disorder emerges." What kind of research strategy is the researcher referring to? 147) _____
- A) analogue studies
 - B) retrospective strategies
 - C) prospective strategies
 - D) N=1 strategies

Answer: B

Diff: 2 Type: MC

Page Ref: 25

Topic: Research/Abnormal Psychology Retrospective/Prospective

Skill: Conceptual

148) Which of the following may be safely inferred when a significant negative correlation is found between variables x and y? 148) _____

A) y causes x

B) x causes y

C) as x increases, y decreases

D) as x increases, y increases

Answer: C

Diff: 2 Type: MC

Page Ref: 25

Topic: Research in Abnormal Psychology/Correlation and Causation

Skill: Conceptual

149) Dr. Gordon finds that heroin-addicted adults almost always smoked cigarettes and drank alcohol when they were young adolescents. Knowing this strong association we can conclude that 149) _____

A) there is an association among the variables, but no causal inferences should be drawn.

B) cigarette smoking causes drinking which causes heroin addiction.

C) heroin addiction is caused by the same factors that cause early smoking and drinking.

D) if cigarette smoking and drinking could be stopped in adolescence, heroin addiction would be stopped too.

Answer: A

Diff: 2 Type: MC

Page Ref: 25

Topic: Research in Abnormal Psychology/Sampling and Generalization

Skill: Applied

150) Individuals who have alcohol problems tend to come from families with other individuals who have alcohol problems. This would suggest that 150) _____

A) genetic factors cause an individual to have alcohol problems.

B) both genetic and environmental factors cause an individual to have problems.

C) although there is an association, no cause-effect relationship can be concluded.

D) environmental factors cause an individual to have alcohol problems.

Answer: C

Diff: 3 Type: MC

Page Ref: 25

Topic: Research in Abnormal Psychology/Correlation and Causation

Skill: Conceptual

151) What type of research design begins with the identification of individuals who are likely to develop a particular disorder? 151) _____

A) correlational

B) experimental

C) retrospective

D) prospective

Answer: D

Diff: 1 Type: MC

Page Ref: 26

Topic: Research/Abnormal Psychology Retrospective/Prospective

Skill: Applied

152) Dr. Luigi has discovered that the more spaghetti people eat, the less likely they are to be diagnosed with depression. Based on this finding, what statement can be made about the relationship between spaghetti and depression? 152) _____

A) Italians are happy.

B) Spaghetti prevents depression.

C) There is a positive correlation between spaghetti and depression.

D) There is a negative correlation between spaghetti and depression.

Answer: D

Diff: 2 Type: MC

Page Ref: 26

Topic: Research in Abnormal Psychology/Correlation and Causation

Skill: Applied

153) It has been demonstrated that those who were prenatally exposed to the influenza virus are more likely to develop schizophrenia. In other words, prenatal exposure to the influenza virus is _____ correlated with developing schizophrenia. 153) _____

A) randomly

B) not

C) negatively

D) positively

Answer: D

Diff: 2 Type: MC Page Ref: 26
Topic: Research in Abnormal Psychology/Correlation and Causation
Skill: Factual

- 154) A significant positive correlation is found between variables x and y. Which of the following may be safely inferred? 154) _____
- A) y causes x
B) x causes y
C) as x increases, y decreases
D) as x increases, y increases

Answer: D

Diff: 2 Type: MC Page Ref: 26
Topic: Research in Abnormal Psychology/Correlation and Causation
Skill: Conceptual

- 155) When Derek did his doctoral dissertation, he found a correlation coefficient between his variables of $-.92$. This means 155) _____
- A) there is no connection between his two variables.
B) there is a strong connection between his variables – higher scores on one are associated with higher scores on the other.
C) there is a strong connection between his variables – higher scores on one are associated with lower scores on the other.
D) there is a connection between his variables but it is a very small one.

Answer: C

Diff: 2 Type: MC Page Ref: 26
Topic: Research Designs/Measuring Correlation
Skill: Conceptual

- 156) Dr. Abromowitz has done a study looking at the correlation between depression in children and amount of television they watched. He finds what seems to be a strong, positive correlation between the two. He decides that watching too much T.V. causes children to become depressed. However, he has a third variable problem. Which of the following is an example of a third variable problem?
- A) Parental depression is strongly correlated with both children's depression and the amount of T.V. a child watches.
B) Being depressed causes a child to watch too much T.V.
C) Making any conclusions about connections between only two variables.
D) Thinking there is a connection between variables when there is none.

Answer: A

Diff: 3 Type: MC Page Ref: 26
Topic: Research Designs/Correlations and Causality
Skill: Applied

- 157) A researcher who provides a certain treatment for one group and withholds treatment from a completely comparable group is using the _____ research method. 157) _____
- A) correlational
B) experimental
C) epidemiological
D) case study

Answer: B

Diff: 1 Type: MC Page Ref: 26
Topic: Research in Abnormal Psychology/Experimental Strategies
Skill: Conceptual

- 158) A researcher who studies children who are home-schooled and compares them to children who attend school is using the _____ research method. 158) _____
- A) epidemiological
B) correlational
C) case study
D) experimental

Answer: B

Diff: 3 Type: MC Page Ref: 26
Topic: Research in Abnormal Psychology/Experimental Strategies
Skill: Applied

- 159) In most prospective studies, 159) _____
A) analogue research is used because of the ethical problems with other experimental research.
B) a representative sample of a general population of adults is used.
C) children who share a risk factor for a disorder are studied before signs of the disorder show up.
D) large samples of individuals are interviewed to see if there are any risk factors that differentiate those with the disorder of interest.
Answer: C
Diff: 2 Type: MC Page Ref: 26
Topic: Research/Abnormal Psychology Retrospective/Prospective
Skill: Factual
- 160) Dr. Logan does a study on the impact of daycare experiences on adult relationships. She collects data on the children when they are ages 4, 8 and 12 and then again once they reach age 21. This type of study is 160) _____
A) retrospective research.
B) a case study.
C) an example of a third variable problem.
D) a longitudinal design.
Answer: D
Diff: 2 Type: MC Page Ref: 26
Topic: Research Designs/Retrospective/Prospective
Skill: Conceptual
- 161) Several studies have found that there is a correlation in children between amount of television watched and weight. What is one of the problems with using this finding to report that watching lots of television makes children obese? 161) _____
A) It is just as possible that being obese causes children to watch more television.
B) There wasn't a control group that watched no television.
C) The sample was probably not representative.
D) The data might be inaccurate.
Answer: A
Diff: 2 Type: MC Page Ref: 26
Topic: Retrospective vs. Prospective Strategies
Skill: Applied
- 162) Which variable is manipulated in an experiment? 162) _____
A) comparison B) independent C) dependent D) criterion
Answer: B
Diff: 1 Type: MC Page Ref: 26
Topic: Research in Abnormal Psychology/Experimental Strategies
Skill: Factual
- 163) In a study of the effects of ice cream on mood, the ice cream can be described as what? 163) _____
A) a correlational variable B) the dependent variable
C) the independent variable D) a confounding variable
Answer: C
Diff: 1 Type: MC Page Ref: 26
Topic: Research in Abnormal Psychology/Experimental Strategies
Skill: Applied
- 164) In a study of the effects of ice cream on mood, the mood after ice cream exposure can be described as what? 164) _____
A) the dependent variable B) a correlational variable
C) the independent variable D) a confounding variable
Answer: A
Diff: 1 Type: MC Page Ref: 26
Topic: Research in Abnormal Psychology/Experimental Strategies
Skill: Applied
- 165) Which of the following would most likely be explored with an experiment? 165) _____
A) the possible causes of schizophrenia
B) the effectiveness of a new treatment for depression
C) the relationships between early childhood trauma and substance abuse
D) the effect of the home environment on relapse to drug use

Answer: B

Diff: 2 Type: MC

Page Ref: 26

Topic: Research in Abnormal Psychology/Experimental Strategies

Skill: Conceptual

- 166) Which of the following is an example of an ABAB design? 166) _____
- A) All subjects received one of two treatments.
 - B) Half of the subjects receive one treatment and the other half are not treated.
 - C) A subject is observed both before and after two exposures to the treatment.
 - D) A subject is observed and treated.

Answer: C

Diff: 2 Type: MC

Page Ref: 28

Topic: Research in Abnormal Psychology/Experimental Strategies

Skill: Conceptual

- 167) Fred refuses to speak at school, although he speaks normally at home. His therapist plans out a treatment where Fred is given a gold star every time he answers his teacher, and can then trade in his stars for prizes. Fred begins speaking in class. The therapist then tells the teacher to stop the program for a couple of weeks. Fred stopped talking during that time. The teacher then starting giving Fred stars again, and Fred again began to talk. This is an example of 167) _____
- A) a case study.
 - B) a self-report study.
 - C) an ABAB experimental design study.
 - D) a correlational study.

Answer: C

Diff: 2 Type: MC

Page Ref: 28

Topic: Research in Abnormal Psychology/Experimental Strategies

Skill: Applied

- 168) What is the value of using an ABAB design? 168) _____
- A) Generalizability is ensured.
 - B) Subjects can be selected randomly.
 - C) The effects of a single form of treatment are studied twice in the same subject.
 - D) It permits the study of the effects of multiple forms of treatment on a single subject.

Answer: C

Diff: 2 Type: MC

Page Ref: 28

Topic: Research in Abnormal Psychology/Experimental Strategies

Skill: Conceptual

- 169) What did Seligman find by studying dogs exposed to uncontrollable shock? 169) _____
- A) Seligman found that the exposure to the shock altered the level of brain chemicals known to be involved in depression.
 - B) Seligman found that uncontrollable shock led the dogs to behave much like depressed humans.
 - C) Seligman demonstrated that dogs can get depressed.
 - D) Seligman found that the dogs became aggressive.

Answer: B

Diff: 2 Type: MC

Page Ref: 28-29

Topic: Research in Abnormal Psychology/Experimental Strategies

Skill: Applied

- 170) Random assignment means 170) _____
- A) a study has a control group and an experimental group.
 - B) a study is correlational.
 - C) every research subject has an equal chance of being in the control or experimental group.
 - D) every research subject spent time on a waiting list before being included.

Answer: C

Diff: 1 Type: MC

Page Ref: 29

Topic: Manipulating Variables

Skill: Conceptual

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 171) There is one agreed upon and universally accepted definition of "abnormality." 171) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 3
Topic:
Skill:
Objective:
- 172) A classification system for mental disorders is needed so that those treating mental disorders can be paid. 172) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 5
Topic:
Skill:
Objective:
- 173) Classification systems can lead to a loss of information about a person. 173) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 5
Topic:
Skill:
Objective:
- 174) An individual who has been diagnosed with schizophrenia should always be referred to as a "schizophrenic." 174) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 6
Topic:
Skill:
Objective:
- 175) The DSM is rarely used by clinicians today. 175) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 6
Topic:
Skill:
Objective:
- 176) According to the DSM, deviant behavior is indicative of a mental disorder. 176) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 6
Topic:
Skill:
Objective:
- 177) The DSM provides information as to the cause and treatment of all recognized mental disorders. 177) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 6
Topic:
Skill:
Objective:
- 178) The clinical presentation of depression may vary with culture. 178) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 7
Topic:
Skill:
Objective:

- 179) Epidemiology is the study of the cause of mental disorders. 179) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 8
Topic:
Skill:
Objective:
- 180) The number of people diagnosed with schizophrenia in a given year would be an example of point prevalence. 180) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 9
Topic:
Skill:
Objective:
- 181) The incidence of a disorder in a particular group of people may provide information about the cause of the disorder. 181) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 9
Topic:
Skill:
Objective:
- 182) Mental disorders are very common. 182) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 9
Topic:
Skill:
Objective:
- 183) It is rare for an individual with one mental disorder to also suffer from a second. 183) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 10
Topic:
Skill:
Objective:
- 184) Early peoples believed that "possession" by both good and evil spirits was possible. 184) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 10
Topic:
Skill:
Objective:
- 185) Hippocrates recognized that genetics played a role in the development of mental disorders. 185) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 11
Topic:
Skill:
Objective:

- 186) An individual with a sanguine temperament is one who is anxious and fearful. 186) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 11
Topic:
Skill:
Objective:
- 187) During the Middle Ages, treatment of the mentally ill in Islamic countries was harsh and inhumane. 187) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 12
Topic:
Skill:
Objective:
- 188) During the Middle Ages in Europe, the treatment of the mentally ill reflected the scientific gains of the Greeks and Romans. 188) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 12
Topic:
Skill:
Objective:
- 189) Lycanthropy, a mental illness seen in the Middle Ages, was typically treated with dancing. 189) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 12
Topic:
Skill:
Objective:
- 190) It has been well-documented that most of those accused of being witches during the Middle Ages were mentally ill. 190) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 13
Topic:
Skill:
Objective:
- 191) Treatment of and attitudes toward the mentally ill began to change in the 1500's, as various people began to argue that problems like possession were actually diseases. 191) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 13
Topic:
Skill:
Objective:
- 192) The first asylums were established to remove those with offensive physical ailments from the rest of society. 192) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 13
Topic:
Skill:
Objective:

- 193) The typical early asylums were, essentially, prisons. 193) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 14
Topic:
Skill:
Objective:
- 194) While the early asylums of Europe provided little or no treatment for the mentally disturbed, the treatment of mental patients in the United States was characterized by aggressive treatments intended to restore "balance." 194) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 14
Topic:
Skill:
Objective:
- 195) Pinel advocated the use of restraint, bloodletting, and purgatives. 195) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 14
Topic:
Skill:
Objective:
- 196) Both Pinel and Tuke are credited with initiating movements that led to the humanitarian treatment of the mentally ill. 196) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 14
Topic:
Skill:
Objective:
- 197) Moral management focused almost exclusively on the physical well-being of hospitalized mental patients. 197) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 15
Topic:
Skill:
Objective:
- 198) Moral management was surprisingly effective in its time. 198) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 15
Topic:
Skill:
Objective:
- 199) Dorothea Dix is credited with improving the treatment and living conditions of the mentally ill. 199) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 15
Topic:
Skill:
Objective:

- 200) Emil Kraepelin is known as the father of the mental hygiene movement. 200) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 15
Topic:
Skill:
Objective:
- 201) Deinstitutionalization of the mentally ill is only occurring in the United States. 201) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 16
Topic:
Skill:
Objective:
- 202) The problems caused by deinstitutionalization appear to be due to the failure of society to effectively provide for the mentally ill in a community setting. 202) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 17
Topic:
Skill:
Objective:
- 203) Currently, deinstitutionalization is criticized because many former patients have not adjusted well outside of the institution. 203) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 17
Topic:
Skill:
Objective:
- 204) The debate between the Nancy School and Charcot led to the first modern day recognition that a mental disorder could be psychologically caused. 204) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 19
Topic:
Skill:
Objective:
- 205) Freud thought that catharsis occurs when patients talked freely about their problems and felt significant emotional release. 205) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 19
Topic:
Skill:
Objective:
- 206) Psychoanalysis emerged as a reaction to the unwillingness of the behaviorists to consider internal, psychological factors that could not be easily observed. 206) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 19
Topic:
Skill:
Objective:

- 207) Wilhelm Wundt was the first to establish an experimental psychology laboratory. 207) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 20
Topic:
Skill:
Objective:
- 208) The case study method is a research method that is no longer used today. 208) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 22-23
Topic:
Skill:
Objective:
- 209) Information obtained in an interview with a research subject would be an example of self report data. 209) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 23
Topic:
Skill:
Objective:
- 210) A hypothesis is a question that researchers study. 210) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 24
Topic:
Skill:
Objective:
- 211) If a study has excellent internal validity, we can generalize its findings to populations beyond the study sample. 211) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 24
Topic:
Skill:
Objective:
- 212) An ideal research sample would be one that accurately reflects the population of interest. 212) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 24
Topic:
Skill:
Objective:
- 213) Correlational studies give clear evidence of causation. 213) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 25
Topic:
Skill:
Objective:

214) A negative correlation means that there is no connection between the variables being studied. 214) _____

Answer: True False
Diff: 1 Type: TF PageRef: 25
Topic:
Skill:
Objective:

215) Both a control group and a comparison group are needed in any study. 215) _____

Answer: True False
Diff: 3 Type: TF Page Ref: 25
Topic:
Skill:
Objective:

216) A prospective research design attempts to collect information about the early lives of people with a disorder. 216) _____

Answer: True False
Diff: 1 Type: TF Page Ref: 26
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

217) Why is it difficult to agree on a definition of abnormal behavior? 217) _____

Answer: There are no sufficient or necessary conditions. Also, what is abnormal at one point in time may no longer be considered abnormal at another time.

Diff: 1 Type: SA Page Ref: 3-5
Topic:
Skill:
Objective:

218) What are the benefits of classifying mental disorders? 218) _____

Answer: Allows information to be organized, needed for research, most sciences do it, establishes the range of problems mental health professionals can address.

Diff: 2 Type: SA Page Ref: 5-6
Topic:
Skill:
Objective:

219) Discuss one disadvantage of developing a classification system for mental disorders. 219) _____

Answer: Multiple possible answers:

1. There is a loss of information when a classification scheme is applied to behavior, as will happen when any single word is used to convey something as complex as a mental disorder.
2. In addition, there may be some stigma attached to receiving a psychiatric diagnosis.
3. Stereotyping may occur, leading to incorrect assumptions about and expectations of an individual who has received a psychiatric diagnosis.

Diff: 2 Type: SA Page Ref: 5-6
Topic:
Skill:
Objective:

- 220) Explain what a culture-specific syndrome is and provide an example of one. 220) _____
Answer: A culture-specific syndrome is a disorder that occurs most commonly in or exclusively in a specific culture. While many disorders may present themselves differently in different cultures, these are disorders that are unique to a particular culture. Koro, a disorder seen most commonly in young Asian males, is one example. This anxiety disorder is characterized by an extreme fear that a body part is shrinking.
Diff: 2 Type: SA Page Ref: 8
Topic:
Skill:
Objective:
- 221) What is epidemiology? 221) _____
Answer: Epidemiology is the study of the distribution of a health-related problem within a population. An important element of mental health epidemiology is the frequency of mental disorders.
Diff: 1 Type: SA Page Ref: 8
Topic:
Skill:
Objective:
- 222) Discuss the difference between prevalence and incidence. 222) _____
Answer: Prevalence is the number of active cases of a disorder in a given population during a given period of time. Incidence is the number of new cases that occur over a given period of time.
Diff: 2 Type: SA Page Ref: 8-9
Topic:
Skill:
Objective:
- 223) What is comorbidity? 223) _____
Answer: The presence of two or more disorders in the same person. This is common in serious mental disorders, rarer for mild disorders.
Diff: 2 Type: SA Page Ref: 10
Topic:
Skill:
Objective:
- 224) What was the most common explanation for abnormal behavior among many ancient peoples including the Chinese, Egyptians, Hebrews, and Greeks? 224) _____
Answer: The most common explanation was possession by a demon or a god.
Diff: 1 Type: SA Page Ref: 10
Topic:
Skill:
Objective:
- 225) What is tarantism? 225) _____
Answer: Tarantism is a form of "mass madness" characterized by wild dancing. The behavior seen was similar to early orgiastic rites, but came to be viewed as a consequence of having been bitten by a tarantula.
Diff: 1 Type: SA Page Ref: 12
Topic:
Skill:
Objective:

- 226) How did people in the Middle Ages think that possession and mental illness were related? 226) _____
Answer: People who experienced physical possession were mentally ill, those who experienced spiritual possession were witches.
Diff: 2 Type: SA Page Ref: 12
Topic:
Skill:
Objective:
- 227) What was Bedlam? 227) _____
Answer: Bedlam was an asylum in London that became well known for its deplorable conditions and practices. It was typical of many asylums of the sixteenth century that served primarily as storage facilities for the mentally ill.
Diff: 1 Type: SA Page Ref: 14
Topic:
Skill:
Objective:
- 228) Who was Benjamin Rush? 228) _____
Answer: Benjamin Rush is credited with encouraging the use of more humane treatment of the mentally ill in the United States. He was the first American to organize a course in Psychiatry, and, although some of his practices may have been less than humane, he is recognized as a transitional figure between the poor treatment of the old era and the humane approaches of the new.
Diff: 1 Type: SA Page Ref: 14
Topic:
Skill:
Objective:
- 229) What was moral management? 229) _____
Answer: Moral management was an approach to the care of the mentally ill that emerged in the early part of the period of humanitarian reform. It focused on addressing the patient's social, individual, and occupational needs.
Diff: 1 Type: SA Page Ref: 15
Topic:
Skill:
Objective:
- 230) What contributions did Dorothea Dix make to the treatment of the mentally ill? 230) _____
Answer: Between 1841 and 1881 Dorothea Dix brought to light the inhuman treatment the mentally ill usually received and persuaded legislatures to fund the building of many mental hospitals. She is credited with improving conditions in American hospitals, establishing 32 mental hospitals, and fostering the growth of the mental hygiene movement in America.
Diff: 1 Type: SA Page Ref: 15-16
Topic:
Skill:
Objective:
- 231) What is the current attitude about hospitalization of the mentally ill? 231) _____
Answer: It is preferable to treat people in the community and treatment should be deinstitutionalized, although it is not the perfect solution it was once thought to be.
Diff: 2 Type: SA Page Ref: 16
Topic:
Skill:
Objective:

- 232) Why was the discovery of the malarial treatment for general paresis important? 232) _____
Answer: It was the first scientifically demonstrated connection between a mental illness and brain pathology.
Diff: 2 Type: SA Page Ref: 17
Topic:
Skill:
Objective:
- 233) Who was Emil Kraepelin? 233) _____
Answer: The first to recognized that certain symptoms occurred regularly together and to begin the classification of mental disorders.
Diff: 2 Type: SA Page Ref: 18
Topic:
Skill:
Objective:
- 234) What contribution to our thinking about abnormal behavior did Freud and Breuer make? 234) _____
Answer: They made the discovery of the unconscious and argued that processes outside the person's awareness could help determine behavior. They showed that emotional tensions that patients were not aware of could cause hysteria.
Diff: 1 Type: SA Page Ref: 19
Topic:
Skill:
Objective:
- 235) Who was Wilhelm Wundt? 235) _____
Answer: The man who established the first experimental psychology laboratory.
Diff: 1 Type: SA Page Ref: 20
Topic:
Skill:
Objective:
- 236) What is the central theme of the behavioral perspective? 236) _____
Answer: The role of learning in human behavior.
Diff: 2 Type: SA Page Ref: 21
Topic:
Skill:
Objective:
- 237) Briefly discuss why research in abnormal psychology is important. 237) _____
Answer: Through the use of research, the characteristics of disorders can be studied and our understanding of the etiology of disorders is furthered. In addition, research must be used to determine the effectiveness of treatment.
Diff: 2 Type: SA Page Ref: 22
Topic:
Skill:
Objective:
- 238) What is a case study and what are its benefits and drawbacks? 238) _____
Answer: An in-depth, detailed account of a single case. They are good sources of research ideas and hypotheses. However, information from them does not generalize. They are uncontrolled and often impressionistic, so any conclusions drawn may be incorrect.
Diff: 2 Type: SA Page Ref: 22-23
Topic:
Skill:
Objective:

239) Discuss the limitations of self-report data. 239) _____
Answer: Can be misleading—sometimes deliberately lie, misinterpret questions or try to present themselves more favorably or less favorably than is true.
Diff: 2 Type: SA Page Ref: 23
Topic:
Skill:
Objective:

240) What is sampling and why is it important? 240) _____
Answer: Sampling is the procedure used to select subjects to study. As it is not possible to study all of the population of interest, a subset of the population is selected. The sample studied needs to resemble the larger population on all relevant variables so that findings made when studying the sample can be generalized to the population. In other words, results obtained with a sample should provide accurate information about the larger population.
Diff: 2 Type: SA Page Ref: 24
Topic:
Skill:
Objective:

241) Discuss internal and external validity.
Answer: Internal – how confident we can be in the results of a study – how free from error it is, is it methodologically sound and able to be used to draw valid conclusions.
External –the extent to which we can generalize our findings beyond the study itself.
Diff: 2 Type:SA Page Ref: 24
Topic:
Skill:
Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

242) Discuss some of the difficulties involved in attempting to define abnormal behavior.
Answer: "Abnormal" presupposes some norm from which behavior deviates, but there is no definition of "normal" about which people can all agree. Abnormal is also related to behavior that is deemed undesirable by society. Value issues therefore always complicate the objective definition of disorders. What, exactly, comprises distress, disability, or dysfunction is also difficult to define. In addition, definitions of abnormality vary not only with culture, but over time.
GRADING RUBRIC: 6 point s total, 2 points for each difficulty discussed.
Diff: 1 Type: ES Page Ref: 3-5
Topic:
Skill:
Objective:

243) What is the DSM and how does it define "mental disorder"?
Answer: The DSM is the Diagnostic and Statistical Manual of Mental Disorders. The DSM is published by the American Psychiatric Association and provides information to be used in identifying mental disorders. The DSM does not provide information as to the cause of mental disorders. A mental disorder, according to the DSM, is a psychological problem that is not the result of some culturally accepted response to a live event but that causes one or more of the following: present distress (a painful symptom); disability (impairment in one or more areas of functioning); increased risk of suffering death, pain, or disability; and an important loss of freedom. A mental disorder is not simply deviant or unacceptable behavior and is believed to be the product of some sort of dysfunction within the individual.

GRADING RUBRIC: 8 points total, 2 points for what DSM stands for, 2 points for explaining what it is, 4 points for correct definition of "mental disorder."
Diff: 1 Type: ES Page Ref: 6

244) Abnormal behavior often has been attributed to the influence of supernatural forces. Describe how these forces were used to explain abnormal behavior during various time periods, and the treatments that resulted.

Answer: Early writings of the Egyptians, Chinese, Hebrews, and Greeks show they attributed such behavior to possession by a demon or god. This was treated by exorcism. In the Middle Ages, the clergy were largely responsible for treatment because possession was considered causal. In fifteenth and sixteenth century Europe, witchcraft became another related explanation for which torture, burning, and other such methods were used. Recent historical analyses, however, suggest that the mentally ill may not have been taken to be witches, as was often once thought. Even in contemporary culture, one can find those who believe that supernatural forces cause psychological problems. Exorcisms are still occasionally practiced.

GRADING RUBRIC: 10 points total, 5 points each for a discussion of the use of supernatural explanations during 2 different time periods.

Diff: 2 Type: ES Page Ref: 10-14

Topic:

Skill:

Objective:

245) What was moral management? What caused its near abandonment in the second part of the nineteenth century?

Answer: Moral management was a broad treatment that included a patient's social, individual and occupational needs. The moral and spiritual development of patients was a focus. More emphasis was placed on a patient's character than on their disorder. Typical treatments were spiritual discussion and manual labor. It was surprisingly effective. It was abandoned because of changing attitudes toward the mentally ill and the increasing size of hospitals. The mental hygiene movement and advances in biomedical science also contributed to its decrease in popularity. The focus on physical and biological explanations and care meant that other factors in a patient's life were considered irrelevant.

GRADING RUBRIC: 10 points total, 5 for each part of the question.

Diff: 2 Type: ES Page Ref: 15

Topic:

Skill:

Objective:

246) Explain how the link between the brain and mental disorders was first established.

Answer: While Hippocrates and others had long proposed that mental disorders had some physical cause, it was not until the 1800's that a clear link between a physical disease process and mental illness was established. This finding then paved the way for further exploration of how brain malfunctions could result in mental illness. General paresis was an illness that produced paralysis, insanity, and, typically, death within two to five years. This mental illness was recognized as a specific type of mental disorder in 1825. Thus, it was recognized as a unique disorder and attempts could then be made to treat it. It was eventually recognized that this illness was caused by syphilis. This is the first documented link between an identifiable brain infection and mental illness. With this finding, and the rising influence of modern experimental science, the investigation of brain pathology as the cause of mental illness began in earnest.

GRADING RUBRIC: 8 points total, 4 for the historical events leading up to the categorization of general paresis as a type of mental disorder, 4 for a discussion of syphilis as a cause of the disease and a brain infection producing a mental illness.

Diff: 2 Type: ES Page Ref: 17-18

Topic:

Skill:

Objective:

247) What was the dispute between Charcot and the Nancy School? Why is this significant?

Answer: The Nancy School, named for the town of Nancy in France, refers to a group of physicians who believed that hysteria was a form of self-hypnosis. In other words, they believed that hysteria had a psychological cause. They came to this conclusion as it was observed that the symptoms of hysteria could be both produced and removed by means of hypnosis. Charcot, a neurologist, had not been able to replicate the findings of the Nancy School and argued that degenerative brain changes led to hysteria. The dispute between Charcot and the Nancy School was a debate about what the nature of the cause of hysteria was, biological or psychological. In the end, the view of the Nancy School was accepted. This is said to represent the first recognition of a psychologically caused mental disorder.

GRADING RUBRIC: 10 points total, 4 points for stating the dispute, 2 points for explaining why it developed, 4 points for explaining its significance.

Diff: 2 Type: ES Page Ref: 19
Topic:
Skill:
Objective:

248) Describe the retrospective and prospective research designs. What are the benefits and problems of these designs?

Answer: Retrospective - study people with a disorder by collecting information about their lives before they became sick. Problem is faulty and selective memory, bias on the part of the person and the researcher. Prospective - find people with high risk of developing a disorder before they have it, measure variables ahead of time and track the person to see who develops the disorder. Problem – can't know how many will develop the disorder – small sample size.

GRADING RUBRIC: 10 points, 5 points each.

Diff: 2 Type: ES Page Ref: 25-26
Topic:
Skill:
Objective:

249) What is an observational research design and how can such an approach further our understanding of abnormal behavior. What limitations are there of such designs and how can these be overcome?

Answer: When an observational research design is employed, no manipulation is made and data is merely gathered on the subject or subjects of interest. A group who is at risk for some disorder or one that has a particular disorder may be studied in order to gather information as to the factors that might influence the development of the disorder or the progression of the disorder. Just as a control group is used in an experiment, a control group must be used when conducting observational research. It is important, however, to recognize that no conclusions can be made about cause and effect. Correlational data—observing that two factors are related—does not permit such conclusions to be made as other factors may be the true cause for the observed relationship. For example, if a researcher observes a correlation between obesity and depression, it can't be concluded that depression causes obesity or that obesity causes depression. While either may be true, it cannot be determined that from such data. In addition to these obvious causal connections, there could be additional factors that are causing both problems. Thus, while observational research designs provide information as to how things are related, no conclusions can be made as to cause and effect.

GRADING RUBRIC: 10 points total, 2 points for explaining observational research design, 2 points for how it can be used, 3 points for limitations, 3 points for how limitations can be overcome.

Diff: 2 Type: ES Page Ref: 25-26
Topic:
Skill:
Objective:

250) Describe the ABAB research design and give an example.

Answer: A type of single case research design. A way of using case study to develop and test therapy techniques within a scientific framework. The same subject is studied over time. Phase A - collect information about the subject but don't intervene. Phase B - intervention. Repeating the phases tells whether it is what was done in the B phase that produced any changes. Many possible examples.

GRADING RUBRIC: 10 points - 5 for description, 5 for example.

Diff: 3 Type: ES Page Ref: 26-28
Topic:
Skill:
Objective:

Answers

- 1) C
- 2) A
- 3) B
- 4) B
- 5) A
- 6) D
- 7) A
- 8) A
- 9) C
- 10) D
- 11) D
- 12) B
- 13) A
- 14) D
- 15) A
- 16) B
- 17) B
- 18) C
- 19) C
- 20) C
- 21) A
- 22) B
- 23) D
- 24) B
- 25) C
- 26) A
- 27) C
- 28) D
- 29) C

- 30) C
- 31) C
- 32) C
- 33) C
- 34) D
- 35) D
- 36) C
- 37) C
- 38) B
- 39) B
- 40) A
- 41) D
- 42) A
- 43) C
- 44) A
- 45) B
- 46) B
- 47) C
- 48) C
- 49) A
- 50) C
- 51) A
- 52) A
- 53) A
- 54) B
- 55) A
- 56) B
- 57) B
- 58) D
- 59) A

- 60) D
- 61) D
- 62) B
- 63) D
- 64) D
- 65) B
- 66) D
- 67) B
- 68) C
- 69) B
- 70) A
- 71) C
- 72) C
- 73) A
- 74) D
- 75) A
- 76) C
- 77) B
- 78) D
- 79) D
- 80) D
- 81) D
- 82) B
- 83) B
- 84) D
- 85) B
- 86) D
- 87) A
- 88) B
- 89) B

- 90) B
- 91) C
- 92) A
- 93) D
- 94) A
- 95) B
- 96) D
- 97) D
- 98) D
- 99) D
- 100) A
- 101) C
- 102) B
- 103) B
- 104) D
- 105) A
- 106) B
- 107) A
- 108) B
- 109) D
- 110) B
- 111) B
- 112) C
- 113) B
- 114) C
- 115) B
- 116) A
- 117) D
- 118) A
- 119) C

- 120) D
- 121) C
- 122) A
B
- 123)
- 124) B
- 125) A
- 126) D
- 127) B
- 128) C
- 129) D
- 130) B
- 131) A
- 132) A
- 133) C
- 134) D
- 135) B
- 136) D
- 137) C
- 138) B
- 139) D
- 140) C
- 141) D
- 142) D
- 143) B
- 144) A
- 145) B
- 146) C
- 147) B
- 148) C

- 149) A
- 150) C
- 151) D
- 152) D
- 153) D
- 154) D
- 155) C
- 156) A
- 157) B
- 158) B
- 159) C
- 160) D
- 161) A
- 162) B
- 163) C
- 164) A
- 165) B
- 166) C
- 167) C
- 168) C
- 169) B
- 170) C
- 171) FALSE
- 172) TRUE
- 173) TRUE
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- 201) FALSE
- 202) TRUE
- 203) TRUE
- 204) TRUE
- 205) TRUE
- 206) FALSE
- 207) TRUE
- 208) FALSE

- 209) TRUE
- 210) FALSE
- 211) FALSE
- 212) TRUE
- 213) FALSE
- 214) FALSE
- 215) FALSE
- 216) FALSE
- 217) There are no sufficient or necessary conditions. Also, what is abnormal at one point in time may no longer be considered abnormal at another time.
- 218) Allows information to be organized, needed for research, most sciences do it, establishes the range of problems mental health professionals can address.
- 219) Multiple possible answers:
1. There is a loss of information when a classification scheme is applied to behavior, as will happen when any single word is used to convey something as complex as a mental disorder.
 2. In addition, there may be some stigma attached to receiving a psychiatric diagnosis.
 3. Stereotyping may occur, leading to incorrect assumptions about and expectations of an individual who has received a psychiatric diagnosis.
- 220) A culture-specific syndrome is a disorder that occurs most commonly in or exclusively in a specific culture. While many disorders may present themselves differently in different cultures, these are disorders that are unique to a particular culture. Koro, a disorder seen most commonly in young Asian males, is one example. This anxiety disorder is characterized by an extreme fear that a body part is shrinking.
- 221) Epidemiology is the study of the distribution of a health-related problem within a population. An important element of mental health epidemiology is the frequency of mental disorders.
- 222) Prevalence is the number of active cases of a disorder in a given population during a given period of time. Incidence is the number of new cases that occur over a given period of time.
- 223) The presence of two or more disorders in the same person. This is common in serious mental disorders, rarer for mild disorders.
- 224) The most common explanation was possession by a demon or a god.
- 225) Tarantism is a form of "mass madness" characterized by wild dancing. The behavior seen was similar to early orgiastic rites, but came to be viewed as a consequence of having been bitten by a tarantula.
- 226) People who experienced physical possession were mentally ill, those who experienced spiritual possession were witches.
- 227) Bedlam was an asylum in London that became well known for its deplorable conditions and practices. It was typical of many asylums of the sixteenth century that served primarily as storage facilities for the mentally ill.
- 228) Benjamin Rush is credited with encouraging the use of more humane treatment of the mentally ill in the United States. He was the first American to organize a course in Psychiatry, and, although some of his practices may have been less than humane, he is recognized as a transitional figure between the poor treatment of the old era and the humane approaches of the new.
- 229) Moral management was an approach to the care of the mentally ill that emerged in the early part of the period of humanitarian reform. It focused on addressing the patient's social, individual, and occupational needs.

- 230) Between 1841 and 1881 Dorothea Dix brought to light the inhuman treatment the mentally ill usually received and persuaded legislatures to fund the building of many mental hospitals. She is credited with improving conditions in American hospitals, establishing 32 mental hospitals, and fostering the growth of the mental hygiene movement in America.
- 231) It is preferable to treat people in the community and treatment should be deinstitutionalized, although it is not the perfect solution it was once thought to be.
- 232) It was the first scientifically demonstrated connection between a mental illness and brain pathology.
- 233) The first to recognized that certain symptoms occurred regularly together and to begin the classification of mental disorders.
- 234) They made the discovery of the unconscious and argued that processes outside the person's awareness could help determine behavior. They showed that emotional tensions that patients were not aware of could cause hysteria.
- 235) The man who established the first experimental psychology laboratory.
- 236) The role of learning in human behavior.
- 237) Through the use of research, the characteristics of disorders can be studied and our understanding of the etiology of disorders is furthered. In addition, research must be used to determine the effectiveness of treatment.
- 238) An in-depth, detailed account of a single case. They are good sources of research ideas and hypotheses. However, information from them does not generalize. They are uncontrolled and often impressionistic, so any conclusions drawn may be incorrect.
- 239) Can be misleading - sometimes deliberately lie, misinterpret questions or try to present themselves more favorably or less favorably than is true.
- 240) Sampling is the procedure used to select subjects to study. As it is not possible to study all of the population of interest, a subset of the population is selected. The sample studied needs to resemble the larger population on all relevant variables so that findings made when studying the sample can be generalized to the population. In other words, results obtained with a sample should provide accurate information about the larger population.
- 241) Internal – how confident we can be in the results of a study – how free from error it is, is it methodologically sound and able to be used to draw valid conclusions. External –the extent to which we can generalize our findings beyond the study itself.
- "Abnormal" presupposes some norm from which behavior deviates, but there is no definition of "normal" about which people can all agree. Abnormal is also related to behavior that is deemed undesirable by society. Value issues therefore always complicate the objective definition of disorders. What, exactly, comprises distress, disability, or dysfunction is also difficult to define. In addition, definitions of abnormality vary not only with culture, but over time.
- 242) GRADING RUBRIC: 6 point s total, 2 points for each difficulty discussed.
- 243) The DSM is the Diagnostic and Statistical Manual of Mental Disorders. The DSM is published by the American Psychiatric Association and provides information to be used in identifying mental disorders. The DSM does not provide information as to the cause of mental disorders. A mental disorder, according to the DSM, is a psychological problem that is not the result of some culturally accepted response to a live event but that causes one or more of the following: present distress (a painful symptom); disability (impairment in one or more areas of functioning); increased risk of suffering death, pain, or disability; and an important loss of freedom. A mental disorder is not simply deviant or unacceptable behavior and is believed to be the product of some sort of dysfunction within the individual.
GRADING RUBRIC: 8 points total, 2 points for what DSM stands for, 2 points for explaining what it is, 4 points for correct definition of "mental disorder".
- 244) Early writings of the Egyptians, Chinese, Hebrews, and Greeks show they attributed such behavior to possession by a demon or god. This was treated by exorcism. In the Middle Ages, the clergy were largely responsible for treatment because possession was considered causal. In fifteenth and sixteenth century Europe, witchcraft became another related explanation for which torture, burning, and other such methods were used. Recent historical analyses, however, suggest that the mentally ill may not have been taken to be witches, as was often once thought. Even in contemporary culture, one can find those who believe that supernatural forces cause psychological problems. Exorcisms are still occasionally practiced.
GRADING RUBRIC: 10 points total, 5 points each for a discussion of the use of supernatural explanations during 2 different time periods.

245) Moral management was a broad treatment that included a patient's social, individual and occupational needs. The moral and spiritual development of patients was a focus. More emphasis was placed on a patient's character than on their disorder. Typical treatments were spiritual discussion and manual labor. It was surprisingly effective. It was abandoned because of changing attitudes toward the mentally ill and the increasing size of hospitals. The mental hygiene movement and advances in biomedical science also contributed to its decrease in popularity. The focus on physical and biological explanations and care meant that other factors in a patient's life were considered irrelevant.

GRADING RUBRIC: 10 points total, 5 for each part of the question.

246) While Hippocrates and others had long proposed that mental disorders had some physical cause, it was not until the 1800's that a clear link between a physical disease process and mental illness was established. This finding then paved the way for further exploration of how brain malfunctions could result in mental illness. General paresis was an illness that produced paralysis, insanity, and, typically, death within two to five years. This mental illness was recognized as a specific type of mental disorder in 1825. Thus, it was recognized as a unique disorder and attempts could then be made to treat it. It was eventually recognized that this illness was caused by syphilis. This is the first documented link between an identifiable brain infection and mental illness. With this finding, and the rising influence of modern experimental science, the investigation of brain pathology as the cause of mental illness began in earnest.

GRADING RUBRIC: 8 points total, 4 for the historical events leading up to the categorization of general paresis as a type of mental disorder, 4 for a discussion of syphilis as a cause of the disease and a brain infection producing a mental illness.

247) The Nancy School, named for the town of Nancy in France, refers to a group of physicians who believed that hysteria was a form of self-hypnosis. In other words, they believed that hysteria had a psychological cause. They came to this conclusion as it was observed that the symptoms of hysteria could be both produced and removed by means of hypnosis. Charcot, a neurologist, had not been able to replicate the findings of the Nancy School and argued that degenerative brain changes led to hysteria. The dispute between Charcot and the Nancy School was a debate about what the nature of the cause of hysteria was, biological or psychological. In the end, the view of the Nancy School was accepted. This is said to represent the first recognition of a psychologically caused mental disorder.

GRADING RUBRIC: 10 points total, 4 points for stating the dispute, 2 points for explaining why it developed, 4 points for explaining its significance.

248) Retrospective - study people with a disorder by collecting information about their lives before they became sick. Problem is faulty and selective memory, bias on the part of the person and the researcher. Prospective - find people with high risk of developing a disorder before they have it, measure variables ahead of time and track the person to see who develops the disorder. Problem - can't know how many will develop the disorder - small sample size.

GRADING RUBRIC: 10 points, 5 points each.

249) When an observational research design is employed, no manipulation is made and data is merely gathered on the subject or subjects of interest. A group who is at risk for some disorder or one that has a particular disorder may be studied in order to gather information as to the factors that might influence the development of the disorder or the progression of the disorder. Just as a control group is used in an experiment, a control group must be used when conducting observational research. It is important, however, to recognize that no conclusions can be made about cause and effect. Correlational data, observing that two factors are related, does not permit such conclusions to be made as other factors may be the true cause for the observed relationship. For example, if a researcher observes a correlation between obesity and depression, it can't be concluded that depression causes obesity or that obesity causes depression. While either may be true, it can not be determined that from such data. In addition to these obvious causal connections, there could be additional factors that are causing both problems. Thus, while observational research designs provide information as to how things are related, no conclusions can be made as to cause and effect.

GRADING RUBRIC: 10 points total, 2 points for explaining observational research design, 2 points for how it can be used, 3 points for limitations, 3 points for how limitations can be overcome.

250) A type of single case research design. A way of using case study to develop and test therapy techniques within a scientific framework. The same subject is studied over time. Phase A - collect information about the subject but don't intervene. Phase B - intervention. Repeating the phases tells whether it is what was done in the B phase that produced any changes. Many possible examples.

GRADING RUBRIC: 10 points - 5 for description, 5 for example.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Understanding the causes of mental disorders is important because 1) _____
- A) classification of disorders can not be done without such information.
 - B) effective treatment is not possible without such an understanding.
 - C) disagreements about the the causes of psychopathology have long limited the advancements made in the study of abnormal psychology.
 - D) such knowledge might make both the prevention and cure of mental disorders possible.

Answer: D

Diff: 2 Type: MC Page Ref: 33
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Conceptual
Objective:

- 2) Dr. Fox studies the causes of depression. In other words, she looks at factors that play a role in the _____ of depression. 2) _____
- A) epidemiology
 - B) resiliency
 - C) etiology
 - D) prevalence

Answer: C

Diff: 1 Type: MC Page Ref: 33
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Factual
Objective:

- 3) Etiology is 3) _____
- A) a condition that makes it less likely a person will experience the negative consequences of stress.
 - B) the causal pattern of a disorder.
 - C) a condition that tends to maintain maladaptive behavior.
 - D) a predisposition towards developing a disorder.

Answer: B

Diff: 1 Type: MC Page Ref: 33
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Factual
Objective:

- 4) In order to develop chicken pox, one must be exposed to the virus that causes chicken pox. Note, however, that not everyone who is exposed to the virus is affected. In other words, the virus is a _____ 4) _____
- A) risk factor.
 - B) contributory cause.
 - C) sufficient cause.
 - D) necessary cause.

Answer: D

Diff: 3 Type: MC Page Ref: 33
Topic: Causal Factors and Viewpoints in Abnormal Psychology
Skill: Applied
Objective:

- 5) While having a gene for Parkinson's Disease guarantees that Parkinson's Disease will develop, this is not the only factor that can lead to Parkinson's disease. In other words, the presence of the gene is a _____, but not a _____. 5) _____
- A) contributory cause; sufficient cause.
 - B) sufficient cause; necessary cause.
 - C) risk factor; sufficient cause.
 - D) necessary cause; risk factor.

Answer: B

Diff: 3 Type: MC Page Ref: 33
Topic: Causal Factors and Viewpoints in Abnormal Psychology
Skill: Applied
Objective:

- 6) If having a gene for Parkinson's Disease guarantees that Parkinson's Disease will develop, the presence of the gene can be described as a _____ 6) _____
- A) sufficient cause. B) necessary cause.
C) contributory cause. D) risk factor.

Answer: A

Diff: 2 Type: MC Page Ref: 33
Topic: Causal Factors and Viewpoints in Abnormal Psychology
Skill: Applied
Objective:

- 7) Suppose that the presence of a particular gene is a necessary cause for the occurrence of schizophrenia. Which of the following statements is TRUE? 7) _____
- A) There are other things besides this gene that can cause schizophrenia.
B) The gene is also a sufficient cause for the occurrence of schizophrenia.
C) A person with that gene may or may not become schizophrenic.
D) Most people with schizophrenia will have that gene.

Answer: C

Diff: 3 Type: MC Page Ref: 33
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Conceptual
Objective:

- 8) Suppose that the presence of a particular gene is a sufficient cause for the occurrence of schizophrenia. Which of the following statements is TRUE? 8) _____
- A) All people with schizophrenia will have that gene.
B) The gene is also a necessary cause for the occurrence of schizophrenia.
C) There are other things besides this gene that can cause schizophrenia.
D) A person with that gene may or may not become schizophrenic.

Answer: C

Diff: 2 Type: MC Page Ref: 33
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Conceptual
Objective:

- 9) One prominent theory of the origin of depression hypothesizes that, if one becomes hopeless about his or her future, then he or she will become depressed. Thus, in this theory, hopelessness may be said to be a _____ cause of depression. 9) _____
- A) distal B) sufficient C) necessary D) contributory

Answer: B

Diff: 1 Type: MC Page Ref: 33
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Factual
Objective:

- 10) A factor that increases the probability of a disorder but neither guarantees that the disorder will develop, nor is necessary for the disorder to occur, is a _____ 10) _____
- A) necessary cause. B) etiological anomaly.
C) sufficient cause. D) contributory cause.

Answer: D

Diff: 1 Type: MC Page Ref: 33
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Factual
Objective:

- 11) While not all people who develop lung cancer are smokers, the likelihood of developing lung cancer is increased in those who smoke. In other words, with respect to cancer, smoking can be described as a _____ 11) _____
- A) contributory cause. B) etiological anomaly.
C) sufficient cause. D) necessary cause.

Answer: A

Diff: 2 Type: MC Page Ref: 33
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Applied
Objective:

- 12) Causal factors that occur early in life are considered _____ causes. 12) _____
A) sufficient B) contributory C) distal D) proximal

Answer: C

Diff: 1 Type: MC Page Ref: 34
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Factual
Objective:

- 13) Often a mental illness develops shortly after some traumatic event has happened in one's life. The event that seems to have caused the illness can be described as a 13) _____
A) sufficient cause. B) necessary cause.
C) distal causal factor. D) proximal causal factor.

Answer: D

Diff: 1 Type: MC Page Ref: 34
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Factual
Objective:

- 14) A diathesis can best be described as a 14) _____
A) sufficient cause. B) proximal causal factor.
C) necessary cause. D) contributory cause.

Answer: D

Diff: 3 Type: MC Page Ref: 34
Topic: Causes and Risk Factors/Diathesis-Stress Models
Skill: Conceptual
Objective:

- 15) A predisposition towards developing a disorder 15) _____
A) increases the likelihood of developing any given disorder by 50%.
B) necessarily is biological.
C) necessarily is a psycho-social stressor.
D) is called a diathesis.

Answer: D

Diff: 2 Type: MC Page Ref: 34
Topic: Causes and Risk Factors/Diathesis-Stress Models
Skill: Factual
Objective:

- 16) In the diathesis-stress model, a stressor is 16) _____
A) a distal, sufficient cause of a mental disorder.
B) a necessary or contributory cause that is distal from the onset of symptoms.
C) a biological vulnerability.
D) a necessary or contributory cause that is proximal to the onset of symptoms.

Answer: D

Diff: 2 Type: MC Page Ref: 34
Topic: Causes and Risk Factors/Diathesis-Stress Models
Skill: Factual
Objective:

- 17) In the diathesis-stress model, a diathesis is 17) _____
A) a biological vulnerability that virtually guarantees the development of the disorder.
B) a sufficient cause that is distal from the onset of symptoms.
C) a necessary or contributory cause that is proximal to the onset of symptoms.
D) a distal necessary or contributory cause of a mental disorder.

Answer: D

Diff: 2 Type: MC Page Ref: 34
Topic: Causes and Risk Factors/Diathesis-Stress Models
Skill: Factual
Objective:

- 18) Suppose that low self-esteem is a diathesis for developing depression later in life. This means that 18) _____
A) low self-esteem is a proximal trigger for depression.
B) people with low self-esteem have a predisposition for developing depression.
C) people who currently are depressed will have low self-esteem.
D) the psychological processes associated with low self-esteem are the trigger for depression.

Answer: B

Diff: 2 Type: MC Page Ref: 34
Topic: Causes and Risk Factors/Diathesis-Stress Models
Skill: Conceptual
Objective:

- 19) The loss of a parent may be 19) _____
A) a diathesis and/or a stressor. B) a diathesis.
C) a stressor. D) Neither a diathesis nor a stressor.

Answer: A

Diff: 1 Type: MC Page Ref: 34
Topic: Causes and Risk Factors/Diathesis-Stress Models
Skill: Factual
Objective:

- 20) Ryan, age 8, was cut from the school soccer team. After the initial disappointment, he became a boy scout, 20) _____
which he really enjoyed. Now as an adult, when he didn't get into graduate school, rather than become
depressed, Ryan found a job in his field that he enjoys, and plans to try again later. This is an example of
A) a necessary and sufficient cause.
B) the steeling or inoculation effect of some stressful experiences.
C) the diathesis - stress theory.
D) the interactive model of the diathesis - stress theory.

Answer: B

Diff: 2 Type: MC Page Ref: 34
Topic: Causes and Risk Factors/Diathesis-Stress Models
Skill: Applied
Objective:

- 21) A protective factor is 21) _____
A) a distal causal factor for a mental disorder.
B) a biological make-up that makes people more resistant to stress.
C) an influence that modifies a persons response to genetic problems.
D) an influence that modifies a persons response to environmental stressors.

Answer: D

Diff: 2 Type: MC Page Ref: 34-35
Topic: Causes and Risk Factors/Diathesis-Stress Models
Skill: Factual
Objective:

- 22) According to the text, which of the following has not been identified as a potential protective factor? 22) _____
A) high intelligence B) an outgoing personality
C) a warm and supportive parent D) exposure to moderate stressors

Answer: B

Diff: 1 Type: MC Page Ref: 34-35
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Applied
Objective:

- 23) When psychologists say that a person shows resilience it means 23) _____
- A) that regardless of the stresses the person faces, they will feel no emotional distress.
 - B) the person has not been faced with significant stressors.
 - C) the person can successfully adapt and survive in threatening circumstances.
 - D) recovering from traumatic events without the need for psychological protective factors.

Answer: C

Diff: 1 Type: MC Page Ref: 35
Topic: Causes and Risk Factors for Abnormal Behavior
Skill: Conceptual
Objective:

- 24) What is the focus of the field of developmental psychopathology? 24) _____
- A) To discover and improve the environmental factors that can contribute to a child later developing a mental illness.
 - B) To understand what is within the range of normal development so as to have a better understanding of what is abnormal.
 - C) Understanding how critical incidents in childhood affect people as adults.
 - D) Understanding how disorders develop over time.

Answer: B

Diff: 2 Type: MC Page Ref: 35
Topic: Models or Viewpoints for Understanding Abnormal Behavior
Skill: Factual
Objective:

- 25) Which of the following most accurately describes the notion of different viewpoints of abnormal behavior? 25) _____
- A) Each viewpoint accurately describes the causes and symptoms of 2-3 different disorders.
 - B) All viewpoints are equally valid.
 - C) Only the biological viewpoint has been studied experimentally.
 - D) Each viewpoint offers its own explanation of abnormal behavior.

Answer: D

Diff: 1 Type: MC Page Ref: 35-36
Topic: Models or Viewpoints for Understanding Abnormal Behavior
Skill: Factual
Objective:

- 26) Dr. Simon, a psychiatrist, takes a biopsychosocial viewpoint of psychopathology. Which of the following treatments is he most likely to suggest for Julia's current state of depression? 26) _____
- A) a prolonged vacation
 - B) family therapy and a change in her work environment
 - C) intense psychotherapy
 - D) a combination of psychological therapy and antidepressant drugs

Answer: D

Diff: 2 Type: MC Page Ref: 36
Topic: Models or Viewpoints for Understanding Abnormal Behavior
Skill: Applied
Objective:

- 27) The disorders first recognized as having biological bases are best characterized as disorders that 27) _____
- A) involved significant damage to brain tissue.
 - B) did not cause neurological damage.
 - C) resulted from contact with other animal species.
 - D) were characterized by neurochemical imbalances.

Answer: A

Diff: 1 Type: MC Page Ref: 36

Topic: Biological Viewpoints

Skill: Factual

Objective:

- 28) Which of the following is true? 28) _____
- A) Most mental disorders are caused by psychological factors.
 - B) Most mental disorders are caused by neurological damage.
 - C) Most mental disorders have a simple biological explanation.
 - D) Most mental disorders are not caused by neurological damage.

Answer: D

Diff: 2 Type: MC Page Ref: 36

Topic: Biological Viewpoints

Skill: Factual

Objective:

- 29) The site of communication between two neurons is the 29) _____
- A) synapse.
 - B) nucleus.
 - C) neurotransmitter.
 - D) vesicle.

Answer: A

Diff: 1 Type: MC Page Ref: 37

Topic: Biological Causal Factors/Neurotransmitter and Hormonal

Skill: Factual

Objective:

- 30) Which statement about neural communication is accurate? 30) _____
- A) All neurotransmitters increase the likelihood that the postsynaptic neuron will transmit a message.
 - B) The reason neural messages are transmitted from cell to cell is because they physically touch each other.
 - C) Neurotransmitters released into the synapse determine whether messages are sent from one neuron to another.
 - D) The part of the neuron that receives messages is called the synapse.

Answer: C

Diff: 1 Type: MC Page Ref: 37

Topic: Biological Causal Factors/Neurotransmitter and Hormonal

Skill: Factual

Objective:

- 31) Normally, the enzyme monoamine oxidase is involved in the breaking down of some neurotransmitters. This process is called 31) _____
- A) inhibitory transmission.
 - B) recapture.
 - C) deactivation.
 - D) re-uptake.

Answer: C

Diff: 2 Type: MC Page Ref: 37

Topic: Biological Causal Factors/Neurotransmitter and Hormonal

Skill: Factual

Objective:

- 32) Suppose the re-uptake of a specific neurotransmitter were deficient and the deactivation enzymes associated with the neurotransmitter were also deficient. What effect would this have? 32) _____
- A) There would be more of the neurotransmitter in the synapse.
 - B) There would be less of the neurotransmitter in the synapse.
 - C) The neurons would become especially sensitive to the neurotransmitter.
 - D) Since the two deficiencies would balance each other out, there would be no change in the levels of the neurotransmitter.

Answer: A

Diff: 2 Type: MC

Page Ref: 37

Topic: Biological Causal Factors/Neurotransmitter and Hormonal

Skill: Conceptual

Objective:

33) Reuptake of neurotransmitters is

33) _____

- A) the process by which neurotransmitters are repeatedly released into the synapse.
- B) the process by which neurotransmitters stimulate the post-synaptic neuron to fire.
- C) the process by which neurotransmitters are reabsorbed by the axon.
- D) the process by which neurotransmitters are connected to hormones.

Answer: C

Diff: 2 Type: MC

Page Ref: 37

Topic: Biological Causal Factors/Neurotransmitter and Hormonal

Skill: Conceptual

Objective:

34) Norepinephrine, dopamine, serotonin, and GABA are all

34) _____

- A) forms of neurotransmitters called amino acids that can cause brain damage.
- B) hormones that affect behavior.
- C) catecholamines that inhibit nerve impulses.
- D) neurotransmitters that are involved in psychopathology.

Answer: D

Diff: 1 Type: MC

Page Ref: 37

Topic: Biological Causal Factors/Neurotransmitter and Hormonal

Skill: Factual

Objective:

35) Damage to the pituitary would most likely lead to

35) _____

- A) depression.
- B) death.
- C) a hormonal imbalance.
- D) a deficiency of catecholamines.

Answer: C

Diff: 1 Type: MC

Page Ref: 37

Topic: Biological Causal Factors/Neurotransmitter and Hormonal

Skill: Factual

Objective:

36) Cortisol is a hormone that

36) _____

- A) the adrenal gland produces that mobilizes the body to deal with stress.
- B) the pituitary gland releases to stimulate the adrenal gland.
- C) reduces the reuptake of the monamine neurotransmitters.
- D) is released by the hypothalamus and travels to the pituitary gland, causing it to respond.

Answer: A

Diff: 2 Type: MC

Page Ref: 39

Topic: Biological Causal Factors/Neurotransmitter and Hormonal

Skill: Factual

Objective:

37) Which of the following statements is true?

37) _____

- A) Genes do not affect biochemical processes.
- B) The genes that will be expressed in an individual are not affected by experience.
- C) Genes play a role in most mental disorders.
- D) Most behavioral disorders are determined exclusively by genes.

Answer: C

Diff: 2 Type: MC

Page Ref: 39

Topic: Biological Causal Factors/Genetic Vulnerabilities

Skill: Factual

Objective:

- 38) What do genes consist of? 38) _____
A) trisomes B) proteins C) DNA D) chromosomes
Answer: C
Diff: 1 Type: MC Page Ref: 39
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Factual
Objective:
- 39) When examining heredity, mental disorders are almost always 39) _____
A) caused by recessive genes. B) caused by one particular gene.
C) caused by multiple genes. D) not caused by genes.
Answer: C
Diff: 1 Type: MC Page Ref: 39
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Factual
Objective:
- 40) Mental disorders are almost always influenced by multiple genes. This means they are 40) _____
A) chemical circuits. B) polygenic.
C) easy to discover. D) probands.
Answer: B
Diff: 2 Type: MC Page Ref: 39
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Factual
Objective:
- 41) The genetic influences that determine behavior may never be fully understood due to 41) _____
A) the inability of research to differentiate between the effects of the environment and the effects of genes.
B) our limited understanding of how genes impact brain chemistry.
C) the tendency to rely upon twin studies in genetic research.
D) the likelihood that most behaviors are determined by the interaction of many genes.
Answer: D
Diff: 2 Type: MC Page Ref: 39
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Factual
Objective:
- 42) Children born with a genetic predisposition to be introverted 42) _____
A) are also predisposed to develop many psychological disorders.
B) developed this genetic predisposition because of genetic mutations occurring after birth.
C) can become truly extraverted if they are encouraged to do so.
D) are likely to be more or less introverted depending on childhood experiences growing up.
Answer: D
Diff: 3 Type: MC Page Ref: 40
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Conceptual
Objective:
- 43) Genes 43) _____
A) determine how a person will behave.
B) determine the range of characteristics a person has.
C) cause people to develop mental disorders.
D) determine what characteristics a person will have.
Answer: B
Diff: 1 Type: MC Page Ref: 40
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Factual
Objective:

- 44) Ian was predisposed to being very aggressive with his peers in school, who responded by rejecting him. Later in life Ian began to associate with other aggressive youth and to participate in a variety of delinquent behaviors. This is an example of _____
- A) the way the genotype may shape the phenotype.
 B) a phenotypic diathesis.
 C) polygenic expression.
 D) phenotypic vulnerability to aggression.
- Answer: A
 Diff: 3 Type: MC Page Ref: 40
 Topic: Biological Causal Factors/Genetic Vulnerabilities
 Skill: Applied
 Objective:
- 45) Attractive children and unattractive babies tend to be treated differently. In other words, an infant's physical phenotype may alter how others respond to him or her. What type of genotype-environment correlation is this an example of? _____
- A) evocative B) persuasive C) passive D) active
- Answer: A
 Diff: 2 Type: MC Page Ref: 40
 Topic: Biological Causal Factors/Genetic Vulnerabilities
 Skill: Applied
 Objective:
- 46) Andrea and her parents are shy and quiet. Her parents never take Andrea to any activities where there are many people. They buy her books and crafts that she can do by herself. This shows _____
- A) an evocative effect of genotype on environment.
 B) an active effect of genotype on environment.
 C) a lack of genotype-environment correlation.
 D) a passive effect of genotype on environment.
- Answer: A
 Diff: 2 Type: MC Page Ref: 40
 Topic: Biological Causal Factors/Genetic Vulnerabilities
 Skill: Applied
 Objective:
- 47) Highly coordinated children are picked out at an early age by coaches and given special opportunities to excel at sports. Extraverted children seek out social situations and become unusually comfortable with strangers. Both of these phenomena illustrate _____
- A) how the environment shapes one's genetic endowment.
 B) genotype-environment correlations.
 C) the polygenic effect of chromosomes on behavior.
 D) the power of the phenotype over the genotype.
- Answer: B
 Diff: 2 Type: MC Page Ref: 40
 Topic: Biological Causal Factors/Genetic Vulnerabilities
 Skill: Factual
 Objective:
- 48) Which method for studying genetic influences fails to control for the possible effect of sharing a common environment? _____
- A) association studies B) linkage analysis
 C) pedigree method D) adoption method
- Answer: C
 Diff: 1 Type: MC Page Ref: 40
 Topic: Biological Causal Factors/Genetic Vulnerabilities
 Skill: Factual
 Objective:

- 49) If trait is highly heritable, it would be expected that 49) _____
- A) the concordance rate for dizygotic twins would be greater than the concordance rate for monozygotic twins.
 - B) the concordance rate for dizygotic twins would be close to 100%.
 - C) the concordance rate for dizygotic twins and monozygotic twins would be comparable.
 - D) the concordance rate for monozygotic twins would be greater than the concordance rate for dizygotic twins.

Answer: D

Diff: 1 Type: MC Page Ref: 41
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Applied
Objective:

- 50) If fraternal twins are more likely to be concordant for a trait than other siblings, can it be concluded that the higher concordance rate is due to the greater degree of genetic relatedness? 50) _____
- A) Yes.
 - B) Yes, but only if the siblings studied are of the same sex and age.
 - C) No, because fraternal twins are no more genetically alike than other siblings.
 - D) No, because the greater similarity can be attributed to environmental influence.

Answer: C

Diff: 2 Type: MC Page Ref: 41
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Factual
Objective:

- 51) Which of the following is NOT a common method for studying genetic influences? 51) _____
- A) the study of specific gene defects
 - B) twin studies
 - C) family history (pedigree) studies
 - D) adoption studies

Answer: A

Diff: 1 Type: MC Page Ref: 41
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Factual
Objective:

- 52) George and Logan are brothers. They live in a small apartment in the city with some other relatives. Their family is extremely poor. Their father is hardest on George, the eldest, and sometimes physically abuses him. Which environmental factor is likely to be more important in the later adjustment of George and Logan? 52) _____
- A) Their poverty.
 - B) The physical abuse.
 - C) The fact that they live with other family members.
 - D) The overcrowding of their living situation.

Answer: B

Diff: 3 Type: MC Page Ref: 41
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Applied
Objective:

- 53) Which of the following is an example of a nonshared environmental influence? 53) _____
- A) death of a parent
 - B) family economic status
 - C) sibling rivalry
 - D) divorce

Answer: C

Diff: 1 Type: MC Page Ref: 41
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Applied
Objective:

- 54) Todd and his siblings have parents who are physically abusive to each other. When they fight, they expect Todd to stay quiet and keep the other children under control. They allow the other children to cry and hide, but Todd must stay in the room with them and referee. This is an example of _____
- A) a genotype-environment correlation. B) a protective factor.
C) a shared environmental influence. D) a nonshared environmental influence.

Answer: D

Diff: 2 Type: MC Page Ref: 41

Topic: Biological Causal Factors/Genetic Vulnerabilities

Skill: Applied

Objective:

- 55) Which of the following is NOT a misconception about genetic influence on behavior?
- A) If a disorder has a strong genetic influence, environmental factors are unimportant.
B) Many genetic effects on psychological characteristics increase with age.
C) Disorders that run in families are genetically based.
D) Genetic research strategies are of no use for studying environmental influences.

Answer: B

Diff: 2 Type: MC Page Ref: 44

Topic: Developments in Thinking/Nature, Nurture and Psychopathology

Skill: Conceptual

Objective:

- 56) Which of the following strives to describe the location of genes responsible for mental disorders? _____
- A) association studies B) twin studies
C) family histories D) adoption studies

Answer: A

Diff: 1 Type: MC Page Ref: 42

Topic: Biological Causal Factors/Genetic Vulnerabilities

Skill: Factual

Objective:

- 57) Suppose that, using linkage analysis, a researcher finds that family members with a high likelihood of developing depression also are very likely to be of below average height. This would mean _____
- A) having depression causes people not to grow as tall as they would if they didn't have depression.
B) the gene for depression is probably located near the gene for height.
C) being short is a contributory factor for depression.
D) height and depression are probably caused by the same gene.

Answer: B

Diff: 2 Type: MC Page Ref: 42

Topic: Biological Causal Factors/Genetic Vulnerabilities

Skill: Applied

Objective:

- 58) Tracy and Shahid are both 3 months old. Tracy is highly active, easily irritated, and cries easily. Shahid is quiet, adapts easily to change, and seems fearless. These differences illustrate _____
- A) the fact that personality is more influenced by the environment than by genetics.
B) how physical handicaps can have a genetic origin.
C) the impact of shared environmental influences.
D) differences in temperament.

Answer: D

Diff: 2 Type: MC Page Ref: 42

Topic: Biological Causal Factors/Constitutional Liabilities

Skill: Conceptual

Objective:

- 59) An child consistently identified as behaviorally inhibited is most likely to _____
A) be diagnosed with an anxiety disorder in adulthood.
B) be an outgoing adult.
C) have been born prematurely.
D) develop conduct disorder.

Answer: A

Diff: 1 Type: MC Page Ref: 43
Topic: Biological Causal Factors/Genetic Vulnerabilities
Skill: Factual
Objective:

- 60) Which of the following statements about brain dysfunction and psychiatric disorders is FALSE? _____
A) Identifiable brain damage is often the cause of psychiatric disorders.
B) Changes in brain function appear to play a role in many psychiatric disorders.
C) Brain development can be altered by experience, potentially leading to changes in the brain that increase the risk of developing a psychiatric condition.
D) Brain damage may increase the risk of developing a psychiatric condition.

Answer: A

Diff: 2 Type: MC Page Ref: 43
Topic: Biological Causal Factors/Brain Dysfunction
Skill: Conceptual
Objective:

- 61) Neural plasticity is _____
A) the process by which neurotransmitters are broken down in the brain.
B) strong evidence of brain damage, leading to the development of a mental disorder.
C) the flexibility of the brain existing neural circuits can change or new ones can be made.
D) the best indicator of temperament and its effect on the personality development of a child.

Answer: C

Diff: 2 Type: MC Page Ref: 43
Topic: Biological Causal Factors/Brain Dysfunction
Skill: Factual
Objective:

- 62) Biological discoveries _____
A) have lessened the subjectivity of definitions of abnormal.
B) have lead to a recognition of the role that genetic factors and other biological influences play in the development of many disorders.
C) make it clear that mental disorders are diseases and should be dealt with by the medical profession.
D) demonstrate that the environment plays only a minimal role in the development of psychopathology.

Answer: B

Diff: 2 Type: MC Page Ref: 44
Topic: Biological Causal Factors/The Impact of the Biological
Skill: Conceptual
Objective:

- 63) What do the three psychosocial viewpoints addressed in this chapter all have in common? _____
A) All focus on changing disordered thinking processes as a means of treating psychological conditions.
B) Each recognizes the role of biological factors in the the development of mental illness, but views the role of such factors differently.
C) All view people as basically good.
D) All emphasize the impact of early experiences.

Answer: D

Diff: 1 Type: MC Page Ref: 44
Topic: Psychosocial Viewpoints
Skill: Factual
Objective:

- 64) Which of the following elements of the personality can be described as impulsive and selfish? 64) _____
A) id B) ego C) ideal self D) superego
Answer: A
Diff: 1 Type: MC Page Ref: 46
Topic: Psychosocial Viewpoints/The Psychodynamic Perspectives
Skill: Applied
Objective:
- 65) Freud's view of mental disorders was that they were a result of 65) _____
A) problematic tendencies we develop while dealing with our early interpersonal environments.
B) genetic abnormalities that influence people's ability to cope with their environment.
C) learned maladaptive behaviors that were rewarded with attention.
D) unresolved conflicts between the id, the ego and the superego.
Answer: D
Diff: 1 Type: MC Page Ref: 46
Topic: Psychosocial Viewpoints/The Psychodynamic Perspectives
Skill: Factual
Objective:
- 66) Which of the following did Freud believed played a causal role in the development of most forms of psychopathology? 66) _____
A) unresolved conflicts between the ego and the superego
B) anxiety
C) fixation in the oral stage
D) depression
Answer: B
Diff: 1 Type: MC Page Ref: 46
Topic: Psychosocial Viewpoints/The Psychodynamic Perspectives
Skill: Factual
Objective:
- 67) Defense mechanisms 67) _____
A) make a person feel more anxious and have more problems, because they begin to act defensively.
B) are strategies the id uses to try to achieve what it desires.
C) help a person feel less anxious, but because they usually work by distorting reality, they are not always adaptive.
D) are conscious, intentional attempts to cope in an effective way with an anxiety provoking event.
Answer: C
Diff: 2 Type: MC Page Ref: 46
Topic: Psychosocial Viewpoints/The Psychodynamic Perspectives
Skill: Applied
Objective:
- 68) After cheating on her husband, Julia accused her husband of cheating on her. Such behavior is explained by which of the following defense mechanism? 68) _____
A) rationalization B) projection C) sublimation D) displacement
Answer: B
Diff: 2 Type: MC Page Ref: 47
Topic: Psychosocial Viewpoints/The Psychodynamic Perspectives
Skill: Applied
Objective:
- 69) Newer psychodynamic perspectives 69) _____
A) disregard most elements of Freud's theories.
B) emphasize the role of the id.
C) recognize intrapsychic conflicts as a primary determinant of behavior.
D) do not view the libido as a primary determinant of behavior.

Answer: D

Diff: 1 Type: MC Page Ref: 48
Topic: Psychosocial Viewpoints/The Psychodynamic Perspectives
Skill: Factual
Objective:

- 70) The interpersonal perspective 70) _____
- A) emphasizes social rather than inner determinants of behavior.
 - B) was introduced by Erik Erikson.
 - C) is the most influential humanistic perspective today.
 - D) arose as a reaction against the unscientific methods of psychoanalysis.

Answer: A

Diff: 1 Type: MC Page Ref: 49
Topic: Psychosocial Viewpoints/The Psychodynamic Perspectives
Skill: Factual
Objective:

- 71) One of Freud's major contribution to current perspectives of mental disorders is 71) _____
- A) the concept of the Oedipal complex.
 - B) the concept of the Electra complex.
 - C) the concept of the unconscious and how it can affect behavior.
 - D) the understanding of the three structures of personality.

Answer: C

Diff: 2 Type: MC Page Ref: 50
Topic: Psychosocial Viewpoints/The Psychodynamic Perspectives
Skill: Factual
Objective:

- 72) Which of the following is a criticism of traditional psychoanalytic theory? 72) _____
- A) underemphasis on the sex drive
 - B) lack of scientific evidence
 - C) overly positive view of women
 - D) too much focus on symptoms and not enough on underlying causes

Answer: B

Diff: 1 Type: MC Page Ref: 50
Topic: Psychosocial Viewpoints/The Psychodynamic Perspectives
Skill: Factual
Objective:

- 73) Which psychosocial perspective was initially developed through laboratory research? 73) _____
- A) behavioral
 - B) humanistic
 - C) psychodynamic
 - D) biological

Answer: A

Diff: 1 Type: MC Page Ref: 51
Topic: Psychosocial Viewpoints/The Behavioral Perspective
Skill: Factual
Objective:

- 74) After being bitten by a dog, Jose finds that he feels afraid whenever he sees a dog. In classical conditioning terms, the dog can be described as a(n) 74) _____
- A) unconditioned response.
 - B) conditioned stimulus.
 - C) conditioned response.
 - D) unconditioned stimulus.

Answer: B

Diff: 2 Type: MC Page Ref: 50
Topic: Psychosocial Viewpoints/The Behavioral Perspective
Skill: Applied
Objective:

- 75) After being bitten by a dog, Jose finds that he feels afraid whenever he sees a dog. He goes for treatment, where he is gradually exposed to dogs, until he can be in the same room with a dog without feeling any fear. Three weeks later, while walking in his neighborhood, Jose hears a dog barking viciously. For a few weeks after this, his fear returns. This shows 75) _____
- A) extinction. B) stimulus-stimulus expectancy.
C) spontaneous recovery. D) the treatment didn't really work.

Answer: C

Diff: 2 Type: MC Page Ref: 51

Topic: Psychosocial Viewpoints/The Behavioral Perspective

Skill: Applied

Objective:

- 76) If a response has been learned through conditioning, it would be appropriate to treat it using the process of 76) _____
- A) stimulus-stimulus expectancy. B) spontaneous recovery.
C) displacement. D) extinction.

Answer: D

Diff: 2 Type: MC Page Ref: 51

Topic: Psychosocial Viewpoints/The Behavioral Perspective

Skill: Applied

Objective:

- 77) Learning not to do something because you are punished when you do it is an example of 77) _____
- A) generalization. B) instrumental conditioning.
C) observational learning. D) classical conditioning.

Answer: B

Diff: 1 Type: MC Page Ref: 51

Topic: Psychosocial Viewpoints/The Behavioral Perspective

Skill: Factual

Objective:

- 78) Alicia developed a fear of spiders after being bitten by one. However, she has no problems catching fireflies. This is an example of 78) _____
- A) generalization. B) instrumental conditioning.
C) intrapsychic conflict. D) discrimination.

Answer: D

Diff: 1 Type: MC Page Ref: 52

Topic: Psychosocial Viewpoints/The Behavioral Perspective

Skill: Applied

Objective:

- 79) Due to _____, we can learn from the experiences of others. 79) _____
- A) generalization B) classical conditioning
C) instrumental conditioning D) observational learning

Answer: D

Diff: 1 Type: MC Page Ref: 52

Topic: Psychosocial Viewpoints/The Behavioral Perspective

Skill: Factual

Objective:

- 80) Behaviorists suggest maladaptive behavior can be a result of 80) _____
- A) extinction. B) a poor response-outcome expectancy.
C) failure to learn adaptive behaviors. D) lack of generalization of behaviors.

Answer: C

Diff: 1 Type: MC Page Ref: 52

Topic: Psychosocial Viewpoints/The Behavioral Perspective

Skill: Factual

Objective:

- 81) The behavioral perspective has been criticized for 81) _____
A) viewing basic human nature as good.
B) not providing an explanation for how abnormal behavioral responses are acquired.
C) its overemphasis on the use of punishment.
D) focusing on symptoms.

Answer: D

Diff: 1 Type: MC Page Ref: 52

Topic: Psychosocial Viewpoints/The Behavioral Perspective

Skill: Factual

Objective:

- 82) From the cognitive-behavioral perspective, an important limitation with the behavioral perspective is the 82) _____
fact that
A) behaviorists held an overly stringent view of what constitutes scientific inquiry.
B) behaviorists failed to attend to the importance of mental processes.
C) behaviorists overemphasized the importance of subjective experience.
D) behaviorists went too far in attacking the psychoanalytic perspective.

Answer: B

Diff: 1 Type: MC Page Ref: 53

Topic: Psychosocial Viewpoints/The Cognitive-Behavioral Perspective

Skill: Conceptual

Objective:

- 83) Cognitive-behavioral psychologists believe that abnormal behavior 83) _____
A) results from neurotic thought processes.
B) results from distorted thinking and information processing.
C) results from impaired patterns of interpersonal relationships.
D) consists of learned maladaptive response patterns.

Answer: B

Diff: 1 Type: MC Page Ref: 53

Topic: Psychosocial Viewpoints/The Cognitive-Behavioral Perspective

Skill: Factual

Objective:

- 84) A(n) _____ serves to guide our processing of information and may serve to distort memories. 84) _____
A) conditioned stimulus
B) schema
C) attribution
D) unconditioned stimulus

Answer: B

Diff: 1 Type: MC Page Ref: 53

Topic: Psychosocial Viewpoints/The Cognitive-Behavioral Perspective

Skill: Factual

Objective:

- 85) Schemas 85) _____
A) are attempts to change other people's behavior.
B) are always types of biases that color our interpretation of the world.
C) do not really influence how we interpret the world.
D) may be a source of psychological vulnerability.

Answer: D

Diff: 2 Type: MC Page Ref: 53

Topic: Psychosocial Causal Factors/Schemas and Self-schemas

Skill: Factual

Objective:

- 86) The process of assigning causes to things that happen is called 86) _____
A) schema therapy.
B) cognition.
C) internal reinforcement.
D) attribution.

Answer: D

Diff: 1 Type: MC Page Ref: 54
Topic: Psychosocial Viewpoints/The Cognitive-Behavioral Perspective
Skill: Factual
Objective:

- 87) It is a hot day and a child sprays you with a garden hose. You might react with amusement (and even thanks!) or considerable anger. The fact that one event can be interpreted in different ways is central to the _____ approach to therapy. 87) _____
- A) sociocultural B) operant conditioning
C) classical conditioning D) cognitive

Answer: D

Diff: 1 Type: MC Page Ref: 54
Topic: Psychosocial Viewpoints/The Cognitive-Behavioral Perspective
Skill: Applied
Objective:

- 88) According to cognitive theorists, a lot of information that contributes to a person's psychopathology 88) _____
- A) is processed at a conscious, intentional level.
B) is not processed at all.
C) is processed at a nonconscious level.
D) is processed only when in interpersonal relationships.

Answer: C

Diff: 2 Type: MC Page Ref: 54
Topic: Psychosocial Viewpoints/The Cognitive-Behavioral Perspective
Skill: Factual
Objective:

- 89) The effects of early social deprivation 89) _____
- A) are explained differently by the various psychosocial perspectives.
B) can't be explained by psychosocial theories.
C) are not seen when physical needs are adequately met.
D) have not been well-established.

Answer: A

Diff: 1 Type: MC Page Ref: 56
Topic: Psychosocial Causal Factors/Early Deprivation or Trauma
Skill: Factual
Objective:

- 90) Sammy was deprived of his mother and father's love as a child. Operant conditioning theorists would believe his childhood would result in _____; cognitive theorists would emphasize the deprivation's effect on _____. 90) _____
- A) a lack of social skills; dysfunctional self-schemas
B) a lack of social skills; brain damage
C) conditioned avoidance responses; conditioned stimuli
D) fixation at the oral stage; a lack of attachment

Answer: A

Diff: 3 Type: MC Page Ref: 56
Topic: Psychosocial Causal Factors/Early Deprivation or Trauma
Skill: Applied
Objective:

- 91) Lasting negative effects of abuse on psychological functioning are most likely when the abuse occurs in 91) _____
- A) old age. B) adolescence.
C) early adulthood. D) early childhood.

Answer: D

Diff: 1 Type: MC Page Ref: 57
Topic: Psychosocial Causal Factors/Early Deprivation or Trauma
Skill: Factual
Objective:

- 92) Abused children 92) _____
 A) are likely to develop close bonds with same-sex peers.
 B) have a tendency to be passive and to avoid conflict with both peers and authorities.
 C) tend to develop into resilient adults.
 D) are likely to show inconsistent attachment behavior.
 Answer: D
 Diff: 1 Type: MC Page Ref: 57-58
 Topic: Psychosocial Causal Factors/Early Deprivation or Trauma
 Skill: Factual
 Objective:
- 93) Infant characteristics 93) _____
 A) can influence the quality of attachment relationships.
 B) are not influenced by biological factors.
 C) do not affect parental behavior.
 D) only affect parental behavior when psychopathology is present.
 Answer: A
 Diff: 2 Type: MC Page Ref: 58
 Topic: Psychosocial Causal Factors/Inadequate Parenting
 Skill: Factual
 Objective:
- 94) Dana's mother suffers from serious depressive episodes. Dana is likely to 94) _____
 A) act in an aggressive, criminal manner.
 B) become a happy-go-lucky child because she had to cope with so much.
 C) be at risk for depression herself.
 D) have intense attachments to her mother.
 Answer: C
 Diff: 1 Type: MC Page Ref: 58
 Topic: Psychosocial Causal Factors/Inadequate Parenting
 Skill: Applied
 Objective:
- 95) Which parental style is characterized by warmth, control, and communication? 95) _____
 A) neglectful-uninvolved B) permissive/indulgent
 C) authoritarian D) authoritative
 Answer: D
 Diff: 1 Type: MC Page Ref: 59
 Topic: Psychosocial Causal Factors/Inadequate Parenting
 Skill: Factual
 Objective:
- 96) The four parenting styles described in the text differ along two dimensions, warmth and control. The style 96) _____
 associated with the most positive developmental outcome is best described as _____ in warmth and
 _____ in control.
 A) low; high B) high; low
 C) high; moderately high D) low; moderately high
 Answer: C
 Diff: 1 Type: MC Page Ref: 59
 Topic: Psychosocial Causal Factors/Inadequate Parenting
 Skill: Factual
 Objective:
- 97) A lack of social skills, poor school performance, and moodiness have all been associated with which of the 97) _____
 following parenting styles?
 A) permissive/indulgent B) authoritative
 C) authoritarian D) neglectful-uninvolved

Answer: D

Diff: 1 Type: MC Page Ref: 59-60
Topic: Psychosocial Causal Factors/Inadequate Parenting
Skill: Factual
Objective:

- 98) Which of the following statements regarding divorce and psychopathology is true? 98) _____
- A) The adverse effects of parental divorce are always temporary.
 - B) There is a positive correlation between psychopathology and divorce.
 - C) While a relationship between parental divorce and psychopathology has been established, there are no data to suggest that divorced persons experience an increased rate of psychopathology.
 - D) A causal relationship has been established between psychopathology and a parental divorce.

Answer: B

Diff: 1 Type: MC Page Ref: 60
Topic: Psychosocial Causal Factors/Marital Discord and Divorce
Skill: Factual
Objective:

- 99) Why is it difficult to determine the nature of the relationship between divorce and the psychological functioning of family members? 99) _____
- A) Cause and effect cannot be determined as preexisting behavioral abnormalities in either the parents or the children may make divorce more likely.
 - B) While the effects of divorce are negative on children, the effects on the spouses are generally positive.
 - C) Due to modern acceptance of divorce, there has been an ongoing decrease in the negative effects of divorce. As the impact of divorce has been decreasing, the effect of divorce on family functioning has become impossible to detect.
 - D) The findings have been too inconsistent for any conclusions to be drawn.

Answer: A

Diff: 2 Type: MC Page Ref: 60-61
Topic: Psychosocial Causal Factors/Marital Discord and Divorce
Skill: Conceptual
Objective:

- 100) A major factor associated with a child's rejection by peers is 100) _____
- A) a lack of empathy.
 - B) being too intelligent.
 - C) socioeconomic background.
 - D) overly aggressive behavior.

Answer: D

Diff: 1 Type: MC Page Ref: 61
Topic: Psychosocial Causal Factors/Maladaptive Peer Relationships
Skill: Factual
Objective:

- 101) An elementary school principal wants to know the best predictors of juvenile delinquency and dropping out of school in high school so she can provide preventive interventions. Your best advice is: 101) _____
- A) "Look for kids who are very popular because they are class clowns."
 - B) "The best predictor is aggression toward peers which leads to peer rejection."
 - C) "There is no way to predict juvenile delinquency as early as elementary school."
 - D) "Silent, depressed, loners tend to be drop-outs because they are often depressed."

Answer: B

Diff: 2 Type: MC Page Ref: 61
Topic: Psychosocial Causal Factors/Maladaptive Peer Relationships
Skill: Applied
Objective:

- 102) Studies on the cultural differences in parental tolerance of under or overcontrolled behavior suggest that 102) _____
- A) parental styles make no difference in rates of different behavior problems□they seem to be independent of culture.
 - B) parental styles make no difference in rates of different behavior problems□they seem to be primarily genetic.
 - C) these different styles can produce different rates of problem behaviors in different cultures.
 - D) all cultures feel the same about bringing their children for treatment, regardless of the type of behavior problem.

Answer: C

Diff: 2 Type: MC Page Ref: 63-64

Topic: Sociocultural Viewpoint

Skill: Applied

Objective:

- 103) A psychologist who studied the relationship between sociocultural factors and mental disorders would be most likely to study 103) _____
- A) peer rejection and attributional style.
 - B) parenting style and self-schemas.
 - C) poverty and racial discrimination.
 - D) assimilation and accommodation.

Answer: C

Diff: 1 Type: MC Page Ref: 64-65

Topic: Sociocultural Viewpoint

Skill: Factual

Objective:

- 104) Which of the following explanations for the relationship between SES and abnormal behavior is supported by the existing data? 104) _____
- A) Low SES may cause abnormal behavior.
 - B) Recovery from loss of a job may be more difficult for those exhibiting signs of mental illness.
 - C) Abnormal behavior is more likely to go untreated in those of low SES.
 - D) All of the above.

Answer: D

Diff: 1 Type: MC Page Ref: 64-65

Topic: Sociocultural Causal Factors

Skill: Factual

Objective:

- 105) Children from lower-SES families 105) _____
- A) show no signs of ill effects if there is an increase in SES before age 5.
 - B) are less likely to show ill effects of SES status if they possess a high IQ and develop healthy attachments to adults and peers.
 - C) are not affected by SES status unless persistent employment is the reason for the economic hardships of the family.
 - D) are more likely to be resilient adults than those from higher-SES families.

Answer: B

Diff: 2 Type: MC Page Ref: 65

Topic: Sociocultural Causal Factors

Skill: Factual

Objective:

- 106) Cross-cultural research on stress demonstrates that 106) _____
- A) culture-specific reactions are not seen to alterations in the environment.
 - B) responses to stress vary cross-culturally.
 - C) depression is a common response to life challenges in all countries studied.
 - D) stress rarely leads to any evidence of illness in non-Western cultures.

Answer: B

Diff: 1 Type: MC Page Ref: 66

Topic: Sociocultural Viewpoint

Skill: Factual

Objective:

- 107) A psychologist who takes an eclectic approach is most likely to make which of the following statements? 107) _____
- A) "The beauty of an eclectic approach is that it requires one to integrate many ideas into one, synthesized viewpoint."
 - B) "I will accept any explanation from psychoanalytic to biological as long as it works."
 - C) "Clinical practice that is not guided by a theoretical rationale is guaranteed to be ineffective."
 - D) "With the pace of discovery in science increasing, it is necessary to have one consistent approach to one's research."

Answer: B

Diff: 1 Type: MC Page Ref: 67

Topic: Theoretical Viewpoints

Skill: Applied

Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 108) Due to the complexity of determining what has caused both normal and abnormal behavior, most investigators speak of risk factors for abnormality instead of causes. 108) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 33

Topic:

Skill:

Objective:

- 109) A sufficient cause is a condition that must exist in order for a condition to develop. 109) _____

Answer: True False

Diff: 2 Type: TF Page Ref: 33

Topic:

Skill:

Objective:

- 110) A distal causal factor is one that occurs at a relatively long time before a disorder develops. 110) _____

Answer: True False

Diff: 2 Type: TF Page Ref: 34

Topic:

Skill:

Objective:

- 111) The model that suggests that people need both a predisposition to develop the disorder plus some kind of stressor is the behavioral viewpoint. 111) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 34

Topic:

Skill:

Objective:

- 112) Protective factors are positive life experiences that enable one to better handle both simple disappointments and major trauma. 112) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 34

Topic:

Skill:

Objective:

- 113) Serotonin is a monoamine. 113) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 37

Topic:

Skill:

Objective:

- 114) Identical twins can be described as "dizygotic". 114) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 41
Topic:
Skill:
Objective:
- 115) If a concordance rate between identical twins is 100%, we know that a disorder is not at all inheritable. 115) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 41
Topic:
Skill:
Objective:
- 116) The adoption method of studying genetic influences on disorders is one way to try to remove the effects of the environment on the disorder. 116) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 41
Topic:
Skill:
Objective:
- 117) Nonshared environmental influences occur, by definition, outside of the home. 117) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 41
Topic:
Skill:
Objective:
- 118) Neural plasticity is only evident early in life. 118) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 43
Topic:
Skill:
Objective:
- 119) Even if a trait has a strong genetic influence, environmental factors can have a major impact on the level of that trait. 119) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 44
Topic:
Skill:
Objective:
- 120) Most, if not all, mental disorders are biological conditions with biological causes. 120) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 44
Topic:
Skill:
Objective:
- 121) The existential perspective is comparable to the psychoanalytic perspective in that it views mental illness as the consequence of an unfulfilled id. 121) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 45
Topic:
Skill:
Objective:

- 122) The ego is present at birth. 122) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 46
Topic:
Skill:
Objective:
- 123) The Electra complex is the female version of the Oedipus complex. 123) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 48
Topic:
Skill:
Objective:
- 124) Erik Erikson developed a psychodynamic stage theory that acknowledged the role that social interactions play in development. 124) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 49
Topic:
Skill:
Objective:
- 125) The interpersonal perspective views unsatisfactory relationships as the primary cause of many psychological problems. 125) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 49
Topic:
Skill:
Objective:
- 126) Extinction is the same thing as unlearning. 126) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 51
Topic:
Skill:
Objective:
- 127) The processes of generalization and discrimination are seen in both operant and classical conditioning. 127) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 52
Topic:
Skill:
Objective:
- 128) Behavioral therapies treat symptoms. 128) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 52
Topic:
Skill:
Objective:
- 129) All children who are raised by parents with mental disorders show evidence of psychopathology themselves. 129) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 58
Topic:
Skill:
Objective:

130) Parenting style has little impact on children's mental health once they become adults. 130) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 59-60
Topic:
Skill:
Objective:

131) Socio-economic status, prejudice, and urban violence can all have an impact on a developing child's later mental health. 131) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 64-66
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

132) What is the diathesis-stress model of psychopathology? 132) _____
Answer: A person must have both a vulnerability for a disorder and exposure to some type of stressors in order to develop the disorder.
Diff: 1 Type: SA Page Ref: 34
Topic:
Skill:
Objective:

133) Discuss one of the misconceptions about the genetic influences on behavior – what is the misconception and what are the facts? 133) _____
Answer: Any of the misconceptions and facts in box 2.2
Diff: 1 Type: SA Page Ref: 44
Topic:
Skill:
Objective:

134) How do defense mechanisms contribute to psychopathology? 134) _____
Answer: They reduce anxiety by distorting reality rather than dealing directly with a problem.
Diff: 2 Type: SA Page Ref: 46
Topic:
Skill:
Objective:

135) What is object-relations theory? 135) _____
Answer: Object-relations theory reflects a newer psychodynamic perspective. Object-relations theorists focus on how an individual interacts with others (objects) and on the relationships that are experienced. Interactions with others may be both real and imagined, thus we possess internalized objects that may be contradictory and give rise to internal conflicts, as when something is both feared and desired.
Diff: 2 Type: SA Page Ref: 48
Topic:
Skill:
Objective:

- 136) What is extinction and how might it be used in treating a disorder? 136) _____
Answer: Extinction is the process of lessening the strength of a conditioned response by presenting the conditioned stimulus in the absence of the unconditioned stimulus. If, for example, one had developed a fear of a snakes (a phobia) after having been bitten by a snake, the extinction process might consist of exposing the fearful person to a snake (the conditioned stimulus) without any negative event occurring (such as being bitten; the unconditioned stimulus). Such a procedure should, hopefully, serve to extinguish the fear response to the snake.
Diff: 1 Type: SA Page Ref: 51
Topic:
Skill:
Objective:
- 137) How can attributional style influence the likelihood of developing depression? 137) _____
Answer: We all seek to explain the world, we seek to find reasons for events that happen to us and around us. In other words, we look to attribute occurrences to some cause. If we attribute all of our failures to internal, stable, and global causes, the stage is set for the development of depression. If all that is negative in your life is your fault and it can't be changed, what is there to be happy about? Addressing such irrational thinking is a likely task for a cognitive therapist.
Diff: 1 Type: SA Page Ref: 54
Topic:
Skill:
Objective:
- 138) How does abuse and maltreatment tend to affect a child's ability to related to others? 138) _____
Answer: They develop a disorganized and disoriented attachment style which can generalize to new relationships.
Diff: 2 Type: SA Page Ref: 57-58
Topic:
Skill:
Objective:
- 139) Distinguish between authoritative and authoritarian parenting. 139) _____
Answer: Authoritative and authoritarian parents both exert control over the lives of their children, but they do so in significantly different ways. The authoritative parent is warm and communicative, discussing disciplinary actions with their children. The authoritarian parent, on the other hand, is less warm and feels no need to explain or justify his or her actions. While authoritative parenting has been found to be associated with positive outcomes, research on authoritarian parenting has linked such an approach to child-rearing with children who are irritable and moody.
Diff: 2 Type: SA Page Ref: 59-60
Topic:
Skill:
Objective:
- 140) What is the relationship between socioeconomic status and the prevalence of abnormal behavior? 140) _____
Answer: There is a negative correlation between socioeconomic status (SES) and abnormal behavior. This means that the lower one's SES, the more likely the presence of a mental disorder. It may be that being of low SES makes mental illness more likely or that mental illness leads to a lower SES. At the same time, this could be a consequence of differential treatment of abnormality according to SES. The homeless individual who is odd may be seen as mentally ill, while a comparable wealthy individual is seen as eccentric.
Diff: 1 Type: SA Page Ref: 64-65
Topic:
Skill:
Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

141) Distinguish between necessary, sufficient, and contributory causes of abnormal behavior.

Answer: When discussing the factors that lead to any type of disorder, numerous relationships can be described between factors that lead to the disorder and the disorder itself. A necessary cause is something that is necessary for the development of a disorder; the disorder will not develop unless the necessary cause is present. In the case of necessary causes, exposure is required for the disorder to develop, but exposure does not guarantee the condition will develop. For example, without medical intervention sex is necessary for conception to occur, but sex does not always lead to pregnancy. In some cases, if a factor is present, the disorder will always develop. Such factors are referred to as sufficient causes. If exposure to a virus, for example, guarantees the development of an illness, that virus is a sufficient cause. Note, however, that a sufficient cause is often not a necessary cause; there may be other factors that may lead to the disorder. Contributory causes are best described as risk factors, those things that make the development of a disorder more likely. Environmental factors, for example, may serve as contributory causes for many types of psychopathology. In summary, necessary causes are required for a disorder to develop but do not guarantee the disorder will develop, sufficient causes guarantee a disorder will develop, and contributory causes increase the chances of a disorder developing.

GRADING RUBRIC: 10 points total, 2 points for definition of each factor (6 points) and 4 points for clearly distinguishing between the different types of causes.

Diff: 2 Type: ES Page Ref: 33-34

Topic:

Skill:

Objective:

142) What are protective factors? Give an example. How can protective factors impact a person's later functioning?

Answer: They are influences that modify a person's response to environmental stressors. They make it less likely the person will experience the adverse consequences of the stressors. An example of a protective factor is having a warm and caring parent. Protective factors usually, but not always, lead to resilience. The person has the ability to adapt successfully to even stressful circumstances. This can help prevent the development of psychopathology. GRADING RUBRIC: 10 points - 4 for the explanation of protective factors, 1 for the example, 5 for the explanation of how they impact a person's later functioning.

Diff: 2 Type: ES Page Ref: 34-35

Topic:

Skill:

Objective:

143) Describe two of the methods for studying genetic influences. What can they tell us and what are their limitations?

Answer: The family history method observes relatives of a person with a disorder to see if the likelihood of having the disorder increases in proportion to the closeness of the biological relationship. This is compared to the likelihood of developing the disorder without any relative with the disorder. This method doesn't control for the effects of the environment. The twin method compares identical and fraternal twins. If identical twins have a higher concordance rate than fraternal, there is evidence that a the disorder has a genetic component. However, this may be misleading because it is possible that identical twins are treated more similarly than fraternal twins. The adoption method follows people with a disorder who give their babies up for adoption or examines the biological and adoptive parents of adoptees with disorders. If there is a genetic component, the rates should be higher in the biological parent-child pair than the adoptive parent-adoptive child pair. These are difficult to do unless adoption is open and the biological parents are known. GRADING RUBRIC: 10 points. 5 points for each part.

Diff: 2 Type: ES Page Ref: 40-41

Topic:

Skill:

Objective:

144) Compare and contrast the humanistic and existential perspectives.

Answer: While the humanistic and existential perspectives do share some common elements, there are also ways in which they differ significantly. The humanistic perspective view humans as basically good and focuses on the present. Humanistic therapy focuses on aiding a person in finding their means of achieving self-actualization, of being the best that he or she can be. The existential perspective is comparable in recognizing that we are all unique individuals who desire self-fulfillment, but it does not have such a positive view of human nature. Existentialists place more emphasis on irrational tendencies and the external obstacles to self-fulfillment. GRADING RUBRIC: 6 points total - 3 for how they are alike, 3 for how they differ.

Diff: 2 Type: ES Page Ref: 45

Topic:

Skill:

Objective:

145) Charlotte suffers from intense anxiety. How would Freud explain this anxiety? In your answer, describe the different parts of the personality from a Freudian perspective, and how these parts of personality interact to produce anxiety.

Answer: Freud suggests that behavior results from interaction of three subsystems in personality: id, ego, and superego. Inner (intrapsychic) conflicts arise when these three make incompatible demands on the individual. Freud suggests three types of anxiety: reality, neurotic, and moral anxiety. Reality anxiety arises from external threats, neurotic anxiety from the threat of the id's unconscious impulses breaking through ego controls, and moral anxiety from action in conflict with the superego. The ego handles anxiety either rationally or with ego-defense mechanisms.

GRADING RUBRIC: 10 points total - 2 points each for explanation of id, ego, and superego. 4 points for explanation of how these interact to produce anxiety.

Diff: 1

Type: ES

Page Ref: 46

Topic:

Skill:

Objective:

- 1) D
- 2) C
- 3) B
- 4) D
- 5) B
- 6) A
- 7) C
- 8) C
- 9) B
- 10) D
- 11) A
- 12) C
- 13) D
- 14) D
- 15) D
- 16) D
- 17) D
- 18) B
- 19) A
- 20) B
- 21) D
- 22) B
- 23) C
- 24) B
- 25) D
- 26) D
- 27) A
- 28) D
- 29) A
- 30) C

- 31) C
- 32) A
- 33) C
- 34) D
- 35) C
- 36) A
- 37) C
- 38) C
- 39) C
- 40) B
- 41) D
- 42) D
- 43) B
- 44) A
- 45) A
- 46) A
- 47) B
- 48) C
- 49) D
- 50) C
- 51) A
- 52) B
- 53) C
- 54) D
- 55) B
- 56) A
- 57) B
- 58) D
- 59) A
- 60) A
- 61) C

- 62) B
- 63) D
- 64) A
- 65) D
- 66) B
- 67) C
- 68) B
- 69) D
- 70) A
- 71) C
- 72) B
- 73) A
- 74) B
- 75) C
- 76) D
- 77) B
- 78) D
- 79) D
- 80) C
- 81) D
- 82) B
- 83) B
- 84) B
- 85) D
- 86) D
- 87) D
- 88) C
- 89) A
- 90) A
- 91) D

- 92) D
- 93) A
- 94) C
- 95) D
- 96) C
- 97) D
- 98) B
- 99) A
- 100) D
- 101) B
- 102) C
- 103) C
- 104) D
- 105) B
- 106) B
- 107) B
- 108) TRUE
- 109) FALSE
- 110) TRUE
- 111) FALSE
- 112) FALSE
- 113) TRUE
- 114) FALSE
- 115) FALSE
- 116) TRUE
- 117) FALSE
- 118) FALSE
- 119) TRUE
- 120) FALSE
- 121) FALSE
- 122) FALSE

- 123) TRUE
- 124) TRUE
- 125) TRUE
- 126) FALSE
- 127) TRUE
- 128) TRUE
- 129) FALSE
- 130) FALSE
- 131) TRUE
- 132) A person must have both a vulnerability for a disorder and exposure to some type of stressors in order to develop the disorder.
- 133) Any of the misconceptions and facts in box 2.2
- 134) They reduce anxiety by distorting reality rather than dealing directly with a problem.
- 135) Object-relations theory reflects a newer psychodynamic perspective. Object-relations theorists focus on how an individual interacts with others (objects) and on the relationships that are experienced. Interactions with others may be both real and imagined, thus we possess internalized objects that may be contradictory and give rise to internal conflicts, as when something is both feared and desired.
- 136) Extinction is the process of lessening the strength of a conditioned response by presenting the conditioned stimulus in the absence of the unconditioned stimulus. If, for example, one had developed a fear of a snakes (a phobia) after having been bitten by a snake, the extinction process might consist of exposing the fearful person to a snake (the conditioned stimulus) without any negative event occurring (such as being bitten; the unconditioned stimulus). Such a procedure should, hopefully, serve to extinguish the fear response to the snake.
- 137) We all seek to explain the world, we seek to find reasons for events that happen to us and around us. In other words, we look to attribute occurrences to some cause. If we attribute all of our failures to internal, stable, and global causes, the stage is set for the development of depression. If all that is negative in your life is your fault and it can't be changed, what is there to be happy about? Addressing such irrational thinking is a likely task for a cognitive therapist.
- 138) They develop a disorganized and disoriented attachment style which can generalize to new relationships.
- 139) Authoritative and authoritarian parents both exert control over the lives of their children, but they do so in significantly different ways. The authoritative parent is warm and communicative, discussing disciplinary actions with their children. The authoritarian parent, on the other hand, is less warm and feels no need to explain or justify his or her actions. While authoritative parenting has been found to be associated with positive outcomes, research on authoritarian parenting has linked such an approach to child-rearing with children who are irritable and moody.
- 140) There is a negative correlation between socioeconomic status (SES) and abnormal behavior. This means that the lower one's SES, the more likely the presence of a mental disorder. It may be that being of low SES makes mental illness more likely or that mental illness leads to a lower SES. At the same time, this could be a consequence of differential treatment of abnormality according to SES. The homeless individual who is odd may be seen as mentally ill, while a comparable wealthy individual is seen as eccentric.

- 141) When discussing the factors that lead to any type of disorder, numerous relationships can be described between factors that lead to the disorder and the disorder itself. A necessary cause is something that is necessary for the development of a disorder; the disorder will not develop unless the necessary cause is present. In the case of necessary causes, exposure is required for the disorder to develop, but exposure does not guarantee the condition will develop. For example, without medical intervention sex is necessary for conception to occur, but sex does not always lead to pregnancy. In some cases, if a factor is present, the disorder will always develop. Such factors are referred to as sufficient causes. If exposure to a virus, for example, guarantees the development of an illness, that virus is a sufficient cause. Note, however, that a sufficient cause is often not a necessary cause; there may be other factors that may lead to the disorder. Contributory causes are best described as risk factors, those things that make the development of a disorder more likely. Environmental factors, for example, may serve as contributory causes for many types of psychopathology. In summary, necessary causes are required for a disorder to develop but do not guarantee the disorder will develop, sufficient causes guarantee a disorder will develop, and contributory causes increase the chances of a disorder developing.
GRADING RUBRIC: 10 points total, 2 points for definition of each factor (6 points) and 4 points for clearly distinguishing between the different types of causes.
- 142) They are influences that modify a person's response to environmental stressors. They make it less likely the person will experience the adverse consequences of the stressors. An example of a protective factor is having a warm and caring parent. Protective factors usually, but not always, lead to resilience. The person has the ability to adapt successfully to even stressful circumstances. This can help prevent the development of psychopathology.
GRADING RUBRIC: 10 points - 4 for the explanation of protective factors, 1 for the example, 5 for the explanation of how they impact a person's later functioning.
- 143) The family history method observes relatives of a person with a disorder to see if the likelihood of having the disorder increases in proportion to the closeness of the biological relationship. This is compared to the likelihood of developing the disorder without any relative with the disorder. This method doesn't control for the effects of the environment. The twin method compares identical and fraternal twins. If identical twins have a higher concordance rate than fraternal, there is evidence that a the disorder has a genetic component. However, this may be misleading because it is possible that identical twins are treated more similarly than fraternal twins. The adoption method follows people with a disorder who give their babies up for adoption or examines the biological and adoptive parents of adoptees with disorders. If there is a genetic component, the rates should be higher in the biological parent-child pair than the adoptive parent-adoptive child pair. These are difficult to do unless adoption is open and the biological parents are known. GRADING RUBRIC: 10 points. 5 points for each part.
- 144) While the humanistic and existential perspectives do share some common elements, there are also ways in which they differ significantly. The humanistic perspective view humans as basically good and focuses on the present. Humanistic therapy focuses on aiding a person in finding their means of achieving self-actualization, of being the best that he or she can be. The existential perspective is comparable in recognizing that we are all unique individuals who desire self-fulfillment, but it does not have such a positive view of human nature. Existentialists place more emphasis on irrational tendencies and the external obstacles to self-fulfillment.
GRADING RUBRIC: 6 points total - 3 for how they are alike, 3 for how they differ.
- 145) Freud suggests that behavior results from interaction of three subsystems in personality: id, ego, and superego. Inner (intrapsychic) conflicts arise when these three make incompatible demands on the individual. Freud suggests three types of anxiety: reality, neurotic, and moral anxiety. Reality anxiety arises from external threats, neurotic anxiety from the threat of the id's unconscious impulses breaking through ego controls, and moral anxiety from action in conflict with the superego. The ego handles anxiety either rationally or with ego-defense mechanisms.
GRADING RUBRIC: 10 points total - 2 points each for explanation of id, ego, and superego. 4 points for explanation of how these interact to produce anxiety.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Psychological assessment refers to the _____
A) determination of how environmental factors impact the course of a disorder.
B) process used to arrive at a diagnosis.
C) development of a treatment plan.
D) procedures used to summarize a client's problem.

Answer: D

Diff: 1 Type: MC Page Ref: 71

Topic: The Basic Elements in Assessment

Skill: Factual

Objective:

- 2) A person comes to a mental health professional with a certain complaint. The professional attempts to understand the nature and extent of the problem. This process is called _____
A) screening. B) assessment.
C) diagnosis. D) clinical treatment.

Answer: B

Diff: 1 Type: MC Page Ref: 71

Topic: The Basic Elements in Assessment

Skill: Conceptual

Objective:

- 3) Which of the following statements regarding assessment is true? _____
A) An adequate assessment should include as much information as possible to allow the clinician to determine how the individual is functioning now and to predict how she will respond to various forms of treatment.
B) Assessment should focus only on the client's current level of functioning.
C) An adequate assessment consists of a diagnostic label and a determination of the amount of danger the client poses to himself and others.
D) Assessment necessarily involves the gathering of data about the client from multiple sources.

Answer: A

Diff: 2 Type: MC Page Ref: 71

Topic: The Basic Elements in Assessment

Skill: Applied

Objective:

- 4) What role does the social context play in assessment? _____
A) Social context is not considered during assessment, only during diagnosis.
B) Environmental factors are usually the proximal cause of mental disorders and frequently need to be addressed before any form of treatment commences.
C) An evaluation of the environment in which the client lives is necessary in order to understand the demands he faces, as well as the supports that are present.
D) The social context need only be considered when a course of treatment is being selected; significant others in the client's life should be the primary decision makers.

Answer: C

Diff: 1 Type: MC Page Ref: 71

Topic: The Basic Elements in Assessment

Skill: Conceptual

Objective:

- 5) Unlike the medical practitioner, the mental health professional's assessment process _____
A) usually involves a rapid conclusion about how to explain and treat the client's complaint.
B) rarely has "lab work" that can confirm an initial impression.
C) must be completed prior to beginning treatment.
D) rarely includes a complex process where many contributing factors must be investigated.

Answer: B

Diff: 2 Type: MC Page Ref: 72

Topic: The Basic Elements in Assessment

Skill: Conceptual

Objective:

- 6) Cultural competence involves 6) _____
- A) an assessment of an individual's ability to cope within the majority culture.
 - B) being able to ignore cultural differences when making a diagnosis.
 - C) using testing procedures that have been adapted to and validated for different cultures.
 - D) only treating clients who come from the same cultural background.

Answer: C

Diff: 1 Type: MC Page Ref: 76

Topic: Ensuring Culturally Sensitive Assessment Procedures

Skill: Conceptual

Objective:

- 7) Which of the following would be used to reveal a dysrhythmia in brain activity? 7) _____
- A) EEG
 - B) MRI
 - C) CAT scan
 - D) PET scan

Answer: A

Diff: 2 Type: MC Page Ref: 73

Topic: Assessment of the Physical Organism/The Neurological

Skill: Factual

Objective:

- 8) Dr. Smith believes that a decrease in frontal lobe function underlies the cognitive deficits seen in schizophrenia. He has hypothesized that effective drug therapy serves to selectively increase metabolic activity in this part of the brain. Which of the following is Dr. Smith most likely to use to test his hypothesis? 8) _____
- A) magnetic resonance imaging (MRI).
 - B) an electroencephalogram (EEG).
 - C) positron emission tomography (PET) scans.
 - D) computerized axial tomography (CAT) scans.

Answer: C

Diff: 2 Type: MC Page Ref: 73

Topic: Assessment of the Physical Organism/The Neurological

Skill: Conceptual

Objective:

- 9) One advantage of nuclear magnetic resonance imaging (MRI) over the CAT scan is that the MRI 9) _____
- A) measures the metabolic processes of the brain.
 - B) is not an invasive procedure.
 - C) provides better differentiation and clarity.
 - D) does not require a claustrophobic cylinder-shaped machine.

Answer: C

Diff: 2 Type: MC Page Ref: 73

Topic: Assessment of the Physical Organism/The Neurological

Skill: Conceptual

Objective:

- 10) Dr. Bruce says "Its beneficial features are the ability to map ongoing psychological activities of the brain without injecting radioactive substances into the patient's body. In addition, they are much more widely available procedures than what was used before." What is Dr. Bruce describing? 10) _____
- A) computerized axial tomography (CAT) scans
 - B) electroencephalograms (EEGs)
 - C) positron emission tomography (PET) scans
 - D) functional magnetic resonance imaging (fMRI)

Answer: D

Diff: 2 Type: MC

Page Ref: 74

Topic: Assessment of the Physical Organism/The Neurological

Skill: Applied

Objective:

- 11) Dr. Kim is a psychologist who uses a number of tests to measure a person's cognitive, perceptual, and motor performance to detect brain damage. Dr. Kim is probably a specialist in using 11) _____
- A) neuropsychological assessment. B) functional electroencephalograms.
C) computerized axial tomography. D) functional magnetic resonance imaging.

Answer: A

Diff: 1 Type: MC

Page Ref: 74

Topic: Assessment of the Physical Organism/The Neuropsychological

Skill: Applied

Objective:

- 12) While neurological assessment procedures evaluate the brain's physical properties, neuropsychological assessment focuses on 12) _____
- A) client performance.
B) self-reported changes in cognitive and perceptual functioning.
C) brain functioning.
D) brain activity.

Answer: A

Diff: 1 Type: MC

Page Ref: 74

Topic: Assessment of the Physical Organism/The Neuropsychological

Skill: Factual

Objective:

- 13) Neuropsychological tests 13) _____
- A) can be given only through means of a highly standardized battery of tests.
B) are more effective at locating specific sites of brain damage than fMRIs or PET scans.
C) use the measurement of performance on perceptual-motor tasks to give clues about impairment after brain injury.
D) can be given only through means of a highly individualized array of tests.

Answer: C

Diff: 1 Type: MC

Page Ref: 74

Topic: Assessment of the Physical Organism/The Neuropsychological

Skill: Factual

Objective:

- 14) Ed has suffered a head injury in a car accident. He is referred to a psychologist to see what types of impairment now exist and to get some suggestions for treatment. The best assessment strategy would be 14) _____
- A) neuropsychological tests. B) a CAT scan.
C) an fMRI. D) a PET scan.

Answer: A

Diff: 2 Type: MC

Page Ref: 74

Topic: Assessment of the Physical Organism/The Neuropsychological

Skill: Applied

Objective:

- 15) In which of the following circumstances would a psychosocial assessment clearly need to be used? 15) _____
- A) Mr. Harvey has been having problems with his memory since his stroke.
B) Since the car accident, Jill has had nightmares.
C) After a change in her hormone treatment regimen, Hillary began to show severe mood swings.
D) Ever since the divorce, James has been sleeping less and less.

Answer: D

Diff: 1 Type: MC Page Ref: 75

Topic: Psychosocial Assessment

Skill: Applied

Objective:

- 16) A psychosocial assessment typically begins with 16) _____
- A) administration of the MMPI.
 - B) an interview.
 - C) an assessment of global level of functioning.
 - D) a physical examination.

Answer: B

Diff: 1 Type: MC Page Ref: 75

Topic: Psychosocial Assessment

Skill: Factual

Objective:

- 17) Under what circumstances is a structured interview most likely to be used? 17) _____
- A) When an accurate diagnosis is needed to ensure appropriate treatment.
 - B) When the behavior of the client is erratic.
 - C) When the information provided in an unstructured interview is found to lack reliability.
 - D) When consistent information is needed for research purposes.

Answer: D

Diff: 1 Type: MC Page Ref: 75

Topic: Psychosocial Assessment/Assessment Interviews

Skill: Conceptual

Objective:

- 18) Which of the following best illustrates high reliability? 18) _____
- A) A clinician accurately predicts that a client will become violent when reunited with this family.
 - B) A clinician uses both medical (eg. MRI) and psychological (eg. MMPI-2) information to decide a diagnosis.
 - C) Two interviewers diagnose the same disorder after talking to the same client.
 - D) An interviewer modifies the way she asks questions to fit the style of the client.

Answer: C

Diff: 2 Type: MC Page Ref: 75

Topic: Psychosocial Assessment/Assessment Interviews

Skill: Applied

Objective:

- 19) Shanna goes to Dr. Henderson for a first interview. He diagnosis her with a depressive disorder. She then goes to Dr. Smithson, because her friend recommended her. Dr. Smithson diagnoses Shanna with an anxiety disorder. This demonstrates a problem with 19) _____
- A) multiaxial diagnosis.
 - B) reliability.
 - C) structured interviews.
 - D) flexibility.

Answer: B

Diff: 1 Type: MC Page Ref: 75

Topic: Psychosocial Assessment/Assessment Interviews

Skill: Applied

Objective:

- 20) Which of the following is a drawback of a structured interview? 20) _____
- A) Each person that uses them uses them in different ways.
 - B) They may include questions about areas that are of no concern to the patient.
 - C) Important information may be missed.
 - D) Information from one is hard to compare to information from another.

Answer: B

Diff: 2 Type: MC Page Ref: 76
Topic: Psychosocial Assessment/Assessment Interviews
Skill: Conceptual
Objective:

- 21) A clinical psychologist notes that a client wears his clothes inside out, that his hair is matted, and there is dirt under his fingernails. This information is known as 21) _____
- A) an observational decision tree. B) clinical observation.
C) a dynamic formulation. D) self-monitoring.

Answer: B

Diff: 2 Type: MC Page Ref: 76
Topic: Psychosocial Assessment/The Clinical Observation of Behavior
Skill: Applied
Objective:

- 22) In which of the following circumstances would a clinician be most likely to use self-monitoring? 22) _____
- A) When a client is unable to describe their presenting problem.
B) When other forms of clinical observation have yielded no evidence of abnormal behavior.
C) To evaluate the quality of the social environment.
D) To find out what situations are likely to illicit problematic behavior.

Answer: D

Diff: 2 Type: MC Page Ref: 76
Topic: Psychosocial Assessment/The Clinical Observation of Behavior
Skill: Applied
Objective:

- 23) A behaviorally-oriented clinician tells her alcohol dependent client: "Here is a checklist I want you to fill out each day. Whenever you feel you need a drink, you should indicate what you were thinking, where you were, who you were with, and whether you went ahead and drank." What procedure is the clinician using? 23) _____
- A) self-monitoring B) mental status exam
C) screening activity D) self-analysis

Answer: A

Diff: 2 Type: MC Page Ref: 76
Topic: Psychosocial Assessment/The Clinical Observation of Behavior
Skill: Applied
Objective:

- 24) Which of the following is NOT a reason for using rating scales? 24) _____
- A) to decrease objectivity
B) to provide structure
C) to allow standardized comparisons to be made
D) to increase reliability

Answer: A

Diff: 1 Type: MC Page Ref: 77
Topic: Psychosocial Assessment/The Clinical Observation of Behavior
Skill: Factual
Objective:

- 25) Danielle is having problems with drinking. She goes to a psychologist who gives her a form to fill out. It has a list of statements about drinking and problems associated with drinking. She is to rate each item between 1 and 3, 1 meaning it is not a problem for her, 3 meaning it is a very big problem for her and 2 is in-between. This is an example of 25) _____
- A) a mental status exam. B) self-monitoring.
C) a structured interview. D) a rating scale.

Answer: D

Diff: 2 Type: MC

Page Ref: 77

Topic: Psychosocial Assessment/The Clinical Observation of Behavior

Skill: Applied

Objective:

- 26) Intelligence and personality tests can best be described as 26) _____
- A) unstructured means of assessing behavior.
 - B) direct means of assessing behavior.
 - C) indirect means of assessing psychological characteristics.
 - D) observational means of assessing behavior.

Answer: C

Diff: 1 Type: MC

Page Ref: 77

Topic: Psychosocial Assessment/Psychological Tests

Skill: Conceptual

Objective:

- 27) What would determine whether the WISC-III or the WAIS-III is used to test intelligence? 27) _____
- A) the age of the client
 - B) the amount of time available for test administration
 - C) the suspected level of impairment
 - D) whether or not organic brain damage is present

Answer: A

Diff: 1 Type: MC

Page Ref: 77

Topic: Psychosocial Assessment/Psychological Tests

Skill: Factual

Objective:

- 28) There are two general categories of psychological tests used in clinical practice. They are 28) _____
- A) intelligence tests and personality tests.
 - B) projective tests and sentence completion tests.
 - C) intelligence tests and rating scales.
 - D) neuropsychological tests and standardized tests.

Answer: A

Diff: 1 Type: MC

Page Ref: 77

Topic: Psychosocial Assessment/Psychological Tests

Skill: Factual

Objective:

- 29) Reasons individually administered IQ tests may not be used include all of the following EXCEPT 29) _____
- A) they take several hours to give and interpret.
 - B) many settings and cases don't require the kind of detailed knowledge they give.
 - C) they have low reliability.
 - D) they are expensive.

Answer: C

Diff: 1 Type: MC

Page Ref: 77

Topic: Psychosocial Assessment/Psychological Tests

Skill: Factual

Objective:

- 30) Which of the following is an unstructured approach to studying personality? 30) _____
- A) the TAT
 - B) WISC-III
 - C) the Stanford-Binet
 - D) the BPRS

Answer: A

Diff: 1 Type: MC

Page Ref: 78

Topic: Psychosocial Assessment/Psychological Tests

Skill: Factual

Objective:

- 31) Which of the following would be an example of a projective technique? 31) _____
- A) An elderly woman is asked to recall the day her father died.
 - B) A troubled teen is asked to select statements that she feels describe her.
 - C) A child is asked to draw her family.
 - D) An alcoholic is told to record the times at which she feels the greatest desire for a drink.

Answer: C

Diff: 2 Type: MC Page Ref: 78
Topic: Psychosocial Assessment/Psychological Tests
Skill: Applied
Objective:

- 32) "Projective" and "objective" are two types of _____ tests. 32) _____
- A) intelligence
 - B) psychodynamically-oriented
 - C) personality
 - D) neuropsychological

Answer: C

Diff: 1 Type: MC Page Ref: 78, 80
Topic: Psychosocial Assessment/Psychological Tests
Skill: Factual
Objective:

- 33) The aim of a projective test is to 33) _____
- A) assess the role of organic factors in a patient's thinking.
 - B) predict a person's future behavior.
 - C) assess the way a patient perceives ambiguous stimuli.
 - D) compare a patient's responses to those of persons who are known to have mental disorders.

Answer: C

Diff: 1 Type: MC Page Ref: 78
Topic: Psychosocial Assessment/Psychological Tests
Skill: Factual
Objective:

- 34) Which of the following is a projective testing method that has been adapted for computer interpretation? 34) _____
- A) the MMPI
 - B) the sentence completion test
 - C) the Rorschach Test
 - D) the Thematic Apperception Test

Answer: C

Diff: 1 Type: MC Page Ref: 78
Topic: Psychosocial Assessment/Psychological Tests
Skill: Factual
Objective:

- 35) Which of the following best explains why the Rorschach is less likely to be used today? 35) _____
- A) Treatment facilities often require other types of information than the Rorschach provides.
 - B) Other projective approaches have been found to be more reliable.
 - C) It is more costly and time consuming than other projective techniques.
 - D) The Rorschach is only useful as a means of aiding clients in self-discovery; it has not true clinical utility.

Answer: A

Diff: 1 Type: MC Page Ref: 78
Topic: Psychosocial Assessment/Psychological Tests
Skill: Conceptual
Objective:

- 36) Which statement about the Rorschach is accurate? 36) _____
- A) It is the quickest projective tests to administer and score.
 - B) It assesses the kind of specific behavioral deficits that most mental health facilities require today.
 - C) A considerable amount of training is required to administer and score it accurately.
 - D) The ambiguous stimuli it employs are pictures of people interacting in an unclear way.

Answer: C

Diff: 1 Type: MC Page Ref: 78
Topic: Psychosocial Assessment/Psychological Tests
Skill: Factual
Objective:

- 37) Research by Exner and others has shown that the Rorschach 37) _____
- A) is one of the least frequently researched clinical instruments despite its widespread use.
 - B) is a test with weak reliability and absolutely no validity.
 - C) is just as effective at identifying areas of brain damage as MRIs and PET scans.
 - D) can be scored by computer, thereby increasing its reliability.

Answer: D

Diff: 2 Type: MC Page Ref: 78
Topic: Psychosocial Assessment/Psychological Tests
Skill: Factual
Objective:

- 38) The Thematic Apperception Test (TAT) has been used to assess all of the following EXCEPT 38) _____
- A) fantasies.
 - B) perception of reality.
 - C) needs.
 - D) intelligence.

Answer: D

Diff: 1 Type: MC Page Ref: 79
Topic: Psychosocial Assessment/Psychological Tests
Skill: Factual
Objective:

- 39) Several clinician's look at the TAT results of a hospitalized patient. The patient described the characters on the card as not speaking to each other. One clinician says this means the patient has a lot of unresolved anger. Another says it means the patient has a lot of social anxiety. The third says he thinks it means the patient is uninterested in people and prefers to be alone. This demonstrates the following problem with the TAT: 39) _____
- A) the amount of time it takes to score and interpret it.
 - B) scoring and interpretation is very subjective.
 - C) the pictures on the cards are old and dated.
 - D) the lack of training of clinicians on using it.

Answer: B

Diff: 1 Type: MC Page Ref: 79
Topic: Psychosocial Assessment/Psychological Tests
Skill: Applied
Objective:

- 40) Which of the following would best address recent criticisms of the TAT? 40) _____
- A) allow more time for the client to respond
 - B) rely more heavily on manuals for interpretation
 - C) make the images less ambiguous
 - D) use more modern pictures

Answer: D

Diff: 1 Type: MC Page Ref: 79
Topic: Psychosocial Assessment/Psychological Tests
Skill: Applied
Objective:

- 41) Which of the following is NOT a criticism of projective tests? 41) _____
- A) subjective
 - B) client responses are limited
 - C) time-consuming
 - D) difficult to interpret

Answer: B

Diff: 1 Type: MC Page Ref: 79
Topic: Psychosocial Assessment/Psychological Tests
Skill: Factual
Objective:

- 42) The MMPI is 42) _____
- A) a recently developed objective approach to personality assessment.
 - B) a rating scale used to determine how comparable one is to individuals with various psychiatric diagnoses.
 - C) the most commonly used test of intelligence.
 - D) a structured approach to personality assessment.

Answer: D

Diff: 1 Type: MC Page Ref: 80
Topic: Psychosocial Assessment/Psychological Tests
Skill: Conceptual
Objective:

- 43) The empirical keying approach to making a test like the MMPI involves 43) _____
- A) subjective scoring of test items to assign items to different groups.
 - B) picking items that differentiate between different groups, no subjective judgment is needed.
 - C) the creation of ambiguous stimuli where there are many possible responses.
 - D) using theoretically-based concepts to develop questions for different groups.

Answer: B

Diff: 2 Type: MC Page Ref: 80
Topic: Psychosocial Assessment/Psychological Tests
Skill: Conceptual
Objective:

- 44) What does it mean if Carol scores high on the Schizophrenia scale of the MMPI? 44) _____
- A) Carol is 30% more likely to develop schizophrenia than those who scored lower.
 - B) Carol's responses on this scale were similar to those of the Minnesota normals.
 - C) Carol has schizophrenia.
 - D) Carol's answers were comparable to those given by a group of schizophrenics.

Answer: D

Diff: 1 Type: MC Page Ref: 80
Topic: Psychosocial Assessment/Psychological Tests
Skill: Applied
Objective:

- 45) Which of the following is an objective test? 45) _____
- A) Sentence-Completion Test
 - B) Rorschach Test
 - C) Thematic Apperception Test
 - D) MMPI-2

Answer: D

Diff: 1 Type: MC Page Ref: 80
Topic: Psychosocial Assessment/Psychological Tests
Skill: Factual
Objective:

- 46) Why was the MMPI-2 needed? 46) _____
- A) The original MMPI was created over 50 years ago.
 - B) The original MMPI did not offer age-adjusted sub-scales.
 - C) The original MMPI did not permit subjects to select "other."
 - D) The original MMPI was not able to detect problems such as substance abuse and marital discord.

Answer: A

Diff: 1 Type: MC Page Ref: 82
Topic: Psychosocial Assessment/Psychological Tests
Skill: Factual
Objective:

- 47) A key feature of the MMPI-2 is that 47) _____
A) it has merged the adult and adolescent forms into one.
B) it now includes open-ended questions to examine cognitive distortions.
C) the clinical scales measure the same properties of personality organization as they always have.
D) the validity scales have been discarded.

Answer: C

Diff: 1 Type: MC Page Ref: 82
Topic: Psychosocial Assessment/Psychological Tests
Skill: Factual
Objective:

- 48) One limitation of the MMPI-2 is that it 48) _____
A) requires a clinical interview as a supplement to the test itself.
B) cannot detect whether an individual is attempting to distort his or her responses.
C) requires an individual to be literate.
D) is based on factor analysis, which often leads to measures that sacrifice validity for the sake of reliability without intending to do so.

Answer: C

Diff: 2 Type: MC Page Ref: 82
Topic: Psychosocial Assessment/Psychological Tests
Skill: Conceptual
Objective:

- 49) Why is classification a necessary first step in developing an understanding about abnormal behavior? 49) _____
A) Communication about abnormal behavior can not be effective unless what is being discussed is clear.
B) Only through development of a classification system can abnormal and normal behavior be differentiated.
C) Unless an adequate classification system exists, all descriptions of abnormality will necessarily be subjective.
D) Abnormal behavior is not abnormal until it has been classified as such.

Answer: A

Diff: 2 Type: MC Page Ref: 84
Topic: Classifying Abnormal Behavior
Skill: Conceptual
Objective:

- 50) Which of the following demonstrates reliability? 50) _____
A) When an IQ test is administered to the same person repeatedly, the results do not differ.
B) Scores on two different intelligence tests are highly correlated.
C) Scores on an IQ test are not affected by mood.
D) An IQ test is effective in predicting the academic performance of both males and females.

Answer: A

Diff: 1 Type: MC Page Ref: 84
Topic: Classifying Abnormal Behavior
Skill: Applied
Objective:

- 51) A valid test 51) _____
A) rarely is reliable. B) measures what it is designed to measure.
C) is standardized. D) yields consistent results.

Answer: B

Diff: 1 Type: MC Page Ref: 85
Topic: Classifying Abnormal Behavior
Skill: Factual
Objective:

- 52) Which of the following statements about reliability and validity is true? 52) _____
- A) There is no relationship between reliability and validity.
 - B) In order for a test to be reliable, it must be valid.
 - C) Reliable tests are usually valid.
 - D) Valid tests are usually reliable.

Answer: D

Diff: 2 Type: MC Page Ref: 85

Topic: Classifying Abnormal Behavior

Skill: Factual

Objective:

- 53) Symptoms are to signs as _____ is to _____. 53) _____
- A) subjective; objective
 - B) complaints; treatment
 - C) projective; objective
 - D) assessment; diagnosis

Answer: A

Diff: 1 Type: MC Page Ref: 85

Topic: Classifying Abnormal Behavior

Skill: Factual

Objective:

- 54) Which of the following is an example of a symptom? 54) _____
- A) her children reported that she had not been sleeping well
 - B) a large lesion was visible on the CAT scan
 - C) the client reported hearing voices
 - D) the client's hands would not stop shaking

Answer: C

Diff: 1 Type: MC Page Ref: 85

Topic: Classifying Abnormal Behavior

Skill: Applied

Objective:

- 55) Disorders that begin by adolescence or early adulthood, persist for long periods of time and affect many areas of a person's life are listed on 55) _____
- A) Axis V.
 - B) Axis II.
 - C) Axis III.
 - D) Axis IV.

Answer: B

Diff: 2 Type: MC Page Ref: 85

Topic: Classifying Abnormal Behavior

Skill: Factual

Objective:

- 56) During an assessment interview, Dr. Poole noted that Jane's boss at work was harassing her. On which of the five axes of the DSM would this information be noted? 56) _____
- A) Axis IV
 - B) Axis II
 - C) Axis V
 - D) Axis III

Answer: A

Diff: 2 Type: MC Page Ref: 86

Topic: Classifying Abnormal Behavior

Skill: Applied

Objective:

- 57) Despite his condition, Jim went to work every day. On which of the five axes of the DSM would this information be found? 57) _____
- A) Axis V
 - B) Axis IV
 - C) Axis III
 - D) Axis II

Answer: A

Diff: 2 Type: MC Page Ref: 86

Topic: Classifying Abnormal Behavior

Skill: Applied

Objective:

58) Jane has been diagnosed with schizotypal personality disorder. Jane's distorted view of the world, however, does not prevent her from working and living a relatively normal life. Which of the following terms best describes Jane's condition? 58) _____

- A) recurrent B) acute C) chronic D) episodic

Answer: C

Diff: 1 Type: MC Page Ref: 87

Topic: Classifying Abnormal Behavior

Skill: Applied

Objective:

59) One criticism of diagnostic labels is that 59) _____

- A) the multiaxial system is so complicated to use that few people are able to use it well.
B) there are so many different systems of diagnosis that it is hard to understand what an individual diagnosis means.
C) they can influence both other people's and the diagnosed person's perception of themselves in negative ways.
D) they make other information unnecessary, so restrict the type of services that insurance will cover.

Answer: C

Diff: 1 Type: MC Page Ref: 87

Topic: Classifying Abnormal Behavior

Skill: Conceptual

Objective:

60) Which of the following is a disadvantage of psychotherapy? 60) _____

- A) It is ineffective in treating severe mental disorders.
B) It is generally less effective than talking out your problems with a friend or family member.
C) It takes time.
D) It is significantly more expensive than all other forms of treatment.

Answer: C

Diff: 2 Type: MC Page Ref: 88

Topic: An Overview of Treatment

Skill: Factual

Objective:

61) What recent changes have altered the types of therapy that are available? 61) _____

- A) Many popular therapies have been found to do more harm than good.
B) Psychiatrists are hesitant to write prescriptions for many drugs.
C) The increased use of nurses as therapy providers has increased the use of drugs in many community health settings.
D) There is an increased need to prove that therapy is effective.

Answer: D

Diff: 2 Type: MC Page Ref: 88

Topic: An Overview of Treatment

Skill: Conceptual

Objective:

62) Drugs that block dopamine receptors are most likely to be used to 62) _____

- A) distort perception. B) stabilize mood.
C) alleviate depression. D) decrease the intensity of hallucinations.

Answer: D

Diff: 2 Type: MC Page Ref: 88

Topic: Pharmacological Approaches to Treatment/Antipsychotic Drugs

Skill: Factual

Objective:

- 63) The conventional antipsychotic drugs have a problematic side effect involving abnormal movement. This side effect is called _____
A) monoamine oxidase. B) agranulocytosis.
C) atypical neuroleptics. D) tardive dyskinesia.
Answer: D
Diff: 1 Type: MC Page Ref: 89
Topic: Pharmacological Approaches to Treatment/Antipsychotic Drugs
Skill: Factual
Objective:
- 64) A major advantage of the atypical antipsychotic drugs is that _____
A) they have a low risk of movement related side effects.
B) they work better than the conventional ones.
C) they work for more people than the conventional ones.
D) they last longer than the conventional ones.
Answer: A
Diff: 2 Type: MC Page Ref: 89
Topic: Pharmacological Approaches to Treatment/Antipsychotic Drugs
Skill: Factual
Objective:
- 65) Prozac is a _____
A) monoamine oxidase inhibitor. B) GABA agonist.
C) selective serotonin reuptake inhibitor. D) neuroleptic.
Answer: C
Diff: 1 Type: MC Page Ref: 90
Topic: Pharmacological Approaches to Treatment/Antidepressant Drugs
Skill: Factual
Objective:
- 66) Why are the SSRIs the most commonly used antidepressants today? _____
A) They are not addictive.
B) Their side effects are more tolerable than those of the first generation antidepressants.
C) They are more effective than the classic tricyclic antidepressants.
D) Because they only have minimal effects on dopamine, they are less likely to produce side effects.
Answer: B
Diff: 1 Type: MC Page Ref: 90
Topic: Pharmacological Approaches to Treatment/Antidepressant Drugs
Skill: Factual
Objective:
- 67) Julia has just been prescribed a monoamine oxidase inhibitor to treat her depression. What warning should her doctor give her? _____
A) You may find that you can't achieve orgasm.
B) Stay out of the sun.
C) Don't try to drive a car.
D) Be careful what you eat.
Answer: D
Diff: 1 Type: MC Page Ref: 92
Topic: Pharmacological Approaches to Treatment/Antidepressant Drugs
Skill: Applied
Objective:
- 68) The time course of the effects of antidepressant medications suggests that _____
A) changes in cellular functioning are necessary to alleviate the symptoms of depression.
B) low dopamine levels are the underlying problem in depression.
C) the effectiveness of the TCAs and SSRIs is largely a placebo effect.
D) altered synaptic activity is not the source of a depressed mood state.

Answer: A

Diff: 2 Type: MC

Page Ref: 92

Topic: Pharmacological Approaches to Treatment/Antidepressant Drugs

Skill: Conceptual

Objective:

- 69) Because much of Donald's depression is a result of his lack of a healthy sexual relationship with his wife, Dr. Jones figured that the best drug to treat him with would be 69) _____

A) Prozac.

B) Zoloft.

C) Welbutrin.

D) Chlorpromazine.

Answer: C

Diff: 2 Type: MC

Page Ref: 93

Topic: Pharmacological Approaches to Treatment/Antidepressant Drugs

Skill: Applied

Objective:

- 70) Psychological and physiological dependence is a well-documented danger of using 70) _____

A) lithium.

B) neuroleptics.

C) antipsychotics.

D) anxiolytics.

Answer: D

Diff: 1 Type: MC

Page Ref: 93

Topic: Pharmacological Approaches to Treatment/Antianxiety Drugs

Skill: Factual

Objective:

- 71) Which of the following is NOT a problem with the benzodiazepines? 71) _____

A) psychological dependence

B) risk of withdrawal symptoms if the patient stops them suddenly

C) tardive dyskinesia

D) high relapse rates when stopped

Answer: C

Diff: 2 Type: MC

Page Ref: 93

Topic: Pharmacological Approaches to Treatment/Antianxiety Drugs

Skill: Factual

Objective:

- 72) Valium exerts its anxiolytic effects by increasing the activity of 72) _____

A) dopamine.

B) GABA.

C) epinephrine.

D) acetylcholine.

Answer: B

Diff: 1 Type: MC

Page Ref: 93

Topic: Pharmacological Approaches to Treatment/Antianxiety Drugs

Skill: Factual

Objective:

- 73) Oscar has been prescribed the following drugs over the years: Valium, Serax, Xanax, and Ativan. We can guess that Oscar has had problems with 73) _____

A) mood swings.

B) depression and anger control.

C) positive symptom schizophrenia.

D) anxiety and insomnia.

Answer: D

Diff: 1 Type: MC

Page Ref: 93

Topic: Pharmacological Approaches to Treatment/Antianxiety Drugs

Skill: Applied

Objective:

- 74) Suzanne is taking a benzodiazepine to treat her anxiety. She should be concerned that _____ 74) _____
- A) when taken in high dosages, the drugs have potentially serious effects on a woman's reproductive ability.
 - B) she may become physically dependent on the drug.
 - C) while her anxiety is likely to be diminished, her adaptive behaviors also are likely to become impaired.
 - D) mania is a relatively common side effect.

Answer: B

Diff: 1 Type: MC Page Ref: 93

Topic: Pharmacological Approaches to Treatment/Antianxiety Drugs

Skill: Applied

Objective:

- 75) While most antianxiety drugs act on _____, Buspar acts primarily on _____. 75) _____
- A) serotonin; GABA
 - B) GABA; serotonin
 - C) GABA; epinephrine
 - D) serotonin; epinephrine

Answer: B

Diff: 2 Type: MC Page Ref: 94

Topic: Pharmacological Approaches to Treatment/Antianxiety Drugs

Skill: Factual

Objective:

- 76) The new antianxiety drug Buspar has the advantage that _____ 76) _____
- A) it works faster than the other drugs.
 - B) it has a low potential for abuse.
 - C) it works on more anxiety disorders than the other drugs.
 - D) it works better than other antianxiety drugs.

Answer: B

Diff: 2 Type: MC Page Ref: 94

Topic: Pharmacological Approaches to Treatment/Antianxiety Drugs

Skill: Factual

Objective:

- 77) The use of lithium in the United States was delayed due to _____ 77) _____
- A) the stigma associated with mental illness.
 - B) the fact that it could not be patented.
 - C) its addiction potential.
 - D) a lack of evidence to demonstrate that it was effective.

Answer: B

Diff: 1 Type: MC Page Ref: 94

Topic: Pharmacological Approaches/Lithium & Other Mood Stabilizers

Skill: Factual

Objective:

- 78) Lithium was once used _____ 78) _____
- A) to alleviate constipation.
 - B) as a salt substitute.
 - C) as an appetite suppressant.
 - D) to treat anxiety.

Answer: B

Diff: 1 Type: MC Page Ref: 94

Topic: Pharmacological Approaches/Lithium & Other Mood Stabilizers

Skill: Factual

Objective:

- 79) The main use of lithium is for _____ 79) _____
- A) major depressive disorder.
 - B) personality disorders.
 - C) anxiety disorders.
 - D) bipolar disorder.

Answer: D

Diff: 1 Type: MC Page Ref: 94
Topic: Pharmacological Approaches/Lithium & Other Mood Stabilizers
Skill: Factual
Objective:

- 80) For bipolar patients, the risk of relapse after discontinuing lithium is 80) _____
- A) not much higher than when people remain on the medication.
 - B) roughly 50 percent within six months.
 - C) extremely unlikely.
 - D) about 15 percent, but only for people who have experienced repeated bouts with mania.

Answer: B

Diff: 1 Type: MC Page Ref: 95
Topic: Pharmacological Approaches/Lithium & Other Mood Stabilizers
Skill: Factual
Objective:

- 81) The process by which lithium reduces the likelihood of mood swings 81) _____
- A) is a combination of re-uptake inhibition and receptor site blockades among serotonin and dopamine tracts.
 - B) involves changes in stress hormones including cortisol.
 - C) is unknown at this time.
 - D) alters GABA levels, although exactly how it does this is unknown.

Answer: C

Diff: 2 Type: MC Page Ref: 95
Topic: Pharmacological Approaches/Lithium & Other Mood Stabilizers
Skill: Factual
Objective:

- 82) A doctor prescribing lithium should NEVER say: 82) _____
- A) "In order for this drug to work, you need to take quantities that are within the range of potentially dangerous side effects."
 - B) "We are going to 'target dose' your lithium: when you feel symptoms coming on, take your medication."
 - C) "Along with the benefits of mood stabilization you may experience increased thirst and weight gain along with a sense of lethargy."
 - D) "This drug has a narrow range of effectiveness, so you need to have your blood levels monitored often."

Answer: B

Diff: 2 Type: MC Page Ref: 95
Topic: Pharmacological Approaches/Lithium & Other Mood Stabilizers
Skill: Applied
Objective:

- 83) What do lithium carbonate, carbamazepine (Tegretol), and valproate (Depakote) have in common? 83) _____
- A) They are benzodiazepines.
 - B) They are atypical antipsychotic drugs.
 - C) They are all mood stabilizing drugs.
 - D) They are used in the treatment of anxiety disorders.

Answer: C

Diff: 1 Type: MC Page Ref: 95
Topic: Pharmacological Approaches/Lithium & Other Mood Stabilizers
Skill: Factual
Objective:

- 84) The use of electroconvulsive therapy can be traced to 84) _____
- A) the recognition that electricity could be used to alter brain chemistry.
 - B) the use of electrical shock as an instrument of torture.
 - C) the belief that schizophrenia and epilepsy are never comorbid disorder.
 - D) the observation that people were rarely depressed after being struck by lightning.

Answer: C

Diff: 1 Type: MC Page Ref: 95

Topic: Electroconvulsive Therapy

Skill: Factual

Objective:

85) ECT has been found to be an effective treatment for

A) schizophrenia.

C) epilepsy.

B) depression.

D) anxiety disorders.

85) _____

Answer: A

Diff: 1 Type: MC Page Ref: 96

Topic: Electroconvulsive Therapy

Skill: Factual

Objective:

86) Sarah has just received her first treatment of electroconvulsive therapy. She is most likely to

A) feel more clearheaded and less depressed following the first two to three sessions.

B) experience amnesia and confusion for an hour after the treatment.

C) experience auditory hallucinations for a brief time afterward.

D) suffer tonic and clonic seizures over the next week.

86) _____

Answer: B

Diff: 1 Type: MC Page Ref: 96

Topic: Electroconvulsive Therapy

Skill: Applied

Objective:

87) Which of the following would be the most likely candidate for ECT?

A) a thirty-year-old man who has generalized anxiety disorder

B) a middle-aged depressed woman who has just begun taking antidepressants

C) a pregnant and depressed twenty-five-year-old

D) a twenty-two-year-old schizophrenic

87) _____

Answer: C

Diff: 2 Type: MC Page Ref: 96

Topic: Electroconvulsive Therapy

Skill: Applied

Objective:

88) A Nobel Prize winning treatment for schizophrenia was

A) ECT.

C) token economies.

B) prefrontal lobotomies.

D) the SSRIs.

88) _____

Answer: B

Diff: 2 Type: MC Page Ref: 97

Topic: Neurosurgery

Skill: Factual

Objective:

89) In the mid-1900s, prefrontal lobotomies were popular as a treatment because

A) they worked faster than any other treatment.

B) there weren't many other available treatments.

C) they worked so well.

D) they worked for so many disorders.

89) _____

Answer: B

Diff: 2 Type: MC Page Ref: 97

Topic: Neurosurgery

Skill: Conceptual

Objective:

- 90) Today, neurosurgery _____
A) is still used, including prefrontal lobotomies, on patients who haven't responded to any other treatment.
B) is done frequently for certain types of psychological illnesses, such as obsessive compulsive disorder.
C) is used as a last resort and involves the destruction of only tiny areas of the brain.
D) is no longer done for any psychological disorder.

Answer: C

Diff: 2 Type: MC Page Ref: 97

Topic: Neurosurgery

Skill: Factual

Objective:

- 91) Behavior therapy is based on the belief that _____
A) internal states, such as thoughts and feelings, are not as important as overt behavior.
B) thoughts influence behavior and thoughts can be changed.
C) abnormal behavior is learned the same ways as normal behavior and can be unlearned.
D) medications cause more harm than good.

Answer: C

Diff: 2 Type: MC Page Ref: 97

Topic: Psychological Approaches to Treatment/Behavior Therapy

Skill: Conceptual

Objective:

- 92) Dr. Hart says, "For me, the goal of treatment is not to uncover inner conflicts, but to help the client achieve adaptive responses that he or she can control and maintain through self-monitoring." Dr. Hart probably considers herself a _____ therapist. _____
A) behavior
B) psychodynamically-oriented
C) family systems
D) humanistic

Answer: A

Diff: 1 Type: MC Page Ref: 97

Topic: Psychological Approaches to Treatment/Behavior Therapy

Skill: Applied

Objective:

- 93) Which of the following is a form of behavior therapy that is commonly used in the treatment of anxiety disorders? _____
A) systematic desensitization
B) stress-inoculation therapy
C) Gestalt therapy
D) rational emotive behavior therapy

Answer: A

Diff: 1 Type: MC Page Ref: 97

Topic: Psychological Approaches to Treatment/Behavior Therapy

Skill: Factual

Objective:

- 94) Punishment is a component of _____
A) EMDR therapy.
B) aversion therapy.
C) modeling.
D) systematic desensitization.

Answer: B

Diff: 1 Type: MC Page Ref: 98

Topic: Psychological Approaches to Treatment/Behavior Therapy

Skill: Factual

Objective:

- 95) The use of drugs that have noxious effects and viewing movies that elicit disgust are both techniques associated with _____ 95) _____
 A) guided exposure therapy. B) token economies.
 C) EMDR therapy. D) aversion therapy.
 Answer: D
 Diff: 1 Type: MC Page Ref: 98
 Topic: Psychological Approaches to Treatment/Behavior Therapy
 Skill: Factual
 Objective:
- 96) Yuko is painfully shy. Her therapist first shows her appropriate social skills so she can interact competently with others. Then Yuko attempts the same behavior while getting feedback. This illustrates the behavior therapy technique called _____ 96) _____
 A) contingency management. B) modeling.
 C) covert sensitization. D) guided exposure.
 Answer: B
 Diff: 2 Type: MC Page Ref: 98
 Topic: Psychological Approaches to Treatment/Behavior Therapy
 Skill: Applied
 Objective:
- 97) A token economy is _____ 97) _____
 A) a form of imaginal exposure therapy. B) a type of contingency management.
 C) a type of in vivo exposure therapy. D) a form of modeling therapy.
 Answer: B
 Diff: 2 Type: MC Page Ref: 99
 Topic: Psychological Approaches to Treatment/Behavior Therapy
 Skill: Factual
 Objective:
- 98) Dennis has disorganized type of schizophrenia. He has lived in an institution for years. He rarely shows any attempt at socializing. A new program is started: every time Dennis speaks to another person he is given a piece of red paper. At the end of each week, he can use the red papers to get cigarettes or extra privileges. This new program is _____ 98) _____
 A) guided exposure. B) an in vivo exposure program.
 C) a token economy. D) modeling.
 Answer: C
 Diff: 2 Type: MC Page Ref: 99
 Topic: Psychological Approaches to Treatment/Behavior Therapy
 Skill: Applied
 Objective:
- 99) While _____ can be used in treatment, it also a means by which problematic behaviors are acquired. _____ 99) _____
 A) modeling B) systematic desensitization
 C) imaginal exposure D) contingency management
 Answer: A
 Diff: 1 Type: MC Page Ref: 99
 Topic: Psychological Approaches to Treatment/Behavior Therapy
 Skill: Conceptual
 Objective:
- 100) Lawrence, a hypochondriac, gains a great deal of attention from his family when he complains about health problems; they tend to ignore him when he talks about other topics. A behavior therapist has instructed the family to reverse these responses: ignore the complaints and reinforce other topics. What kind of treatment does this best illustrate? _____ 100) _____
 A) systematic desensitization B) contingency management
 C) aversion therapy D) guided exposure

Answer: B

Diff: 2 Type: MC

Page Ref: 99

Topic: Psychological Approaches to Treatment/Behavior Therapy

Skill: Applied

Objective:

- 101) The text reported the case of a three-year-old autistic boy who was reinforced initially for picking up eyeglass frames, then for holding them, then for carrying them around, and then for putting the frames on his head. This is an example of 101) _____
- A) aversion therapy. B) extinction.
C) modeling. D) response shaping.

Answer: D

Diff: 1 Type: MC

Page Ref: 99

Topic: Psychological Approaches to Treatment/Behavior Therapy

Skill: Applied

Objective:

- 102) Which of the following is NOT an advantage of behavior therapy? 102) _____
- A) It targets specific behaviors.
B) It usually achieves results in a relatively short period of time.
C) The principles employed have been scientifically validated.
D) It works well if a problem is vague and ill-defined.
- D

Answer:

Diff: 1 Type: MC

Page Ref: 99

Topic: Psychological Approaches to Treatment/Behavior Therapy

Skill: Factual

Objective:

- 103) For which client is behavior therapy most likely to be effective? 103) _____
- A) Angela, who has a variety of personality disorders.
B) Tamara, who is trying to understand the origins of her personality.
C) Colin, who is struggling with vague concerns about his career and marital prospects.
D) Wilson, whose complaint is premature ejaculation.

Answer: D

Diff: 1 Type: MC

Page Ref: 99

Topic: Psychological Approaches to Treatment/Behavior Therapy

Skill: Applied

Objective:

- 104) Cognitive-behavioral therapy 104) _____
- A) suggests that the therapist should take a less active role than is typically the case in behavior therapies.
B) assumes that cognitive processes influence emotion, motivation, and behavior.
C) assumes that behavior must change before cognitive changes can occur.
D) denies the importance of reinforcement and punishment.

Answer: B

Diff: 1 Type: MC

Page Ref: 99

Topic: Psychological Approaches/Cognitive & Cognitive-Behavioral

Skill: Conceptual

Objective:

- 105) The basic assumption of cognitive-behavior therapy is 105) _____
- A) people have the freedom and responsibility to control their own lives.
B) abnormal behavior is learned like normal behavior and can be unlearned.
C) problems develop because a person views themselves and their world in biased ways.
D) only observable behaviors can really be changed.

Answer: C

Diff: 1 Type: MC

Page Ref: 99

Topic: Psychological Approaches/Cognitive & Cognitive-Behavioral

Skill: Conceptual

Objective:

- 106) Abby is participating in cognitive-behavioral therapy to treat her depression. Her therapist _____ 106) _____
- A) will help her conduct "experiments" to test a variety of hypotheses about the accuracy of her cognitions.
 - B) will use empathy and accurate reflection so that Abby will come to accept the ways she interprets her experience.
 - C) will demonstrate ways of acting and then ask her to imitate these.
 - D) will be nondirective in helping her change.

Answer: A

Diff: 2 Type: MC

Page Ref: 100

Topic: Psychological Approaches/Cognitive & Cognitive-Behavioral

Skill: Applied

Objective:

- 107) Dr. Lucas says to a client with anxiety disorders, "It is your unrealistic beliefs and perfectionist values that cause you to be so anxious, not the events of your life." Dr. Lucas probably supports the assumptions of _____ therapy. 107) _____
- A) rational emotive behavior
 - B) psychodynamic
 - C) humanistic
 - D) systematic desensitization
- A

Answer:

Diff: 1 Type: MC

Page Ref: 100

Topic: Psychological Approaches/Cognitive & Cognitive-Behavioral

Skill: Applied

Objective:

- 108) According to rational-emotive behavior therapy, which of the following is one of the irrational beliefs at the core of psychological maladjustment? 108) _____
- A) One should do everything possible, within one's means, to live a fulfilling life.
 - B) It is undesirable when things are not the way we would like them to be.
 - C) Moderation in all activities leads to greater long-term satisfaction.
 - D) One should be thoroughly competent and intelligent in all respects.

Answer: D

Diff: 2 Type: MC

Page Ref: 100

Topic: Psychological Approaches/Cognitive & Cognitive-Behavioral

Skill: Applied

Objective:

- 109) In Beck's cognitive therapy, an early "homework" assignment would be _____ 109) _____
- A) intentionally facing situations that one believes are emotionally overwhelming.
 - B) listing one's beliefs about one's competencies.
 - C) recording one's automatic thoughts and their associated emotional reactions.
 - D) learning to relax.

Answer: C

Diff: 1 Type: MC

Page Ref: 100

Topic: Psychological Approaches/Cognitive & Cognitive-Behavioral

Skill: Conceptual

Objective:

- 110) Which of the following is an advantage of using Beck's cognitive treatment for depression, as compared to drugs? 110) _____
- A) It works quickly.
 - B) It is clearly more effective.
 - C) The changes it produces in the brain are permanent, while the effects of drugs are only temporary.
 - D) The likelihood of relapse is decreased.

Answer: D

Diff: 2 Type: MC Page Ref: 100

Topic: Psychological Approaches/Cognitive & Cognitive-Behavioral

Skill: Conceptual

Objective:

- 111) _____ therapies developed in reaction to psychodynamic and behavioral perspectives. 111) _____
- A) Object relations
 - B) Humanistic-existential
 - C) Cognitive
 - D) Family

Answer: B

Diff: 1 Type: MC Page Ref: 101

Topic: Psychological Approaches/Humanistic-Experiential Therapies

Skill: Conceptual

Objective:

- 112) Humanistic-existential therapies are based in the belief that psychopathology is a result of 112) _____
- A) early parental interactions.
 - B) lack of fulfillment.
 - C) faulty learning.
 - D) self-defeating thinking.

Answer: B

Diff: 1 Type: MC Page Ref: 101

Topic: Psychological Approaches/Humanistic-Experiential Therapies

Skill: Conceptual

Objective:

- 113) Joan was surprised that, when she went to therapy, her therapist didn't ask her questions, but just listened to her talk. She said she felt very comfortable with the therapist and felt she could say anything at all and be accepted, unlike with her critical parents. She said she could try out new ideas and the therapist was always warm and nonjudgmental. Joan was probably in 113) _____
- A) rational emotive therapy.
 - B) systematic desensitization.
 - C) client-centered therapy.
 - D) psychodynamic therapy.

Answer: C

Diff: 1 Type: MC Page Ref: 101

Topic: Psychological Approaches/Humanistic-Experiential Therapies

Skill: Applied

Objective:

- 114) According to the views of Carl Rogers, how should children be raised? 114) _____
- A) Children should be raised in groups and permitted to develop their own unique society.
 - B) Parents are responsible for shaping their children into responsible adults.
 - C) They should be permitted to blossom into the people they are destined to be.
 - D) They should be raised with strict rules and much guidance.

Answer: C

Diff: 1 Type: MC Page Ref: 101

Topic: Psychological Approaches/Humanistic-Experiential Therapies

Skill: Applied

Objective:

- 115) In contrast to most other forms of therapy, the client-centered therapist 115) _____
- A) helps make the client's unconscious concerns conscious.
 - B) focuses on present concerns rather than past problems.
 - C) does not give answers or interpretations nor even steers the client onto certain topics.
 - D) teaches a new set of beliefs and values so the client can cope more effectively.

Answer: C

Diff: 1 Type: MC Page Ref: 102

Topic: Psychological Approaches/Humanistic-Experiential Therapies

Skill: Factual

Objective:

- 116) Key ideas in Gestalt therapy are 116) _____
- A) empathy, genuineness, and unconditional positive regard.
 - B) integration of mind and body, dream interpretation, and emotional impasse.
 - C) irrational beliefs, interpersonal conflicts, and unconscious impulses.
 - D) genetics, early childhood training and social stressors.

Answer: B

Diff: 2 Type: MC Page Ref: 102

Topic: Psychological Approaches/Humanistic-Experiential Therapies

Skill: Conceptual

Objective:

- 117) Process-experiential therapy is a combination of 117) _____
- A) cognitive behavioral therapy and psychodynamic therapy.
 - B) client-centered therapy and Gestalt therapy.
 - C) cognitive behavioral therapy and Gestalt therapy.
 - D) behavior therapy and client-centered therapy.

Answer: B

Diff: 2 Type: MC Page Ref: 102

Topic: Psychological Approaches/Humanistic-Experiential Therapies

Skill: Factual

Objective:

- 118) The focus of process-experiential therapy is 118) _____
- A) having clients test their dysfunctional beliefs.
 - B) experiencing of emotions during therapy.
 - C) directly challenging clients' dysfunctional beliefs.
 - D) exposure of clients to things they fear.

Answer: B

Diff: 1 Type: MC Page Ref: 102

Topic: Psychological Approaches/Humanistic-Experiential Therapies

Skill: Factual

Objective:

- 119) Which of the following is a criticism of humanistic-experiential therapies? 119) _____
- A) impersonal approach
 - B) goals are not clear
 - C) too focused on behavior
 - D) too much emphasis on early experiences

Answer: B

Diff: 1 Type: MC Page Ref: 103

Topic: Psychological Approaches/Humanistic-Experiential Therapies

Skill: Conceptual

Objective:

- 120) Dr. Patel says this about his goals in therapy: "I want my patients to become aware of their repressed memories from childhood and come to terms with them in the light of adult realities." Dr. Patel most likely prefers _____ therapy. 120) _____
- A) gestalt
 - B) psychodynamic
 - C) cognitive
 - D) flooding

Answer: B

Diff: 1 Type: MC Page Ref: 103

Topic: Psychological Approaches/Psychodynamic Therapies

Skill: Applied

Objective:

- 121) A psychotherapist says to her client, "Say whatever comes to your mind, no matter how strange or painful it may seem." The psychotherapist is encouraging _____ 121) _____
- A) resistance.
 - B) counter-transference.
 - C) free association.
 - D) transference.
- Answer: C
Diff: 2 Type: MC Page Ref: 104
Topic: Psychological Approaches/Psychodynamic Therapies
Skill: Applied
Objective:
- 122) The technique of free association is designed to _____ 122) _____
- A) help the client feel understood and not judged.
 - B) explore unconscious and preconscious material.
 - C) keep the client in the present.
 - D) help the client fully experience their emotions during therapy.
- Answer: B
Diff: 2 Type: MC Page Ref: 104
Topic: Psychological Approaches/Psychodynamic Therapies
Skill: Conceptual
Objective:
- 123) Jack tells his therapist about a dream in which he struggles to drive a car that takes him in directions he does not want to go. The therapist interprets the dream to mean that Jack is trying to get control of his career future but feels he is being controlled by others. This suggests that the _____ 123) _____
- A) latent content of the dream is the story of trying to drive the car.
 - B) manifest content of the dream is the story of trying to drive the car.
 - C) latent content of the dream is impossible to determine.
 - D) manifest content of the dream is the issue of Jack's career future.
- Answer: B
Diff: 2 Type: MC Page Ref: 104
Topic: Psychological Approaches/Psychodynamic Therapies
Skill: Applied
Objective:
- 124) Freud called dreams "the royal road to the unconscious" because _____ 124) _____
- A) he believed people would only tell him about unimportant dreams, so he could dismiss the topics they brought up.
 - B) he believed people intentionally dreamed about material they wanted to discuss in therapy but were afraid to.
 - C) he believed they kept people from uncovering their true feelings.
 - D) he believed defenses were lowered during sleep and repressed material would start to come out in dreams.
- Answer: D
Diff: 2 Type: MC Page Ref: 104
Topic: Psychological Approaches/Psychodynamic Therapies
Skill: Conceptual
Objective:
- 125) According to psychoanalysts, what is the therapist's task when doing dream analysis? _____ 125) _____
- A) Explain that the latent and manifest content have little to do with one another.
 - B) Uncover the disguised meanings of the manifest content.
 - C) Overcome the client's natural tendency to resist change.
 - D) Reduce the client's tendency to use transference when he/she remembers a dream.

Answer: B

Diff: 1 Type: MC Page Ref: 104
Topic: Psychological Approaches/Psychodynamic Therapies
Skill: Factual
Objective:

- 126) Which of the following best illustrates the analysis of resistance? 126) _____
- A) noting that the client is able to talk freely about his mother but not report anything about his father
 - B) asking the client to say whatever comes into his/her head, regardless of how silly it sounds
 - C) reminding a client who has become insulting toward a female therapist that she is, after all, a helping professional and not the client's abusive mother
 - D) explaining that a dream about riding a wild horse in a tunnel suggests strong sexual urges

Answer: A

Diff: 2 Type: MC Page Ref: 104
Topic: Psychological Approaches/Psychodynamic Therapies
Skill: Applied
Objective:

- 127) A son of a critical father comes to therapy one day and with no provocation is extremely hostile in his remarks to the therapist. The therapist might consider that _____ is occurring. 127) _____
- A) countertransference
 - B) resistance
 - C) free association
 - D) transference

Answer: D

Diff: 1 Type: MC Page Ref: 104
Topic: Psychological Approaches/Psychodynamic Therapies
Skill: Applied
Objective:

- 128) How has psychodynamic therapy changed over time? 128) _____
- A) It differs little from client-centered therapy.
 - B) It focuses on all relationships, not just early experiences.
 - C) Many elements of behavior therapy have been incorporated.
 - D) Transference is no longer used.

Answer: B

Diff: 2 Type: MC Page Ref: 105
Topic: Psychological Approaches/Psychodynamic Therapies
Skill: Conceptual
Objective:

- 129) Psychodynamic interpersonally oriented therapies agree with classical psychoanalysis in the importance of 129) _____
- A) the transformation of sexual energy into neurotic behaviors.
 - B) understanding the present in terms of the past.
 - C) focusing on the transference neurosis.
 - D) the therapist being passive and impersonal.

Answer: B

Diff: 1 Type: MC Page Ref: 105
Topic: Psychological Approaches/Psychodynamic Therapies
Skill: Factual
Objective:

- 130) A quantitative analysis of 26 efficacy studies of brief psychodynamic psychotherapy found that 130) _____
- A) the interpersonal forms of treatment are among the least useful.
 - B) those which stress traditional psychoanalytic principles have the highest degree of success.
 - C) results of this therapy are largely unsuccessful.
 - D) results of this therapy are quite impressive.

Answer: D

Diff: 1 Type: MC Page Ref: 106
Topic: Psychological Approaches/Psychodynamic Therapies
Skill: Factual
Objective:

- 131) Traditional behavioral couples therapy _____ 131) _____
- A) tries to involve spouses in the treatment of people with severe mental disorders to prevent relapse after they are released from the hospital.
 - B) treats the couple together for any problems that only one of them have, because the couple is seen as a "system" that influences each other.
 - C) uses training in relaxation skills and imagery to reduce anxiety in couples.
 - D) uses training in communication skills and problems solving to increase caring behaviors in couples.

Answer: D

Diff: 2 Type: MC Page Ref: 106
Topic: Psychological Approaches/Marital and Family Therapy
Skill: Factual
Objective:

- 132) A clinical psychologist who said that maladaptive behaviors are shared between members of a relationship and not just the responsibility of an individual would be in harmony with therapists who take the _____ approach. 132) _____
- A) cognitive-behavioral
 - B) humanistic
 - C) classical psychoanalytic
 - D) family systems

Answer: D

Diff: 1 Type: MC Page Ref: 106
Topic: Psychological Approaches/Marital and Family Therapy
Skill: Conceptual
Objective:

- 133) One criticism of traditional behavioral couple therapy has been _____ 133) _____
- A) its focus on faulty role expectations.
 - B) the belief that keeping channels of communication open will help solve problems.
 - C) the assumption that a good marriage requires an underlying friendship.
 - D) the emphasis on change.

Answer: D

Diff: 2 Type: MC Page Ref: 106
Topic: Psychological Approaches/Marital and Family Therapy
Skill: Factual
Objective:

- 134) What lead to the development of family systems therapy? _____ 134) _____
- A) the recognition that most psychological disorders can be attributed to and cause dysfunctional relationships
 - B) the established importance of the interaction of nature and nurture in the development if all forms of psychopathology
 - C) the realization that the family environment played a role in whether or not relapse occurred
 - D) the observation that signs of mental illness often were seen in more than one family member

Answer: C

Diff: 2 Type: MC Page Ref: 106
Topic: Psychological Approaches/Marital and Family Therapy
Skill: Conceptual
Objective:

- 135) The Brady family is attending family therapy sessions. The therapist has told them, "If the whole family context changes, Marcia's problem behavior will change as well." The family therapist probably agrees with the _____ therapy approach. 135) _____
- A) behavioral family
B) structural family
C) cognitive
D) conjoint family
- Answer: B
Diff: 2 Type: MC Page Ref: 107
Topic: Psychological Approaches/Marital and Family Therapy
Skill: Applied
Objective:
- 136) In structural family therapy, 136) _____
- A) the therapist initially acts like one of the family and participates in family interactions.
B) the therapist adopts a Rogerian approach, focusing on good listening skills and clarification.
C) the therapist is very directive in order to break up the existing power structure in the family.
D) the focus is on past interactions as they have given rise to present problems.
- Answer: A
Diff: 1 Type: MC Page Ref: 107
Topic: Psychological Approaches/Marital and Family Therapy
Skill: Factual
Objective:
- 137) When asked what their orientation is, what do most of today's psychotherapists say? 137) _____
- A) cognitive-behavioral
B) eclectic
C) interpersonal
D) behavioral
- Answer: B
Diff: 1 Type: MC Page Ref: 107
Topic: Psychological Approaches/Eclecticism and Integration
Skill: Factual
Objective:
- 138) Therapy outcome studies depend on ratings of the changes seen in clients. One reason that therapists' ratings may be unreliable is because 138) _____
- A) they have a limited range of clients on whom to compare an individual client's improvement.
B) they usually base their judgments on superficial personality tests.
C) they are not in a good position to compare behavior before and after treatment.
D) they cannot see the client's behavior in a range of settings.
- Answer: D
Diff: 2 Type: MC Page Ref: 107
Topic: An Overview of Psychological Treatment/Measuring Success
Skill: Conceptual
Objective:
- 139) Which of the following would be the most objective way of evaluating treatment success? 139) _____
- A) measuring the change in selected overt behaviors
B) asking the client's family and friends to report on the progress they have observed
C) looking at the client's reports of change
D) gathering information about the therapist's impression of the changes that have occurred
- Answer: A
Diff: 1 Type: MC Page Ref: 108
Topic: An Overview of Psychological Treatment/Measuring Success
Skill: Conceptual
Objective:

- 140) The advantage of using outside independent observers or pre-post test comparisons to evaluate a client's progress is 140) _____
- A) they take less time and are less costly.
 - B) they provide a valid prediction of how the client will behave in real life.
 - C) they increase the objectivity of ratings over those given by the people involved in treatment.
 - D) they insure that there is no "regression to the mean" phenomenon.

Answer: C

Diff: 1 Type: MC Page Ref: 108

Topic: An Overview of Psychological Treatment/Measuring Success

Skill: Conceptual

Objective:

- 141) Which of the following is the most significant challenge to establishing that therapy is effective? 141) _____
- A) Many people improve without formal treatment.
 - B) Few psychotherapies are more effective than medical treatments.
 - C) It is impossible to determine what component of a treatment plan is responsible for a positive outcome.
 - D) Placebo effects commonly occur.

Answer: A

Diff: 2 Type: MC Page Ref: 108

Topic: An Overview of Psychological Treatment/Measuring Success

Skill: Conceptual

Objective:

- 142) To summarize what is known about psychotherapy effectiveness we can say that 142) _____
- A) the chances of an average client benefiting significantly are impressive.
 - B) all therapy outcomes are positive or neutral, none are negative.
 - C) for disorders that have a brief duration, treatment provides no obvious benefit.
 - D) degree of improvement and number of therapy sessions are unrelated.

Answer: A

Diff: 1 Type: MC Page Ref: 108

Topic: An Overview of Psychological Treatment/Measuring Success

Skill: Factual

Objective:

- 143) Which statement about negative outcomes in psychotherapy is accurate? 143) _____
- A) A disturbing number of negative outcomes are due to sex between client and therapist.
 - B) Nearly one-half of all therapeutic encounters are rated by clients as "negative" or "harmful."
 - C) The primary reason for negative outcomes is a lack of training and therapeutic skill on the part of the therapist.
 - D) The vast majority of negative outcomes turn out to be reported in fraudulent or frivolous lawsuits brought by clients.

Answer: A

Diff: 1 Type: MC Page Ref: 109

Topic: An Overview of Psychological Treatment/Measuring Success

Skill: Factual

Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 144) Information on history and level of functioning is likely to be more important to a clinician than applying a label to the client's condition. 144) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 71

Topic:

Skill:

Objective:

- 145) An EEG provides detailed information about brain structure and function. 145) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 73
Topic:
Skill:
Objective:
- 146) While a PET scan is more sensitive than functional MRI at detecting changes in brain function, it is less able to localize the source of altered brain activity. 146) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 73
Topic:
Skill:
Objective:
- 147) Assessing cognitive performance would be a component of a neurological assessment. 147) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 74
Topic:
Skill:
Objective:
- 148) Neuropsychological testing provides the clinician with information as to how brain damage is affecting functioning. 148) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 74
Topic:
Skill:
Objective:
- 149) Reliability in assessment means that the assessment method is truly measuring what it is supposed to measure. 149) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 75
Topic:
Skill:
Objective:
- 150) An "operational" assessment approach seeks to minimize the subjective aspects of assessment and diagnosis. 150) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 75
Topic:
Skill:
Objective:
- 151) Rating scales are used when there is a need to minimize the variability in client responses. 151) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 77
Topic:
Skill:
Objective:

- 152) The Brief Psychiatric Rating Scale is widely used for making treatment and diagnostic decisions. 152) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 77
Topic:
Skill:
Objective:
- 153) A test that assesses a person's responses to ambiguous stimuli to understand personality characteristics is called a projective test. 153) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 78
Topic:
Skill:
Objective:
- 154) The Rorschach has been criticized for not being economical. 154) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 79
Topic:
Skill:
Objective:
- 155) Unlike other projective testing methods, there is an objective and reliable method for interpreting sentence completion tests. 155) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 80
Topic:
Skill:
Objective:
- 156) The MMPI is a structured inventory for personality assessment. 156) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 80
Topic:
Skill:
Objective:
- 157) The MMPI does not control for lying and malingering. 157) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 80
Topic:
Skill:
Objective:
- 158) Lack of attention to the external situation of a client can lead to a biased assessment. 158) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 84
Topic:
Skill:
Objective:
- 159) A headache would be an example of a symptom, while a fever would be consistent with the definition of sign. 159) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 85
Topic:
Skill:
Objective:

- 160) Personality Disorders are listed on Axis I. 160) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 85
Topic:
Skill:
Objective:
- 161) Antipsychotic medications are effective in controlling the negative symptoms of schizophrenia. 161) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 88
Topic:
Skill:
Objective:
- 162) Dietary restrictions are necessary when monoamine oxidase inhibitors are used in the treatment of depression. 162) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 92
Topic:
Skill:
Objective:
- 163) The benzodiazepines work to alleviate anxiety by increasing the availability of serotonin. 163) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 93
Topic:
Skill:
Objective:
- 164) Electroconvulsive therapy has been found to be effective in the treatment of schizophrenia. 164) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 95
Topic:
Skill:
Objective:
- 165) Psychosurgery currently is used for some disorders such as obsessive compulsive disorder. 165) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 97
Topic:
Skill:
Objective:
- 166) Systematic desensitization is a form of behavior therapy commonly used in the treatment of phobias. 166) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 97
Topic:
Skill:
Objective:
- 167) Contingency management programs change reinforcement to extinguish or encourage behaviors. 167) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 99
Topic:
Skill:
Objective:

- 168) Rational emotive behavior therapy is a form of client-centered therapy. 168) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 100
Topic:
Skill:
Objective:
- 169) Beck's cognitive therapy is designed to gradually expose clients to a hierarchy of feared situations while simultaneously relaxing. 169) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 100
Topic:
Skill:
Objective:
- 170) Cognitive-behavioral therapy has been found to be at least as effective as drug therapy for most cases of depression. 170) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 101
Topic:
Skill:
Objective:
- 171) Client-centered therapy was develop by Freud. 171) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 101
Topic:
Skill:
Objective:
- 172) The primary objective of client-centered and Gestalt therapies is to help people become self-aware and self-accepting. 172) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 101-102
Topic:
Skill:
Objective:
- 173) Process-experiential therapy combines client-centered and psychodynamic therapies. 173) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 102
Topic:
Skill:
Objective:
- 174) Free association is a technique of client-centered therapy. 174) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 104
Topic:
Skill:
Objective:

175) Freudian therapists use techniques like free association and dream interpretation to tap into unconscious processes. 175) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 104
Topic:
Skill:
Objective:

176) The best measure of success in therapy is the client's perception of the changes he/she has made. 176) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 107
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

177) What is the goal of psychosocial assessment? 177) _____
Answer: The goal of psychosocial assessment is to develop an understanding of how the client functions in their social environment. The focus is on how the client interacts with their social environment, as well as the elements that are present in that environment that might need to be addressed as part of treatment.
Diff: 2 Type: SA Page Ref: 75
Topic:
Skill:
Objective:

178) What is a projective test? 178) _____
Answer: A projective test is a test designed to measure personal characteristics. Projective tests are intended to be an unstructured means of revealing what is on someone's mind. Examples of projective tests include the TAT and the Rorschach Test. Both ask the client to provide an interpretation of an ambiguous stimulus. It is assumed that the explanation provided will involve some "projection" of the client's own issues.
Diff: 1 Type: SA Page Ref: 78-79
Topic:
Skill:
Objective:

179) What are the pros and cons of projective and objective tests? 179) _____
Answer: Projective tests have great strengths—they focus on unique aspects of personality and allow for exploration of many issues. They are often hard to interpret and can be subjective and unreliable. Objective tests are very reliable and do not require subjective interpretation. But they are limited in what they cover, require the cooperation of the test-taker and may require above average reading levels.
Diff: 2 Type: SA Page Ref: 78-82
Topic:
Skill:
Objective:

180) What is validity? 180) _____
Answer: In the context of diagnosis, validity refers to the extent with which a diagnosis, a classification, provides useful information. If a label provides no meaningful information—if it offers no information with clinical utility—it is not valid.
Diff: 1 Type: SA Page Ref: 85
Topic:
Skill:
Objective:

- 181) What does a diagnostic label describe? 181) _____
Answer: When a diagnosis is given, an attempt is being made to classify the current behavioral pattern and level of functioning that is observed. Diagnosis of a psychiatric condition is made based on the information that is obtained during the assessment process, thus a label serves to summarize what has been observed. Diagnostic labels do not describe people or underlying pathological conditions, as is often presumed.
Diff: 2 Type: SA Page Ref: 85
Topic:
Skill:
Objective:
- 182) What are two problems with diagnostic labeling? 182) _____
Answer: People, including professionals, may just accept the label as a complete description of a person and not inquire further. They can keep people from evaluating the person with the label in an objective manner. They can unfairly influence clinical expectations and treatment choices. They may cause the labeled person to lose morale and self-esteem.
Diff: 2 Type: SA Page Ref: 87
Topic:
Skill:
Objective:
- 183) What is tardive dyskinesia? 183) _____
Answer: Tardive dyskinesia is a movement disorder that can develop with use of conventional antipsychotic medications.
Diff: 1 Type: SA Page Ref: 89
Topic:
Skill:
Objective:
- 184) What is aversion therapy? Explain and provide an example of how it might be used. 184) _____
Answer: Aversion therapy is a form of therapy that is used to reduce a behavior through associating it with punishment. In other words, operant conditioning is used to decrease the frequency of an undesirable behavior by following it with unpleasant consequences. Aversion therapy can be used in the treatment of alcoholism. The alcoholic is treated with a drug that makes it such that they will get sick if they drink. If they drink while on the drug they get ill, thus drinking will come to be associated with the nausea and vomiting that occurs.
Diff: 1 Type: SA Page Ref: 98
Topic:
Skill:
Objective:
- 185) What is token economy? 185) _____
Answer: Token economies are one of the many applications of behavioral theory to treatment. Token economies employ the principles of operant conditioning and are used to increase the frequency of desirable behaviors. When a desired behavior occurs, some "token" is given that may then be exchanged for something of value to the patient.
Diff: 1 Type: SA Page Ref: 99
Topic:
Skill:
Objective:
- 186) What is rational emotive behavior therapy (REBT)? What kind of therapy is REBT? 186) _____
Answer: REBT is a form of cognitive-behavioral therapy. The focus of this therapy is to change an unhealthy thought process. Thus, this form of therapy is behavioral in that learning principles are used to change a behavior and it is cognitive in that the behavior to be changed is thought processes.

Diff: 1 Type: SA Page Ref: 100
Topic:
Skill:
Objective:

187) What are the main objectives of client-centered therapy?

187) _____

Answer: To help clients become able to accept and be themselves. Therapy strives to provide a climate where the client feels unconditionally accepted, understood and valued. The therapist uses only nondirective techniques.

Diff: 2 Type: SA Page Ref: 101-102
Topic:
Skill:
Objective:

188) Describe the process and purpose of Freudian dream analysis.

188) _____

Answer: During sleep, defenses are lowered and repressed material begins to come out. However, some material is so threatening it comes out in disguised form. Dreams have a manifest content, the obvious theme of the dream, and a latent content, the actual disguised motives and impulses. Analyzing the dream helps uncover the latent content.

Diff: 2 Type: SA Page Ref: 105
Topic:
Skill:
Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

189) Compare and contrast the following: MRIs, PET scans and fMRI.

Answer: The MRI measures variations in magnetic fields. It then computes and depicts cross sections of organs such as the brain with great clarity. It is noninvasive and allows for visualization of all but the tiniest brain structures. Its major problem is the claustrophobic reaction some people have to the procedure. PET scans track substances as they are metabolized by the brain. They can show how the brain is functioning. They can help identify areas that aren't functioning normally that might not be obvious anatomically. Their major problem is low-fidelity pictures which have so far limited their value. The fMRI measures changes in blood flow in the brain. It is possible to map ongoing psychological activity and show which areas of the brain are involved in different activities. However, like MRIs these are very sensitive to movement, which can cause false results. Also fMRIs are often very hard to interpret.

GRADING RUBRIC: 10 points

Diff: 2 Type: ES Page Ref: 73-74
Topic:
Skill:
Objective:

190) Discuss some of the ethical issues that must be kept in mind when evaluating assessment findings.

Answer: In the assessment process, information is gathered about the client. A variety of testing procedures may be employed, addressing both the physical and psychosocial status of the client. Assessment data are then used to plan or alter treatment plans. Such data, however, must be interpreted and the limitations of both the test instruments and the clinician need to be considered during this process. Cultural bias, for example, may be introduced by either a testing instrument or the clinician. In addition, the clinician may tend to interpret information in a manner that is consistent with his or her theoretical orientation, as opposed to striving to take a more objective view of the information presented. There may also be a tendency to focus on the client, as opposed to recognizing that the presenting symptoms may be more of a reflection of environmental circumstances, as opposed to some internal process. It also must be recognized that not all assessment procedures have been validated and that, in the end, more data may be needed to truly understand the client and his or her condition. The evaluation of assessment data is ultimately a subjective process, requiring caution to limit potential errors.

GRADING RUBRIC: 6 points total, 2 for each of 3 issues.

Diff: 1 Type: ES Page Ref: 83-84
Topic:
Skill:
Objective:

191) Discuss and describe the five axes of the DSM. Why are five axes necessary?

Answer: Axis I includes the disorders for which treatment is usually sought, conditions such as depression and panic disorder. But describing a client with this diagnostic label alone is not sufficient, other disorders may be present and an Axis I designation does not provide any information about how the client is currently functioning. Thus, while an Axis I condition may be the presenting condition, it is important to also determine whether a personality disorder or other lasting condition is present (Axis II), as well as any medical conditions (Axis III). While Axes I, II, and III describe psychological and physical status, they do not address the nature of the environment in which the client must function (Axis IV), nor do they address how the client is currently functioning (Axis V). Thus, in order to develop an effective treatment plan, all 5 axes are needed.

GRADING RUBRIC: 12 points total, 2 for each axis + 2 for explaining why all are needed.

Diff: 1 Type: ES Page Ref: 85-86
Topic:
Skill:
Objective:

192) Describe Beck's cognitive theory and therapy.

Answer: This is an information processing model of psychopathology. Problems come from the biased processing of external events or internal stimuli. These biases distort the ways people make sense of their world, leading to cognitive errors. Underlying the bias are schemas that contain dysfunctional beliefs. When these schemas become activated they bias how the person processes information. For example, in depression, people tend to make negative interpretations about themselves, their world and their future. In therapy, clients are made aware of the connection between thinking and emotional response. They are taught to identify their automatic thoughts, the logical errors in thinking they are making and how to challenge their validity. Clients are encouraged to gather information on their own and test their beliefs as hypotheses.

GRADING RUBRIC: 10 points, 5 for theory, 5 for therapy.

Diff: 2 Type: ES Page Ref: 100
Topic:
Skill:
Objective:

193) Discuss the techniques used in psychodynamic therapy. What is the goal of such therapy and how has it changed over time?

Answer: The goal of psychodynamic therapy is to reveal the unconscious by using numerous techniques designed to reveal that which one may or may not be aware of. Classical psychoanalysis is an intensive and long-term process that is rarely practiced today. Psychoanalytically oriented psychotherapies are more common today. These employ many of the same approaches as classical psychoanalysis, but focus more on interpersonal considerations. While the classical psychoanalyst would focus on early relationships, the more modern psychotherapist would look at how those early relationships impact today's interactions. Some psychodynamic techniques are free association, analysis of dreams, analysis of resistance, and analysis of transference. In free association, the client is asked to say whatever comes to mind - to speak without thinking. When dreams are analyzed, the therapist looks past the dream as remember and interprets the hidden meaning of the dream. All of these techniques are designed to aid the client in developing an awareness of that which lurks in his or her unconscious.

GRADING RUBRIC: 8 points total - 2 points each to name and describe 2 techniques - 4 points, explain change in psychoanalysis over time - 2 points, explanation of goal of therapy - 2 points.

Diff: 2 Type: ES Page Ref: 103-105
Topic:
Skill:
Objective:

194) Discuss three different ways that the success of therapy can be assessed. What factors complicate the determination of whether or not treatment is successful?

Answer: In order to determine whether or not treatment has been effective, some change needs to have occurred. Thus, some measure to effectiveness is needed, as well as a source of the necessary information. It should be noted, however, that sometimes people get well just with the passage of time. This must be considered when considering the effectiveness of treatment—did the treatment work, or would the person have improved without any care? Establishing whether or not improvements have occurred can be assessed with information obtained from the therapist, the client, family or friends of the client, test scores, and/or the measurement of over behavior. Clearly, a number of these information sources are likely to be biased, either for treatment success or against it. Ideally, an independent source would assess treatment success and the measures employed would be objective. Obviously, this may or may not be possible.

GRADING RUBRIC: 10 points total - 2 for each of 3 ways of measuring success, 2 for each of 2 complicating factors (time may fix problem, bias, need for valid measures, etc.)

Diff: 2 Type: ES Page Ref: 107-108

Topic:

Skill:

Objective:

- 1) D
- 2) B
- 3) A
- 4) C
- 5) B
- 6) C
- 7) A
- 8) C
- 9) C
- 10) D
- 11) A
- 12) A
- 13) C
- 14) A
- 15) D
- 16) B
- 17) D
- 18) C
- 19) B
- 20) B
- 21) B
- 22) D
- 23) A
- 24) A
- 25) D
- 26) C
- 27) A
- 28) A
- 29) C
- 30) A

- 31) C
- 32) C
- 33) C
- 34) C
- 35) A
- 36) C
- 37) D
- 38) D
- 39) B
- 40) D
- 41) B
- 42) D
- 43) B
- 44) D
- 45) D
- 46) A
- 47) C
- 48) C
- 49) A
- 50) A
- 51) B
- 52) D
- 53) A
- 54) C
- 55) B
- 56) A
- 57) A
- 58) C
- 59) C
- 60) C

- 61) D
- 62) D
- 63) D
- 64) A
- 65) C
- 66) B
- 67) D
- 68) A
- 69) C
- 70) D
- 71) C
- 72) B
- 73) D
- 74) B
- 75) B
- 76) B
- 77) B
- 78) B
- 79) D
- 80) B
- 81) C
- 82) B
- 83) C
- 84) C
- 85) A
- 86) B
- 87) C
- 88) B
- 89) B
- 90) C

- 91) C
- 92) A
- 93) A
- 94) B
- 95) D
- 96) B
- 97) B
- 98) C
- 99) A
- 100) B
- 101) D
- 102) D
- 103) D
- 104) B
- 105) C
- 106) A
- 107) A
- 108) D
- 109) C
- 110) D
- 111) B
- 112) B
- 113) C
- 114) C
- 115) C
- 116) B
- 117) B
- 118) B
- 119) B
- 120) B

- 121) C
- 122) B
- 123) B
- 124) D
- 125) B
- 126) A
- 127) D
- 128) B
- 129) B
- 130) D
- 131) D
- 132) D
- 133) D
- 134) C
- 135) B
- 136) A
- 137) B
- 138) D
- 139) A
- 140) C
- 141) A
- 142) A
- 143) A
- 144) TRUE
- 145) FALSE
- 146) FALSE
- 147) FALSE
- 148) TRUE
- 149) FALSE
- 150) TRUE

151) FALSE

152) FALSE

153) TRUE

154) TRUE

155) FALSE

156) FALSE

157) FALSE

158) TRUE

159) TRUE

160) FALSE

161) FALSE

162) TRUE

163) FALSE

164) FALSE

165) TRUE

166) TRUE

167) TRUE

168) FALSE

169) FALSE

170) TRUE

171) FALSE

172) TRUE

173) FALSE

174) FALSE

175) TRUE

176) FALSE

177) The goal of psychosocial assessment is to develop an understanding of how the client functions in their social environment. The focus is on how the client interacts with their social environment, as well as the elements that are present in that environment that might need to be addressed as part of treatment.

- 178) A projective test is a test designed to measure personal characteristics. Projective tests are intended to be an unstructured means of revealing what is on someone's mind. Examples of projective tests include the TAT and the Rorschach Test. Both ask the client to provide an interpretation of an ambiguous stimulus. It is assumed that the explanation provided will involve some "projection" of the client's own issues.
- 179) Projective tests have great strengths - they focus on unique aspects of personality and allow for exploration of many issues. They are often hard to interpret and can be subjective and unreliable. Objective tests are very reliable and do not require subjective interpretation. But they are limited in what they cover, require the cooperation of the test-taker and may require above average reading levels.
- 180) In the context of diagnosis, validity refers to the extent with which a diagnosis, a classification, provides useful information. If a label provides no meaningful information, if it offers no information with clinical utility, it is not valid.
- 181) When a diagnosis is given, an attempt is being made to classify the current behavioral pattern and level of functioning that is observed. Diagnosis of a psychiatric condition is made based on the information that is obtained during the assessment process, thus a label serves to summarize what has been observed. Diagnostic labels do not describe people or underlying pathological conditions, as is often presumed.
- 182) People, including professionals, may just accept the label as a complete description of a person and not inquire further. They can keep people from evaluating the person with the label in an objective manner. They can unfairly influence clinical expectations and treatment choices. They may cause the labeled person to lose morale and self-esteem.
- 183) Tardive dyskinesia is a movement disorder that can develop with use of conventional antipsychotic medications.
- 184) Aversion therapy is a form of therapy that is used to reduce a behavior through associating it with punishment. In other words, operant conditioning is used to decrease the frequency of an undesirable behavior by following it with unpleasant consequences. Aversion therapy can be used in the treatment of alcoholism. The alcoholic is treated with a drug that makes it such that they will get sick if they drink. If they drink while on the drug they get ill, thus drinking will come to be associated with the nausea and vomiting that occurs.
- 185) Token economies are one of the many applications of behavioral theory to treatment. Token economies employ the principles of operant conditioning and are used to increase the frequency of desirable behaviors. When a desired behavior occurs, some "token" is given that may then be exchanged for something of value to the patient.
- 186) REBT is a form of cognitive-behavioral therapy. The focus of this therapy is to change an unhealthy thought process. Thus, this form of therapy is behavioral in that learning principles are used to change a behavior and it is cognitive in that the behavior to be changed is thought processes.
- 187) To help clients become able to accept and be themselves. Therapy strives to provide a climate where the client feels unconditionally accepted, understood and valued. The therapist uses only nondirective techniques.
- 188) During sleep, defenses are lowered and repressed material begins to come out. However, some material is so threatening it comes out in disguised form. Dreams have a manifest content, the obvious theme of the dream, and a latent content, the actual disguised motives and impulses. Analyzing the dream helps uncover the latent content.
- 189) The MRI measures variations in magnetic fields. It then computes and depicts cross sections of organs such as the brain with great clarity. It is noninvasive and allows for visualization of all but the tiniest brain structures. Its major problem is the claustrophobic reaction some people have to the procedure. PET scans track substances as they are metabolized by the brain. They can show how the brain is functioning. They can help identify areas that aren't functioning normally that might not be obvious anatomically. Their major problem is low-fidelity pictures which have so far limited their value. The fMRI measures changes in blood flow in the brain. It is possible to map ongoing psychological activity and show which areas of the brain are involved in different activities. However, like MRIs these are very sensitive to movement, which can cause false results. Also fMRIs are often very hard to interpret.
- GRADING RUBRIC: 10 points
- 190) In the assessment process, information is gathered about the client. A variety of testing procedures may be employed, addressing both the physical and psychosocial status of the client. Assessment data are then used to plan or alter treatment plans. Such data, however, must be interpreted and the limitations of both the test instruments and the clinician need to be considered during this process. Cultural bias, for example, may be introduced by either a testing instrument or the clinician. In addition, the clinician may tend to interpret information in a manner that is consistent with his or her theoretical orientation, as

opposed to striving to take a more objective view of the information presented. There may also be a tendency to focus on the client, as opposed to recognizing that the presenting symptoms may be more of a reflection of environmental circumstances, as opposed to some internal process. It also must be recognized that not all assessment procedures have been validated and that, in the end, more data may be needed to truly understand the client and his or her condition. The evaluation of assessment data is ultimately a subjective process, requiring caution to limit potential errors.

GRADING RUBRIC: 6 points total, 2 for each of 3 issues.

- 191) Axis I includes the disorders for which treatment is usually sought, conditions such as depression and panic disorder. But describing a client with this diagnostic label alone is not sufficient, other disorders may be present and an Axis I designation does not provide any information about how the client is currently functioning. Thus, while an Axis I condition may be the presenting condition, it is important to also determine whether a personality disorder or other lasting condition is present (Axis II), as well as any medical conditions (Axis III). While Axes I, II, and III describe psychological and physical status, they do not address the nature of the environment in which the client must function (Axis IV), nor do they address how the client is currently functioning (Axis V). Thus, in order to develop an effective treatment plan, all 5 axes are needed.

GRADING RUBRIC: 12 points total, 2 for each axis + 2 for explaining why all are needed.

- 192) This is an information processing model of psychopathology. Problems come from the biased processing of external events or internal stimuli. These biases distort the ways people make sense of their world, leading to cognitive errors. Underlying the bias are schemas that contain dysfunctional beliefs. When these schemas become activated they bias how the person processes information. For example, in depression, people tend to make negative interpretations about themselves, their world and their future. In therapy, clients are made aware of the connection between thinking and emotional response. They are taught to identify their automatic thoughts, the logical errors in thinking they are making and how to challenge their validity. Clients are encouraged to gather information on their own and test their beliefs as hypotheses.

GRADING RUBRIC: 10 points, 5 for theory, 5 for therapy.

- 193) The goal of psychodynamic therapy is to reveal the unconscious by using numerous techniques designed to reveal that which one may or may not be aware of. Classical psychoanalysis is an intensive and long-term process that is rarely practiced today. Psychoanalytically oriented psychotherapies are more common today. These employ many of the same approaches as classical psychoanalysis, but focus more on interpersonal considerations. While the classical psychoanalyst would focus on early relationships, the more modern psychotherapist would look at how those early relationships impact today's interactions. Some psychodynamic techniques are free association, analysis of dreams, analysis of resistance, and analysis of transference. In free association, the client is asked to say whatever comes to mind - to speak without thinking. When dreams are analyzed, the therapist looks past the dream as remember and interprets the hidden meaning of the dream. All of these techniques are designed to aid the client in developing an awareness of that which lurks in his or her unconscious.

GRADING RUBRIC: 8 points total - 2 points each to name and describe 2 techniques - 4 points, explain change in psychoanalysis over time - 2 points, explanation of goal of therapy - 2 points.

- 194) In order to determine whether or not treatment has been effective, some change needs to have occurred. Thus, some measure to effectiveness is needed, as well as a source of the necessary information. It should be noted, however, that sometimes people get well just with the passage of time. This must be considered when considering the effectiveness of treatment—did the treatment work, or would the person have improved without any care? Establishing whether or not improvements have occurred can be assessed with information obtained from the therapist, the client, family or friends of the client, test scores, and/or the measurement of over behavior. Clearly, a number of these information sources are likely to be biased, either for treatment success or against it. Ideally, an independent source would assess treatment success and the measures employed would be objective. Obviously, this may or may not be possible.

GRADING RUBRIC: 10 points total - 2 for each of 3 ways of measuring success, 2 for each of 2 complicating factors (time may fix problem, bias, need for valid measures, etc.)

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) The interdisciplinary approach to the treatment of physical disorders thought to have psychological factors as a major aspect of their causal patterns is known as 1) _____
- A) psychosomatics.
 - B) health psychology.
 - C) behavioral medicine.
 - D) psychoneurological medicine.

Answer: C

Diff: 1 Type: MC Page Ref: 114

Topic: Health Problems and Behavior

Skill: Factual

Objective:

- 2) Today there is a growing recognition of the fact that 2) _____
- A) cognitive factors determine the course of both psychological and biological disorders.
 - B) behavioral and biological factors interact to determine health.
 - C) all psychological disorders have a clearly defined biological basis.
 - D) it is unlikely we will ever be able to determine the causes of psychological disorders.

Answer: B

Diff: 2 Type: MC Page Ref: 114

Topic: Health Problems and Behavior

Skill: Conceptual

Objective:

- 3) Behavioral medicine emphasizes 3) _____
- A) integrating psychology and sociology in an effort to replace surgery for physical illness.
 - B) utilizing imagery to treat disabling illnesses such as cancer.
 - C) replacing traditional medical methods with psychological methods in the treatment of physical illness.
 - D) the role of psychological factors in the occurrence, maintenance, and prevention of physical illness.

Answer: D

Diff: 1 Type: MC Page Ref: 114

Topic: Health Problems and Behavior

Skill: Conceptual

Objective:

- 4) Health psychology is 4) _____
- A) a subspecialty of medicine that examines how medications affect a person's moods, thoughts, and behaviors.
 - B) a subspecialty within behavioral medicine that employs psychotherapy to improve people's mental health.
 - C) a form of psychology that looks at how the environment, noise, crowding, and pollution affects mental health.
 - D) a subspecialty within behavioral medicine and psychology that deals with the psychological components of physical dysfunction.

Answer: D

Diff: 1 Type: MC Page Ref: 114

Topic: Health Problems and Behavior

Skill: Factual

Objective:

- 5) Which statement about behavioral medicine is accurate? 5) _____
- A) It examines the psychological causes of physical illnesses rather than such treatment issues as compliance with advice and the effectiveness of interventions.
 - B) It represents a kind of icing on the cake: helping people feel better after they have been cured of a disease.
 - C) It is a field that has developed rapidly over the past 30 years and has had a major impact on virtually the entire range of clinical medicine.
 - D) It makes a distinction between those illnesses that have a psychological cause and those that do not.

Answer: C

Diff: 1 Type: MC Page Ref: 114

Topic: Health Problems and Behavior

Skill: Conceptual

Objective:

- 6) The fact that physical conditions affect psychological functioning is recognized by the consideration of _____ 6) _____
- A) Axis V
 - B) Axis III
 - C) Axis I
 - D) Axis II

Answer: B

Diff: 1 Type: MC Page Ref: 114

Topic: Health Problems and Behavior

Skill: Factual

Objective:

- 7) Schizophrenia is an _____ disorder. 7) _____
- A) Axis V
 - B) Axis I
 - C) Axis II
 - D) Axis III

Answer: B

Diff: 1 Type: MC Page Ref: 114

Topic: Health Problems and Behavior

Skill: Factual

Objective:

- 8) A personality disorder that puts one at risk for cardiovascular disease would be found on _____. 8) _____
- A) Axis V
 - B) Axis I
 - C) Axis II
 - D) Axis III

Answer: C

Diff: 2 Type: MC Page Ref: 114

Topic: Health Problems and Behavior

Skill: Factual

Objective:

- 9) Unlike earlier editions of the DSM, the DSM-IV-TR includes 9) _____
- A) Axis III for medical conditions.
 - B) a category called Mental Disorders Due to a General Medical Condition on Axis I.
 - C) psychosomatic disorders on Axis II.
 - D) organic mental disorders on Axis V.

Answer: B

Diff: 1 Type: MC Page Ref: 114

Topic: Health Problems and Behavior

Skill: Factual

Objective:

- 10) According to the text, the term "stress" will be used to refer to: 10) _____
- A) anything that makes us unhappy.
 - B) those events in our lives that challenge us.
 - C) the effects of stressors.
 - D) any demand made on an organism.

Answer: C

Diff: 2 Type: MC Page Ref: 115

Topic: What Is Stress?

Skill: Factual

Objective:

- 11) Selye _____
- A) focused on the cognitive component of the stress response.
 - B) conducted extensive research on the effects of stress on the immune system.
 - C) failed to acknowledge the role of the environment in adapting to stress.
 - D) recognized that both happy and sad life events can be sources of stress.

Answer: D

Diff: 2 Type: MC Page Ref: 115

Topic: What Is Stress?

Skill: Factual

Objective:

- 12) The discovery of the 5HTTLPR gene and its connection to stress was important because it showed _____
- A) our genetic makeup seems to make us more or less "stress-sensitive."
 - B) stress is caused by our genetic makeup.
 - C) it showed there is really no connection between genetic makeup and reaction to stress.
 - D) it showed that our genetic makeup causes some people to seek out stress despite its effects.

Answer:

Diff: 2 Type: MC Page Ref: 117

Topic: Factors predisposing a person to stress

Skill: Factual

Objective:

- 13) Who is likely to have the most severe stress? _____
- A) Lauren, who sees the clean-up of an accident and finds out later it involved one of her friends.
 - B) Bill, who has a deadline the next day for an important project.
 - C) Josh, who has just been told he has cancer and whose wife announces she is leaving him when he tells her the news.
 - D) Anne, who is planning her wedding.

Answer: C

Diff: 3 Type: MC Page Ref: 115

Topic: What Is Stress?

Skill: Applied

Objective:

- 14) The term "crisis" refers to _____
- A) encountering a number of stressors simultaneously.
 - B) any encounter that requires a readjustment of self concept.
 - C) a period of especially acute stress.
 - D) any time when a stressful situation exceeds one's ability to cope.

Answer: D

Diff: 2 Type: MC Page Ref: 115

Topic: What Is Stress?

Skill: Factual

Objective:

- 15) What is the difference between a stressor and a crisis? _____
- A) There is no difference, these are just two words for the same thing.
 - B) There is a biological response to stress, but not to crisis.
 - C) A stressor is an unexpected crisis.
 - D) While all crises are stressors, not all stressors are crises.

Answer: D

Diff: 2 Type: MC Page Ref: 115

Topic: What Is Stress?

Skill: Conceptual

Objective:

- 16) The development of new methods of coping 16) _____
A) may be an outcome of a crisis.
B) always occurs when adaptive capabilities are exceeded.
C) is continuously needed as we face new stressors on a daily basis.
D) increases the expectation of future failures.

Answer: A

Diff: 2 Type: MC Page Ref: 116

Topic: What Is Stress?

Skill: Conceptual

Objective:

- 17) The Social Readjustment Rating Scale 17) _____
A) examines the role that coping plays in dealing with life changes.
B) is an imperfect means of quantifying the level of stress experience over a period of time.
C) has been used to demonstrate that life events and health are not related.
D) did not acknowledge that happy events create life changes and, as a consequence, stress.

Answer: B

Diff: 2 Type: MC Page Ref: 116

Topic: What Is Stress?

Skill: Conceptual

Objective:

- 18) Which of the following is a criticism of the life event scales? 18) _____
A) They do not recognize that joyful events can be stressful.
B) No relationship has been found between illness and scores on these scales.
C) They do not recognize that multiple life changes will produce greater stress.
D) Peoples' moods can have an impact on their ratings of stress.

Answer: D

Diff: 2 Type: MC Page Ref: 116

Topic: What Is Stress?

Skill: Applied

Objective:

- 19) Despite all the criticisms of the use of life stress scales, 19) _____
A) their reliability and validity was never challenged.
B) they are still the preferred method for measuring reactions to specific environmental events.
C) the finding that life change produces stress has been supported by other work.
D) today's approaches to assessing the effects of life events are no better.

Answer: C

Diff: 2 Type: MC Page Ref: 116

Topic: What Is Stress?

Skill: Conceptual

Objective:

- 20) The Life Event and Difficulty Schedule 20) _____
A) focuses on how difficult life events are handled.
B) includes cognitive factors in its examination of the impact of life events.
C) provides a quick way to assess stress responses and coping skills.
D) provides a timeline for describing the stress response.

Answer: B

Diff: 3 Type: MC Page Ref: 116

Topic: What Is Stress?

Skill: Conceptual

Objective:

- 21) Which of the following is considered to be the most reliable life event approach? 21) _____
- A) the Life Event and Difficulty Schedule B) the Impact of Events Scale
C) the Social Readjustment Rating Scale D) Snoopy's How's It Going Schedule
- Answer: A
Diff: 1 Type: MC Page Ref: 116
Topic: What Is Stress?
Skill: Factual
Objective:
- 22) Which of the following will lessen the impact of a stressful situation? 22) _____
- A) Minimizing the use of social support.
B) Being uncertain as to how long the stressor will persist.
C) Holding unrealistic expectations about the stressor.
D) Preparing for the stressor.
- Answer: D
Diff: 1 Type: MC Page Ref: 116
Topic: What Is Stress?
Skill: Applied
Objective:
- 23) Cognitive factors 23) _____
- A) can create or intensify stress.
B) alone determine what effect a traumatic event will have on the immune system.
C) always serve to minimize stress reactions.
D) have no impact on how the body responds to a challenge.
- Answer: A
Diff: 2 Type: MC Page Ref: 116-117
Topic: What Is Stress?
Skill: Factual
Objective:
- 24) Which of the following stressors is likely to have the strongest negative impact on people? 24) _____
- A) being in a multi-car accident on a sunny day
B) having back surgery after other options for pain didn't work
C) changing from a boring job to a more exciting one
D) getting a divorce after many years
- Answer: A
Diff: 2 Type: MC Page Ref: 118
Topic: Characteristics of Stressors
Skill: Applied
Objective:
- 25) Why are stressors such as airplane crashes more stressful than a fire? 25) _____
- A) After a fire, people receive more social and financial support than after a crash.
B) There is less publicity after a fire, so people don't relive the experience over and over as they do in an airplane crash.
C) People tend to take something like an airplane crash more personally than they do a fire.
D) After a fire, people can often find some positive aspect, such as that the family survived or the fire didn't spread – it is harder to do this with an airplane crash.
- Answer: D
Diff: 2 Type: MC Page Ref: 118
Topic: Characteristics of Stressors
Skill: Applied
Objective:
- 26) An individual with a high stress tolerance: 26) _____
- A) may feel threatened more readily than those with low stress tolerance.
B) can function well in the face of a high level of stress.
C) is likely to be particularly vulnerable to slight frustration.
D) is particularly vulnerable to acute stress disorder.

Answer: B

Diff: 1 Type: MC Page Ref: 117

Topic: What Is Stress?

Skill: Applied

Objective:

27) Which of the following will lessen the impact of stress on a person? 27) _____

- A) positive social and family relationships
- B) being single and alone, there is less for the person to cope with
- C) having a lot of extremely stressful experiences in the past
- D) having family relationships, even if they are tense

Answer: A

Diff: 2 Type: MC Page Ref: 117

Topic: What Is Stress?

Skill: Factual

Objective:

28) After a fire destroyed their house, the Johnson's told everyone that they were grateful no one was hurt and that the family was still together. In fact, they said, everyone in the family seemed to be even closer since the fire. The Bachman family also experienced a fire that destroyed their house. They told everyone about all the photos and priceless possessions they have lost and how they can never replace them. They are worried about money and say their anxieties are causing them to fight more. The Johnson family 28) _____

- A) is likely to suffer later more extreme reactions to stress than the Bachman family because the Johnson family is in denial.
- B) will have a more moderate impact and better adjustment to the stress than the Bachman family.
- C) will have the same impact from stress as the Bachman family because they both experienced the same stressor.
- D) will have a worse reaction to the stress because the Bachman family is experiencing a stronger emotional reaction.

Answer: B

Diff: 3 Type: MC Page Ref: 119

Topic: Characteristics of Stressors

Skill: Applied

Objective:

29) The "fight or flight" response 29) _____

- A) is made possible by the parasympathetic division of the autonomic nervous system.
- B) is what causes a Type A personality behavior pattern.
- C) is made possible by the sympathetic division of the autonomic nervous system.
- D) is an adaptive reaction to the daily demands faced today.

Answer: C

Diff: 1 Type: MC Page Ref: 118

Topic: Stress and the Stress Response

Skill: Factual

Objective:

30) Activation of the sympathetic nervous system 30) _____

- A) only happens if someone chooses "fight" rather than "flight".
- B) can have ill effects when it is sustained over time.
- C) helps a person relax.
- D) happens in response to exposure to viruses.

Answer: B

Diff: 2 Type: MC Page Ref: 118

Topic: Stress and the Stress Response

Skill: Factual

Objective:

- 31) The stress response begins in the _____
A) brain. B) sympathetic nervous system.
C) parasympathetic nervous system. D) adrenal gland.
Answer: A
Diff: 1 Type: MC Page Ref: 118
Topic: Physiologic Aspects of Stress
Skill: Factual
Objective:
- 32) The substances that cause an increase in heart rate when the fight-or-flight response is activated are released by the _____
A) hypothalamus. B) pituitary. C) kidney. D) adrenal.
Answer: D
Diff: 1 Type: MC Page Ref: 118
Topic: Physiologic Aspects of Stress
Skill: Factual
Objective:
- 33) Cortisol can be used to _____
A) enhance immune responses.
B) stimulate the pituitary gland.
C) reduce inflammation.
D) decrease heart rate following sympathetic activation.
Answer: C
Diff: 1 Type: MC Page Ref: 118
Topic: Physiologic Aspects of Stress
Skill: Factual
Objective:
- 34) When do the effects of cortisol become a problem? _____
A) always
B) when the cortisol response is not terminated
C) when the normal immune response is inhibited
D) never
Answer: B
Diff: 2 Type: MC Page Ref: 118
Topic: Physiologic Aspects of Stress
Skill: Conceptual
Objective:
- 35) Under what circumstances in the release of cortisol most adaptive? _____
A) after exposure to a virus
B) after the initial cause for alarm is removed
C) when you are in a hurry and do not have time to eat
D) when you are injured but do not have time to tend to your injury
Answer: D
Diff: 2 Type: MC Page Ref: 118
Topic: Physiologic Aspects of Stress
Skill: Applied
Objective:
- 36) Which of the following is NOT an effect of cortisol? _____
A) hippocampal damage B) increased metabolism
C) elevated blood sugar D) enhanced immune function

Answer: D

Diff: 2 Type: MC Page Ref: 118

Topic: Physiologic Aspects of Stress

Skill: Factual

Objective:

- 37) The allostatic load is 37) _____
- A) the reaction of the sympathetic nervous system to stress.
 - B) a factor in increasing white blood cells.
 - C) the amount of cortisol that is adaptive.
 - D) the biological cost of adapting to stress.

Answer: D

Diff: 2 Type: MC Page Ref: 118

Topic: Physiologic Aspects of Stress

Skill: Factual

Objective:

- 38) The field of study that focuses on how behavior, our defenses against illness, and the brain all interact is known as 38) _____
- A) psychoneuroimmunology.
 - B) health psychology.
 - C) psychophysiology.
 - D) behavioral medicine.
- A

Answer:

Diff: 1 Type: MC Page Ref: 119

Topic: Psychoneuroimmunology

Skill: Factual

Objective:

- 39) Which of the following is the study of the interactions between the nervous system and the immune system? 39) _____
- A) immunology
 - B) health psychology
 - C) psychoneuroimmunology
 - D) behavioral medicine

Answer: C

Diff: 2 Type: MC Page Ref: 119

Topic: Stress and the Immune System

Skill: Factual

Objective:

- 40) Antigens 40) _____
- A) are a type of leukocyte.
 - B) respond to foreign bodies.
 - C) make rapid immune responses possible.
 - D) lead to the generation of antibodies.

Answer: D

Diff: 1 Type: MC Page Ref: 120

Topic: Stress and the Immune System

Skill: Factual

Objective:

- 41) Viruses are 41) _____
- A) antigens.
 - B) antibodies.
 - C) leukocytes.
 - D) lymphocytes.

Answer: A

Diff: 1 Type: MC Page Ref: 120

Topic: Stress and the Immune System

Skill: Factual

Objective:

- 42) B-cells 42) _____
A) mature in the brain. B) produce antibodies.
C) increase the allostatic load. D) are a type of virus.
Answer: B
Diff: 2 Type: MC Page Ref: 120
Topic: Stress and the Immune System
Skill: Factual
Objective:
- 43) T-cells 43) _____
A) mature in the bone marrow. B) are a type of leukocyte.
C) mature in the brain. D) inhibit the proliferation of B-cells.
Answer: B
Diff: 1 Type: MC Page Ref: 120
Topic: Stress and the Immune System
Skill: Factual
Objective:
- 44) Unlike B-cells, T-cells 44) _____
A) become active and multiply rapidly when the immune system is stimulated.
B) are not able to recognize specific antigens by themselves.
C) inhibit the proliferation of B-cells.
D) are a type of leukocyte.
Answer: B
Diff: 1 Type: MC Page Ref: 120
Topic: Stress and the Immune System
Skill: Factual
Objective:
- 45) Macrophages 45) _____
A) are a type of leukocyte. B) inhibit the proliferation of B-cells.
C) are antigens. D) activate T-cells.
Answer: D
Diff: 1 Type: MC Page Ref: 120
Topic: Stress and the Immune System
Skill: Factual
Objective:
- 46) Cytokines are 46) _____
A) foreign bodies such as viruses and bacteria.
B) in the bone marrow and produce antibodies.
C) a type of leukocyte and are part of the immune system.
D) chemical messengers that allow immune cells to communicate with each other.
Answer: D
Diff: 2 Type: MC Page Ref: 120
Topic: Stress and the Immune System
Skill: Factual
Objective:
- 47) The fact that cytokines can communicate with the brain as well as with the immune system means that 47) _____
A) the brain is capable of influencing immune processes.
B) the brain does not play an active role in the immune system.
C) the brain also produces leukocytes.
D) they are effective in fighting off diseases of the brain.

Answer: A

Diff: 2 Type: MC Page Ref: 121

Topic: Stress and the Immune System

Skill: Factual

Objective:

- 48) Research on the stressful life events and the immune response found 48) _____
- A) greater overall stress led to more use of social support and better immune functioning.
 - B) there was no association between levels of stress and immune functioning.
 - C) greater overall stress eventually strengthened the immune system and slowed the transition from HIV positive to AIDS.
 - D) greater overall stress was associated with more rapid transition from HIV positive to AIDS.

Answer: D

Diff: 2 Type: MC Page Ref: 121

Topic: Stress and the Immune System

Skill: Factual

Objective:

- 49) Which of the following provides evidence of the role that psychosocial factors play in AIDS? 49) _____
- A) Many people have been cured with the placebo effect.
 - B) Psychosocial stressors tend to strengthen immune function.
 - C) Dissatisfaction with social support was predictive of faster development of AIDS.
 - D) Many people who are HIV-positive have a history of posttraumatic stress disorder.

Answer: C

Diff: 2 Type: MC Page Ref: 121

Topic: Stress and the Immune System

Skill: Conceptual

Objective:

- 50) All of the following are examples of lifestyle factors that impact health EXCEPT 50) _____
- A) tobacco use. B) unsafe sex. C) diabetes. D) sleep loss.

Answer: C

Diff: 1 Type: MC Page Ref: 122

Topic: Lifestyle Factors in Health and Illness

Skill: Applied

Objective:

- 51) A lifestyle factor 51) _____
- A) is something that we can control.
 - B) is something that we cannot control.
 - C) is our reaction to stressors.
 - D) is genetic.

Answer: A

Diff: 1 Type: MC Page Ref: 122

Topic: Lifestyle Factors in Health and Illness

Skill: Factual

Objective:

- 52) Julia has hypertension. Which of the following would be expected to differentiate her physiological functioning from that of someone who does not suffer from this condition? 52) _____
- A) even pulse
 - B) blood pressure less than 120/80
 - C) regular heartbeat
 - D) lessened blood flow to visceral organs

Answer: D

Diff: 2 Type: MC Page Ref: 122

Topic: Cardiovascular Disease/Hypertension

Skill: Applied

Objective:

- 53) Constricted blood vessels, accelerated heart rate, restricted blood flow to visceral organs: these symptoms jointly reflect _____
A) atherosclerosis. B) myocardial infarction.
C) migraine headache. D) hypertension.
Answer: D
Diff: 1 Type: MC Page Ref: 122
Topic: Cardiovascular Disease/Hypertension
Skill: Factual
Objective:
- 54) Which of the following blood pressures would be classified as "prehypertension"? _____
A) 135/90 B) 130/80 C) 100/50 D) 145/95
Answer: A
Diff: 1 Type: MC Page Ref: 123
Topic: Cardiovascular Disease/Hypertension
Skill: Factual
Objective:
- 55) Hypertension is given the designation "essential" hypertension when it _____
A) results from an identifiable biological predisposition.
B) has no specific physical cause.
C) is notable for its many overt warning symptoms.
D) is a chronic condition.
Answer: B
Diff: 2 Type: MC Page Ref: 123
Topic: Cardiovascular Disease/Hypertension
Skill: Factual
Objective:
- 56) Which of the following is TRUE? _____
A) Gender differences in the prevalence of hypertension are not seen.
B) Women are more likely to suffer from hypertension than men.
C) Hypertension is rare before age 50.
D) African Americans have higher rates of hypertension than do whites.
Answer: D
Diff: 1 Type: MC Page Ref: 123
Topic: Cardiovascular Disease/Hypertension
Skill: Factual
Objective:
- 57) Which of the following is NOT an accepted explanation for why African Americans have higher rates of essential hypertension than European Americans? _____
A) Physicians are more likely to diagnose hypertension in this population because they expect to see it.
B) This population is subjected to the stresses of poverty, inner-city life, and racism.
C) As a group, blacks retain excessive levels of ingested sodium.
D) African Americans are less likely to exercise than Caucasians.
Answer: A
Diff: 2 Type: MC Page Ref: 123
Topic: Cardiovascular Disease/Hypertension
Skill: Factual
Objective:
- 58) An old explanation for hypertension viewed hypertension as a(n) _____
A) sign of ego disintegration.
B) expression of unsatisfied sexual urges of the id.
C) consequence of fixation in the latent stage.
D) result of unexpressed anger.

Answer: D

Diff: 2 Type: MC Page Ref: 123

Topic: Cardiovascular Disease/Hypertension

Skill: Factual

Objective:

- 59) Bonnie and Judy have both been treated badly by a job interviewer. Bonnie responded by yelling at the interviewer and calling him names. Judy responded by telling the interviewer why she felt upset and asking if there was anyway to work things out. Which woman is more likely to have high blood pressure? 59) _____
- A) neither, because they both expressed their anger
 - B) Bonnie because she had emotional release
 - C) both, because they are both very angry
 - D) Judy because she expressed her anger constructively

Answer: D

Diff: 2 Type: MC Page Ref: 124

Topic: Cardiovascular Disease/Hypertension

Skill: Applied

Objective:

- 60) Research on the role of anger in hypertension finds that 60) _____
- A) expressing anger serves to reduce the blood pressure of those with hypertension.
 - B) anger and blood pressure are not related.
 - C) suppressed anger explains the hypertension of most of the population.
 - D) expressed anger increases blood pressure.

Answer: D

Diff: 2 Type: MC Page Ref: 124

Topic: Cardiovascular Disease/Hypertension

Skill: Factual

Objective:

- 61) The healthiest way to deal with anger is to 61) _____
- A) suppress it.
 - B) express it.
 - C) communicate it constructively.
 - D) use it to energize positive actions.

Answer: C

Diff: 2 Type: MC Page Ref: 124

Topic: Cardiovascular Disease/Hypertension

Skill: Factual

Objective:

- 62) All of the following are clinical manifestations of coronary heart disease EXCEPT 62) _____
- A) myocardial infarction.
 - B) heart attack.
 - C) angina.
 - D) stroke.

Answer: D

Diff: 2 Type: MC Page Ref: 124

Topic: Cardiovascular Disease/CHD

Skill: Factual

Objective:

- 63) The chance of having a heart attack can 63) _____
- A) not be impacted by stress.
 - B) be increased if a person experiences major stress.
 - C) be increased if a person experiences moderate to major stress.
 - D) be increased even by low level or everyday stress.

Answer: D

Diff: 2 Type: MC Page Ref: 125

Topic: Coronary Heart Disease/Risk and Causal Factors

Skill: Factual

Objective:

- 64) What aspect of the Type A personality is thought to increase the risk of coronary artery disease? 64) _____
A) extreme work commitment B) impatience
C) hostility D) excessive competitive drive
Answer: C
Diff: 1 Type: MC Page Ref: 124
Topic: Cardiovascular Disease/CHD/Psychological Factors
Skill: Factual
Objective:
- 65) What would be the best piece of advice to give to a person who exhibits Type A behavior in order to decrease their risk of coronary heart disease? 65) _____
A) use it or lose it
B) don't deny your feelings, use them effectively
C) mom never said life was fair
D) take time to smell the roses
Answer: B
Diff: 2 Type: MC Page Ref: 124
Topic: Cardiovascular Disease/CHD/Psychological Factors
Skill: Applied
Objective:
- 66) Geoffrey is extremely impatient when he has to wait in line or in traffic. He often feels enormous rage but tries to control it. Geoffrey suffers from 66) _____
A) Type B behavior pattern. B) hostility personality disorder.
C) Type A/B behavior pattern. D) Type A behavior pattern.
Answer: D
Diff: 1 Type: MC Page Ref: 124
Topic: Cardiovascular Disease/CHD/Psychological Factors
Skill: Applied
Objective:
- 67) The main reason people have not found a consistent relationship between Type A and coronary heart disease is 67) _____
A) the overlap between the Type A pattern and other mental illnesses.
B) the use of small samples.
C) an inability to consistently define "coronary heart disease."
D) different ways of measuring Type A.
Answer: D
Diff: 2 Type: MC Page Ref: 124
Topic: Cardiovascular Disease/CHD/Psychological Factors
Skill: Factual
Objective:
- 68) The results of the Framingham Heart Study show that Type A behavior is 68) _____
A) just as likely in people with normal hearts as people with diseased hearts.
B) a risk factor for women, while depression is a risk factor for men.
C) a risk factor for heart disease in men only.
D) a risk factor for heart disease in both men and women.
Answer: D
Diff: 2 Type: MC Page Ref: 124
Topic: Cardiovascular Disease/CHD/Psychological Factors
Skill: Factual
Objective:
- 69) Charles spends most of his time feeling tense and anxious. He has a good job but worries that he might be fired at any time. Charles has an increased risk of having a heart attack because 69) _____
A) he has a Type X personality. B) he has a Type A personality.
C) he has a Type B personality. D) he has a Type D personality.

Answer: D

Diff: 2 Type: MC Page Ref: 124
Topic: Cardiovascular Disease/CHD/Psychological Factors
Skill: Applied
Objective:

70) Research has found that there is a strong correlation between _____ and mortality following a heart attack. 70) _____

- A) hostility
- B) anxiety
- C) Type A behavior
- D) depression

Answer: D

Diff: 1 Type: MC Page Ref: 124
Topic: Cardiovascular Disease/CHD/Psychological Factors
Skill: Factual
Objective:

71) Fatal heart attacks are associated with 71) _____

- A) depression and impulsivity.
- B) impulsivity and excessive worry.
- C) antisocial attitudes and paranoid thoughts.
- D) anxiety and depression.

Answer: D

Diff: 1 Type: MC Page Ref: 124-125
Topic: Cardiovascular Disease/CHD/Psychological Factors
Skill: Factual
Objective:

72) Which of the following psychological factors is most useful as a predictor of heart attack survival? 72) _____

- A) time urgency
- B) pessimism
- C) depression
- D) anger

Answer: C

Diff: 1 Type: MC Page Ref: 125
Topic: Cardiovascular Disease/CHD/Psychological Factors
Skill: Factual
Objective:

73) No association has been found between nonfatal heart attacks and 73) _____

- A) hostility.
- B) vital exhaustion.
- C) anxiety.
- D) depression.

Answer: C

Diff: 1 Type: MC Page Ref: 125
Topic: Cardiovascular Disease/CHD/Psychological Factors
Skill: Factual
Objective:

74) Kelly was recently diagnosed with cancer. Her physician recommended that she keep a journal about her feelings and thoughts. Research suggests 74) _____

- A) this is a good idea – emotional disclosure is often effective in improving physical condition.
- B) this is neither good nor bad – emotional disclosure has no real impact on physical condition.
- C) this is a moderately good idea – emotional disclosure may make her feel better but will have no impact on her physical condition.
- D) this is a bad idea – emotional disclosure tends to make people’s physical condition worse.

Answer: A

Diff: 2 Type: MC Page Ref: 127
Topic: Treatment of Stress Related Physical Disorders
Skill: Applied
Objective:

- 75) Adjustment disorders 75) _____
- A) do not lessen once the precipitating stressor is removed.
 - B) are not disorders, but a selection of symptoms seen in response to normal events that necessitate change.
 - C) occur within 6 months of a stressor.
 - D) develop in response to normal life events.
- Answer: D
Diff: 2 Type: MC Page Ref: 127
Topic: Adjustment Disorder
Skill: Factual
Objective:
- 76) Which of the following is characteristic of an adjustment disorder? 76) _____
- A) The symptoms persist indefinitely.
 - B) Medical intervention is usually necessary.
 - C) Symptoms may lessen when the individual has learned to cope.
 - D) The precipitating stressor is a traumatic event that few people face.
- Answer: C
Diff: 1 Type: MC Page Ref: 127
Topic: Adjustment Disorder
Skill: Factual
Objective:
- 77) Acute stress disorder becomes PTSD when 77) _____
- A) the symptoms last for more than 2 weeks.
 - B) the symptoms last for more than 4 weeks.
 - C) the trauma is an event out of the realm of normal life experience.
 - D) the symptoms begin within 6 months of the trauma.
- Answer: B
Diff: 1 Type: MC Page Ref: 127
Topic: Distinguishing Between Acute Stress Disorder and PTSD
Skill: Factual
Objective:
- 78) PTSD 78) _____
- A) develops in about 20% of those who report having experienced a traumatic event.
 - B) usually lasts for less than 4 weeks.
 - C) symptoms vary considerably depending on the characteristics of the trauma and the victim.
 - D) must develop within four weeks of the precipitating event in order for a diagnosis to be made.
- Answer: C
Diff: 1 Type: MC Page Ref: 128
Topic: PTSD/Reactions of Catastrophic Events
Skill: Factual
Objective:
- 79) Estimates of the prevalence of PTSD: 79) _____
- A) find that it rarely exists as a comorbid condition.
 - B) demonstrate that it is more commonly seen in women.
 - C) have not been made.
 - D) indicate that most people who experience a traumatic event develop PTSD.
- Answer: B
Diff: 2 Type: MC Page Ref: 129
Topic: Prevalence of PTSD
Skill: Factual
Objective:

- 80) A main symptom of PTSD is 80) _____
A) depression.
B) panic attacks when remembering the trauma.
C) reexperiencing of the traumatic event.
D) development of stress related diseases.

Answer: C

Diff: 1 Type: MC Page Ref: 130

Topic: PTSD

Skill: Factual

Objective:

- 81) Combat soldiers, particularly in Iraq and Afghanistan, have been found to have high rates of PTSD. This is because 81) _____
A) soldiers have higher rates of preexisting mental conditions than the general population.
B) soldiers have personality traits that make them more at risk.
C) combat situations involve many factors that create intense stress, including fear, loss of security and lack of sleep.
D) combat situations expose soldiers to many physical substances linked to PTSD.

Answer: C

Diff: 1 Type: MC Page Ref: 132

Topic: The Trauma of Military Combat

Skill: Factual

Objective:

- 82) Which of the following people is LEAST likely to develop PTSD after exposure to a traumatic event? 82) _____
A) Katie, who lives alone and has a history of depression.
B) Madison, who tries to always be strong and to let no one see her vulnerabilities.
C) Doug, who drinks a lot because of anxiety.
D) Chase, who is in the gifted class at school.

Answer: D

Diff: 2 Type: MC Page Ref: 133

Topic: Individual Risk Factors in PTSD

Skill: Applied

Objective:

- 83) Which of the following will lower a soldier's risk of developing PTSD? 83) _____
A) believing strongly in the goals of the combat
B) no prior experience in combat
C) whether they are in combat in a familiar country or not
D) whether they talk about their experiences

Answer: A

Diff: 2 Type: MC Page Ref: 131

Topic: Causal Factors in PTSD

Skill: Factual

Objective:

- 84) Which of the following has been one of the most effective techniques to promote morale in combat soldiers? 84) _____
A) Removing them from duty after a combat experience.
B) Long term counseling.
C) Providing access to the Internet.
D) Keeping them away from contact with anyone but other combat soldiers for a significant amount of time after a combat experience.

Answer: C

Diff: 1 Type: MC Page Ref: 134

Topic: Causal Factors in PTSD

Skill: Factual

Objective:

- 85) Why is the diagnosis of delayed PTSD a controversial one? 85) _____
- A) It is so commonly diagnosed that it is probably an example of a normal reaction.
 - B) Publicity and potential disability payments may have increased false claims of this disorder.
 - C) Combat veterans rarely report delayed PTSD while civilians often report it.
 - D) People that report delayed symptoms often have serious psychological disorders and are usually out of touch with reality.
- Answer: B
Diff: 2 Type: MC Page Ref: 134
Topic: Causal Factors in PTSD
Skill: Factual
Objective:
- 86) Stress-inoculation training: 86) _____
- A) can be used to prepare for most any disaster.
 - B) involves learning new ways to think about an anticipated threat and then applying these techniques to several different types of threats.
 - C) prepares one to deal with a stressor by considering solutions to the problems that are likely to arise.
 - D) is a form of cognitive preparation that can be used to minimize the impact of any life challenge.
- Answer: B
Diff: 2 Type: MC Page Ref: 132
Topic: Prevention and Treatment of Stress Disorders
Skill: Conceptual
Objective:
- 87) For which of the following would the use of stress-inoculation training be most effective? 87) _____
- A) dealing with the aftermath of a rape
 - B) minimizing the impact of losing one's home
 - C) coping with the loss of a loved one
 - D) preparing for chemotherapy
- Answer: D
Diff: 2 Type: MC Page Ref: 132
Topic: Prevention and Treatment of Stress Disorders
Skill: Applied
Objective:
- 88) Stress-inoculation training: 88) _____
- A) can be used to prepare for most any disaster.
 - B) prepares one to deal with a stressor by considering solutions to the problems that are likely.
 - C) is a form of cognitive preparation that can be used to minimize the impact of an anticipated threat.
 - D) has been employed in the military and been found to be ineffective.
- Answer: C
Diff: 2 Type: MC Page Ref: 132
Topic: Prevention and Treatment of Stress Disorders
Skill: Conceptual
Objective:
- 89) In the final phase of stress-inoculation training: 89) _____
- A) provides information about the stressful situation.
 - B) self-statements designed to promote effective adaptation are learned.
 - C) physical consequences of stress are examined.
 - D) newly acquired coping skills are applied.
- Answer: D
Diff: 2 Type: MC Page Ref: 132
Topic: Prevention and Treatment of Stress Disorders
Skill: Factual
Objective:

- 90) Most people with symptoms after exposure to a traumatic situation 90) ____
A) will gradually recover without professional help.
B) will gradually recover if they get professional help.
C) will immediately seek professional help and quickly recover.
D) will not recover, even if they seek professional help.

Answer: A

Diff: 1 Type: MC Page Ref: 135

Topic: Treatment for Stress Disorders

Skill: Factual

Objective:

- 91) Debriefing sessions after a traumatic experience 91) ____
A) have been found to always be of benefit to victims, who typically are appreciative of the service.
B) have been found to usually be of benefit to victims, although they typically do not want the service.
C) have not been found to be of benefit to victims, although they typically are appreciative of the service.
D) have not been found to be of benefit to victims because they resent the offer of services.

Answer: C

Diff: 2 Type: MC Page Ref: 136

Topic: Prevention and Treatment of Stress Disorders

Skill: Factual

Objective:

- 92) Which of the following would be an example of prolonged exposure? 92) ____
A) John planned a new route to work.
B) Mandy imagines the accident site every day for at least half an hour.
C) Carol considered ways in which she could make her apartment safer.
D) Chris learned judo.

Answer: B

Diff: 2 Type: MC Page Ref: 133

Topic: Prevention and Treatment of Stress Disorders

Skill: Applied

Objective:

- 93) A new development in exposure therapy for combat soldiers is 93) ____
A) the use of virtual reality programs to simulate an individual's trauma as closely as possible.
B) the use of computers to provide educational information about combat experiences.
C) the use of group therapy where other combat veterans describe their experiences in detail.
D) the use of military orders to stay in therapy, to reduce the otherwise high drop-out rate.

Answer: A

Diff: 1 Type: MC Page Ref: 137

Topic: Prevention and Treatment of Stress Disorders

Skill: Factual

Objective:

- 94) The psychotropic medications used in the treatment of PTSD: 94) ____
A) provide the client with a temporary escape from the trauma.
B) are used to alter the stressful situation.
C) treat the symptoms the client is experiencing.
D) act to minimize the cognitive response to the stressor.

Answer: C

Diff: 2 Type: MC Page Ref: 134

Topic: Prevention and Treatment of Stress Disorders

Skill: Applied

Objective:

- 95) A significant drawback of the use of medication for PTSD is 95) _____
A) it can actually serve as a reinforcer for one of the major symptoms of PTSD because it can allow a person to avoid the feelings associated with the trauma.
B) it can make people overly sensitized to the "warning signs" of distress.
C) it can work well during the day, however the person often continues to have nightmares and sleep disturbances.
D) there are no significant drawbacks.

Answer: A

Diff: 2 Type: MC Page Ref: 135
Topic: Prevention and Treatment of Stress Disorders
Skill: Factual
Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 96) Behavioral medicine is a unique approach to psychological disorders. 96) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 114
Topic:
Skill:
Objective:

- 97) Behavioral medicine is an interdisciplinary approach to the treatment of physical disorders. 97) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 114
Topic:
Skill:
Objective:

- 98) Mental Disorders Due to a General Medical Condition are found on Axis I of DSM-IV-TR. 98) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 114
Topic:
Skill:
Objective:

- 99) Having to deal with multiple stressors simultaneously is a rare event. 99) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 115
Topic:
Skill:
Objective:

- 100) Unpredictable events cause more severe stress than anticipated ones. 100) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 118
Topic:
Skill:
Objective:

- 101) The severity of a stressor can be determined by its duration. 101) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 115
Topic:
Skill:
Objective:

- 102) The outcome of a crisis is, by definition, negative. 102) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 116
Topic:
Skill:
Objective:
- 103) Those who do not respond well to change are likely to have a low stress tolerance. 103) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 117
Topic:
Skill:
Objective:
- 104) Early traumatic experiences always leave a person more vulnerable to stressors later in life. 104) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 117
Topic:
Skill:
Objective:
- 105) Interpersonal relationships can have a major impact on a person's reaction to a stressor. 105) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 117
Topic:
Skill:
Objective:
- 106) Cortisol is used to treat inflammations as it enhances the body's immune response. 106) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 118
Topic:
Skill:
Objective:
- 107) Cortisol injections can be used to allow an injured athlete to continue playing. 107) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 118
Topic:
Skill:
Objective:
- 108) The allostatic load is the amount of excess hormones a body develops in response to stress. 108) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 118
Topic:
Skill:
Objective:
- 109) Stress can cause suppression of the immune system. 109) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 121
Topic:
Skill:
Objective:

- 110) In general, blood pressure decreases with age. 110) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 123
Topic:
Skill:
Objective:
- 111) Men are more likely to develop hypertension than women. 111) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 123
Topic:
Skill:
Objective:
- 112) Essential hypertension is high blood pressure that has a purely physical cause. 112) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 123
Topic:
Skill:
Objective:
- 113) Lifestyle factors, rather than genetics, are thought to account for racial differences in the prevalence of hypertension. 113) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 123
Topic:
Skill:
Objective:
- 114) High blood pressure is caused by repressed rage. 114) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 123-124
Topic:
Skill:
Objective:
- 115) All of the personality characteristics of the Type A personality are predictive of coronary heart disease. 115) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 124
Topic:
Skill:
Objective:
- 116) The Type D personality tends to feel anxious and insecure and has higher rates of coronary heart disease. 116) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 124
Topic:
Skill:
Objective:
- 117) Depression is one of the most strongly linked emotions to illness and mortality. 117) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 124-125
Topic:
Skill:
Objective:

- 118) Anxiety has been shown to contribute to the occurrence of nonfatal heart attacks. 118) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 125
Topic:
Skill:
Objective:
- 119) Everyday forms of stress do not elevate the risk of CHD. 119) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 125
Topic:
Skill:
Objective:
- 120) Animal studies have demonstrated that social isolation can increase the risk of CHD. 120) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 125
Topic:
Skill:
Objective:
- 121) Laughter has been demonstrated to be good for you. 121) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 127
Topic:
Skill:
Objective:
- 122) Adjustment disorders are some of the most severe disorders in the DSM-IV-TR. 122) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 127
Topic:
Skill:
Objective:
- 123) In order to make a diagnosis of PTSD, symptoms must persist for at least one month. 123) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 127
Topic:
Skill:
Objective:
- 124) Traumatic events that are caused by humans are more likely to cause PTSD than events that are caused by nature 124) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 131
Topic:
Skill:
Objective:

- 125) PTSD is an affective disorder. 125) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 128
Topic:
Skill:
Objective:
- 126) Women have higher rates of PTSD than men mainly because they are more often victims of violence. 126) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 129
Topic:
Skill:
Objective:
- 127) Individuals with lower levels of education are less likely to experience psychological symptoms following an airplane crash. 127) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 129-130
Topic:
Skill:
Objective:
- 128) PTSD is a unique disorder in that it is the only psychological disorder for which there must be an identifiable "cause." 128) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 130
Topic:
Skill:
Objective:
- 129) Delayed PTSD is a quite common and generally accepted disorder. 129) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 134
Topic:
Skill:
Objective:
- 130) Stress inoculation helps most for people preparing for totally unexpected traumatic situations. 130) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 132
Topic:
Skill:
Objective:
- 131) Medication is clearly the treatment of choice for PTSD. 131) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 135
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

- 132) How is the severity of stress measured? 132) _____
Answer: The severity of stress is measured by the degree to which it disrupts functioning.
Diff: 1 Type: SA Page Ref: 115
Topic:
Skill:
Objective:
- 133) Discuss two of the aspects of the nature of stressors that can cause them to be highly stressful. 133) _____
Answer: Two of: If they involve important aspects of one's life. The length of time a stressor exists, the longer, the worse the effects. The cumulative effect of multiple small stressors. Multiple stressors at one time. How closely involved someone is to a traumatic situation.
Diff: 3 Type: SA Page Ref: 115-117
Topic:
Skill:
Objective:
- 134) What are two factors that can lessen the impact of a stressful situation? 134) _____
Answer: Many possible choices—understanding the nature of the situation, preparing for the stressful situation, perceiving that there may be some benefit, perceiving that one has control, feeling able to handle the event, having adequate social support, etc.
Diff: 1 Type: SA Page Ref: 116-117
Topic:
Skill:
Objective:
- 135) What is cortisol? 135) _____
Answer: Cortisol is a hormone released as part of the stress response. It prepares the body for action and inhibits immune responses.
Diff: 1 Type: SA Page Ref: 118
Topic:
Skill:
Objective:
- 136) What is the connection between anger and hypertension? 136) _____
Answer: While it was once thought to be repressed rage, now it is believed to be a result of whether or not anger is communicated constructively—in a direct and expressive way. Those who communicated their anger constructively had lower blood pressure.
Diff: 2 Type: SA Page Ref: 123-124
Topic:
Skill:
Objective:
- 137) What is thought to account for the higher prevalence of hypertension amongst African Americans as compared to Americans of European descent? 137) _____
Answer: Differences in stress levels, obesity, diet, and exercise practices.
Diff: 1 Type: SA Page Ref: 123
Topic:
Skill:
Objective:
- 138) Describe the Type A behavior pattern. What aspect of this behavior pattern has been identified as increasing the risk of cardiovascular disease? 138) _____
Answer: Type A behavior is characterized by excessive competition, impatience or time urgency, and hostility. It is the hostile element that appears to put the Type A individual at risk for illness. Anger needs be dealt with constructively in order to prevent its potential ill effects.

Diff: 1 Type: SA Page Ref: 124
Topic:
Skill:
Objective:

139) What is the Type D personality?

139) _____

Answer: An addition to the traditional Type A and B. D is for distressed - people who tend to experience negative emotions and to feel anxious and insecure. They appear to have increased risk of coronary heart disease.

Diff: 2 Type: SA Page Ref: 124
Topic:
Skill:
Objective:

140) Why are depression and heart disease linked?

140) _____

Answer: Depressed people may engage in more behaviors that put people at risk for heart disease, such as not exercising or smoking. They also tend to lack social support. There is also a biochemical connection - elevated cortisol and norepinephrine. Elevated stress hormones can damage the heart.

Diff: 2 Type: SA Page Ref: 124-125
Topic:
Skill:
Objective:

141) Describe two methods of stress management that can be effective ways of dealing with illness.

Answer: Two of: Emotional disclosure – writing about problems, Biofeedback, Relaxation and Meditation.

Diff: 2 Type: SA Page Ref: 127-128
Topic:
Skill:
Objective:

142) What is positive psychology?

142) _____

Answer: Positive psychology is an area of psychology that focuses on human traits and resources that might have direct effects on both physical and psychological health.

Diff: 2 Type: SA Page Ref: 127
Topic:
Skill:
Objective:

143) List 4 symptoms of PTSD.

143) _____

Answer: The symptoms of PTSD are numerous and varied. They include nightmares, intrusive thoughts, irritability, insomnia, depression, anxiety, etc.

Diff: 1 Type: SA Page Ref: 130
Topic:
Skill:
Objective:

144) What is stress-inoculation training?

144) _____

Answer: This is a means of preparing one to deal with an anticipated event. It involved learning and practicing new ways of coping with the event. It might be used, for example, prior to some form of painful medical treatment.

Diff: 2 Type: SA Page Ref: 132
Topic:
Skill:
Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

145) How have views of the relationship between physical illnesses and psychological factors changed over time? What fields of study reflect this new perspective?

Answer: While some physical disorders were once described as psychosomatic or psychophysiological to emphasize the role of psychological factors in their etiology, such terms are all but obsolete today. While it was once thought that only disorders clearly related to stress, such as ulcers and asthma, were influenced by psychological factors, it is now recognized that all physical illnesses are affected in some way by psychological factors. Psychological factors can influence the development, progression, and treatment of all physical illnesses. Behavioral medicine is the interdisciplinary approach to the treatment of physical disorders that considers the impact of psychosocial factors and health psychology is the area of psychology that studies the role of psychological factors in illnesses. GRADING RUBRIC: 2pts clear introduction, 4 pts explanation, 2pts behavioral medicine, 2pts health psychology = 10 total.

Diff: 2 Type: ES Page Ref: 114
Topic:
Skill:
Objective:

146) What are psychological factors that are related to good health? Can it be concluded that such factors have a direct effect on health? Explain your response thoroughly

Answer: Positive emotions seem to protect against physical disease or speed recovery when disease occurs. A patient who believes that a treatment will work (a placebo effect) has a better chance of improving than a person who is neutral or pessimistic about the treatment. Conversely, negative emotions such as anger, anxiety, and depression are correlated with increased likelihood of disease. While these correlations can be observed, they are merely correlations and a causal relationship cannot be assumed. It may be that those who are more positive may behave in ways that are more healthy, decreasing the likelihood of illness and improving recovery when illness does occur. There have, however, been studies that have revealed positive effects of attitude and social support on immune function, suggesting that the relationship may be direct in some instances.

GRADING RUBRIC: 4 pts - discussion of protective factors, 4 pts - recognition and discussion of the nature of the relationship between psychological factors and health = 8 total.

Diff: 2 Type: ES Page Ref: Various
Topic:
Skill:
Objective:

147) Define the terms "stress" and "stressor". Discuss three factors that influence stress and complicate its study.

Answer: Stress is the response to any demand placed on an organism. Those events which create stress are called stressors. An individual's response to a given stressor is influenced by both internal and external factors, making it such that no two people will respond in the same way to the same event and a given person's response may not always be the same. The impact of a stressor is largely determined by coping skills, an individual's perception of the stressor, the number of other stressors the individual is facing, and any existing predisposition to stress vulnerability.

GRADING RUBRIC: Define stress - 2, Define stress - 2, Each factor - 2 (3 @ 2 = 6)

Total: 10

Diff: 3 Type: ES Page Ref: 115-117
Topic:
Skill:
Objective:

- 1) C
- 2) B
- 3) D
- 4) D
- 5) C
- 6) B
- 7) B
- 8) C
- 9) B
- 10) C
- 11) D
- 12)
- 13) C
- 14) D
- 15) D
- 16) A
- 17) B
- 18) D
- 19) C
- 20) B
- 21) A
- 22) D
- 23) A
- 24) A
- 25) D
- 26) B
- 27) A
- 28) B
- 29) C
- 30) B

- 31) A
- 32) D
- 33) C
- 34) B
- 35) D
- 36) D
- 37) D
- 38) A
- 39) C
- 40) D
- 41) A
- 42) B
- 43) B
- 44) B
- 45) D
- 46) D
- 47) A
- 48) D
- 49) C
- 50) C
- 51) A
- 52) D
- 53) D
- 54) A
- 55) B
- 56) D
- 57) A
- 58) D
- 59) D
- 60) D

- 61) C
- 62) D
- 63) D
- 64) C
- 65) B
- 66) D
- 67) D
- 68) D
- 69) D
- 70) D
- 71) D
- 72) C
- 73) C
- 74) A
- 75) D
- 76) C
- 77) B
- 78) C
- 79) B
- 80) C
- 81) C
- 82) D
- 83) A
- 84) C
- 85) B
- 86) B
- 87) D
- 88) C

- 89) D
- 90) A
- 91) C
- 92) B
- 93) A
- 94) C
- 95) A
- 96) FALSE
- 97) TRUE
- 98) TRUE
- 99) FALSE
- 100) TRUE
- 101) FALSE
- 102) FALSE
- 103) TRUE
- 104) FALSE
- 105) TRUE
- 106) FALSE
- 107) TRUE
- 108) FALSE
- 109) TRUE
- 110) FALSE
- 111) FALSE
- 112) FALSE
- 113) FALSE
- 114) FALSE
- 115) FALSE
- 116) TRUE
- 117) TRUE
- 118) FALSE

- 119) FALSE
- 120) TRUE
- 121) TRUE
- 122) FALSE
- 123) TRUE
- 124) TRUE
- 125) FALSE
- 126) TRUE
- 127) FALSE
- 128) TRUE
- 129) FALSE
- 130) FALSE
- 131) FALSE
- 132) The severity of stress is measured by the degree to which it disrupts functioning.
- 133) Two of: If they involve important aspects of one's life. The length of time a stressor exists, the longer, the worse the effects. The cumulative effect of multiple small stressors. Multiple stressors at one time. How closely involved someone is to a traumatic situation.
- 134) Many possible choices - understanding the nature of the situation, preparing for the stressful situation, perceiving that there may be some benefit, perceiving that one has control, feeling able to handle the event, having adequate social support, etc.
- 135) Cortisol is a hormone released as part of the stress response. It prepares the body for action and inhibits immune responses.
- 136) While it was once thought to be repressed rage, now it is believed to be a result of whether or not anger is communicated constructively - in a direct and expressive way. Those who communicated their anger constructively had lower blood pressure.
- 137) Differences in stress levels, obesity, diet, and exercise practices.
- 138) Type A behavior is characterized by excessive competition, impatience or time urgency, and hostility. It is the hostile element that appears to put the Type A individual at risk for illness. Anger needs to be dealt with constructively in order to prevent its potential ill effects.
- 139) An addition to the traditional Type A and B. D is for distressed - people who tend to experience negative emotions and to feel anxious and insecure. They appear to have increased risk of coronary heart disease.
- 140) Depressed people may engage in more behaviors that put people at risk for heart disease, such as not exercising or smoking. They also tend to lack social support. There is also a biochemical connection - elevated cortisol and norepinephrine. Elevated stress hormones can damage the heart.
- 141) Two of: Emotional disclosure – writing about problems, Biofeedback, Relaxation and Meditation.
- 142) Positive psychology is an area of psychology that focuses on human traits and resources that might have direct effects on both physical and psychological health.
- 143) The symptoms of PTSD are numerous and varied. They include nightmares, intrusive thoughts, irritability, insomnia, depression, anxiety, etc.

- 144) This is a means of preparing one to deal with an anticipated event. It involved learning and practicing new ways of coping with the event. It might be used, for example, prior to some form of painful medical treatment.
- 145) While some physical disorders were once described as psychosomatic or psychophysiologic to emphasize the role of psychological factors in their etiology, such terms are all but obsolete today. While it was once thought that only disorders clearly related to stress, such as ulcers and asthma, were influenced by psychological factors, it is now recognized that all physical illnesses are affected in some way by psychological factors. Psychological factors can influence the development, progression, and treatment of all physical illnesses. Behavioral medicine is the interdisciplinary approach to the treatment of physical disorders that considers the impact of psychosocial factors and health psychology is the area of psychology that studies the role of psychological factors in illnesses.
GRADING RUBRIC: 2pts clear introduction, 4 pts explanation, 2pts behavioral medicine, 2pts health psychology = 10 total.
- 146) Positive emotions seem to protect against physical disease or speed recovery when disease occurs. A patient who believes that a treatment will work (a placebo effect) has a better chance of improving than a person who is neutral or pessimistic about the treatment. Conversely, negative emotions such as anger, anxiety, and depression are correlated with increased likelihood of disease. While these correlations can be observed, they are merely correlations and a causal relationship can not be assumed. It may be that those who are more positive may behave in ways that are more healthy, decreasing the likelihood of illness and improving recovery when illness does occur. There have, however, been studies that have revealed positive effects of attitude and social support on immune function, suggesting that the relationship may be direct in some instances.
GRADING RUBRIC: 4 pts - discussion of protective factors, 4 pts - recognition and discussion of the nature of the relationship between psychological factors and health = 8 total.
- 147) Stress is the response to any demand placed on an organism. Those events which create stress are called stressors. An individual's response to a given stressor is influenced by both internal and external factors, making it such that no two people will respond in the same way to the same event and a given person's response may not always be the same. The impact of a stressor is largely determined by coping skills, an individual's perception of the stressor, the number of other stressors the individual is facing, and any existing predisposition to stress vulnerability.
GRADING RUBRIC: Define stress - 2, Define stress - 2, Each factor - 2 (3 @ 2 = 6)
Total: 10

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Neurotic behavior 1) _____
A) is what we now refer to as "hysteria."
B) is maladaptive and means that a person is out of touch with reality.
C) is maladaptive but means that a person is not out of touch with reality.
D) is a current term, used to describe many disorders in the DSM-IV-TR.

Answer: C

Diff: 2 Type: MC Page Ref: 138

Topic: Panic, Anxiety, and Their Disorders

Skill: Factual

Objective:

- 2) The new DSM classification which omits the concept of neurosis is an improvement because 2) _____
A) diagnostic criteria are now based on shared, observable symptoms and are more clearly defined.
B) each category is made up of symptoms that have one causal origin.
C) each category now has a specific effective treatment.
D) now anxiety disorders are identified regardless of whether anxiety symptoms are expressed or not.

Answer: A

Diff: 2 Type: MC Page Ref: 138

Topic: Panic, Anxiety, and Their Disorders

Skill: Conceptual

Objective:

- 3) Fear is a basic emotion that involves 3) _____
A) negative thoughts, but not a change in physiological arousal.
B) the activation of the "fight or flight" response.
C) concern about the future.
D) a complex blend of negative mood and self-preoccupation.

Answer: B

Diff: 1 Type: MC Page Ref: 139

Topic: Fear and Anxiety Response Patterns

Skill: Conceptual

Objective:

- 4) Which of the following would be an example of anxiety? 4) _____
A) Hilda dreaded walking home alone.
B) Carl was certain that the food was poisoned.
C) The voices in Paul's head told him he should be afraid.
D) Julie jumped when she saw the snake.

Answer: A

Diff: 2 Type: MC Page Ref: 139

Topic: The Fear and Anxiety Response Patterns

Skill: Applied

Objective:

- 5) The main way to tell someone is having an uncued panic attack rather than is in a state of fear is 5) _____
A) whether or not they think about what is happening.
B) if they feel a strong urge to flee.
C) whether or not they show physiological changes such as increased heart rate.
D) if they have a subjective belief that something awful is about to happen.

Answer: D

Diff: 2 Type: MC Page Ref: 139

Topic: Fear and Anxiety Response Patterns

Skill: Factual

Objective:

- 6) Which of the following is most characteristic of anxiety? 6) _____
- A) avoidant behavior
 - B) a desire to scream
 - C) trembling
 - D) increased heart rate

Answer: A

Diff: 1 Type: MC Page Ref: 139
Topic: The Fear and Anxiety Response Patterns
Skill: Applied
Objective:

- 7) Which of the following is one of the seven primary types of anxiety disorders recognized in the DSM-IV-TR? 7) _____
- A) bipolar disorder
 - B) hypochondriasis
 - C) dissociative fugue
 - D) obsessive-compulsive disorder

Answer: D

Diff: 1 Type: MC Page Ref: 140
Topic: Overview of the Anxiety Disorders
Skill: Factual
Objective:

- 8) What is one of the major ways the anxiety disorders differ from each other? 8) _____
- A) Whether there are more fear/panic symptoms or anxiety symptoms involved.
 - B) Whether the disorder is associated with other anxiety disorders or not.
 - C) Whether or not they are treatable.
 - D) Whether or not they have a genetic component.

Answer: A

Diff: 1 Type: MC Page Ref: 140
Topic: Overview of Anxiety Disorders
Skill: Factual
Objective:

- 9) Individuals who suffer from phobias 9) _____
- A) are likely to believe that their fear is justified.
 - B) are unlikely to have other psychological diagnoses.
 - C) avoid the feared stimulus.
 - D) suffer from uncued panic attacks.

Answer: C

Diff: 2 Type: MC Page Ref: 141
Topic: Specific Phobias
Skill: Factual
Objective:

- 10) Martin is afraid to fly. He knows his boss wants him to take a trip for the business. Martin feels miserable, because he wants to keep his job but cannot even imagine getting on a plane. The most likely diagnosis for Martin is 10) _____
- A) agoraphobia without history of panic disorder.
 - B) social phobia.
 - C) panic disorder with agoraphobia.
 - D) specific phobia, situation type.

Answer: D

Diff: 2 Type: MC Page Ref: 141-142
Topic: Specific Phobias
Skill: Applied
Objective:

- 11) Why do people with phobias continue to avoid the thing they fear? 11) _____
A) They are cognitively unable to make any other decision due to their disorder.
B) Avoidance is reinforced by anxiety reduction.
C) There is something wrong with their flight-fight system.
D) Their low self-esteem causes them to choose not to fight their fear.

Answer: B

Diff: 2 Type: MC Page Ref: 142

Topic: Specific Phobias

Skill: Conceptual

Objective:

- 12) Which of the following is associated with a unique physiological response pattern? 12) _____
A) blood-injection-injury phobia B) agoraphobia
C) generalized anxiety disorder D) obsessive-compulsive disorder

Answer: A

Diff: 2 Type: MC Page Ref: 142

Topic: Specific Phobias

Skill: Factual

Objective:

- 13) An evolutionary psychologist might say, "The unique physiological response in this disorder, involving fainting at the sight of the feared object, may have evolved because fainting might inhibit further attack from a predator." What disorder is being discussed? 13) _____
A) agoraphobia with panic attacks B) blood-injection-injury phobia
C) social phobia D) animal phobia

Answer: B

Diff: 1 Type: MC Page Ref: 142

Topic: Specific Phobias

Skill: Conceptual

Objective:

- 14) Which of the following phobias is a 10-year-old boy most likely to suffer from? 14) _____
A) blood-injury phobia B) animal phobia
C) agoraphobia D) claustrophobia

Answer: A

Diff: 3 Type: MC Page Ref: 142

Topic: Specific Phobias

Skill: Applied

Objective:

- 15) Which of the following explanations for Diana's scissors phobia would Freud be most likely to offer? 15) _____
A) Diana once saw her brother seriously injured by a sharp object.
B) Constant warnings about the importance of not running with scissors have generalized to an overall fear of scissors.
C) Diana suffers from womb envy, creating an unconscious desire to harm her pregnant mother.
D) Diana's mother is a seamstress and Diana unconsciously wants to kill her.

Answer: D

Diff: 2 Type: MC Page Ref: 142

Topic: Specific Phobias

Skill: Applied

Objective:

- 16) When Charissa was a young child, she stepped on a bee and was stung. Since that time, she has been terrified of flying insects and runs away if she sees any. According to the classical conditioning model, the bee was 16) _____
A) an unconditioned response. B) an unconditioned stimulus.
C) a conditioned response. D) a conditioned stimulus.

Answer: D

Diff: 2 Type: MC Page Ref: 143

Topic: Phobias as Learned Behavior

Skill: Applied

Objective:

- 17) When Kenneth was a young boy he went to a dentist who treated him uncaringly and inflicted a good deal of pain. Even years later, he has an uncontrollable and intense fear of not only dentists but physicians, too. This best illustrates how phobias might be the result of _____ 17) _____
- A) generalization in classical conditioning. B) the inflation effect.
C) secondary gain. D) observational conditioning.

Answer: A

Diff: 2 Type: MC Page Ref: 143

Topic: Phobias as Learned Behavior

Skill: Applied

Objective:

- 18) Nicole's mother is terribly afraid of snakes. Although Nicole has never actually seen a snake, her mother has told her time and again to be careful and look for them when she is walking. Now Nicole has an intense fear of snakes and refuses to walk in the grass. This is an example of _____ 18) _____
- A) vicarious conditioning of a phobia.
B) unconscious displacement of anxiety onto a phobic object.
C) classical conditioning of a phobia.
D) operant conditioning of a phobia.

Answer: A

Diff: 2 Type: MC Page Ref: 143

Topic: Phobias as Learned Behavior

Skill: Applied

Objective:

- 19) When Kenneth was a young boy he went to a dentist who treated him uncaringly and inflicted a good deal of pain. Even years later, he has an uncontrollable and intense fear of not only dentists but physicians, too. This best illustrates how phobias might be the result of _____ 19) _____
- A) observational conditioning. B) the inflation effect.
C) secondary gain. D) generalization in classical conditioning.

Answer: D

Diff: 2 Type: MC Page Ref: 143

Topic: Phobias as Learned Behavior

Skill: Applied

Objective:

- 20) Casey and Josh have both been bitten by strange dogs. Casey has a dog of his own at home that he loves. Josh has little experience with dogs. Which is likely to develop a phobia? _____ 20) _____
- A) Casey is less likely to develop a phobia because he has had lots of earlier positive experiences with dogs.
B) Both boys are likely to develop a phobia because of the traumatic nature of the event.
C) It will depend on which boy is more sensitive to pain.
D) Casey is more likely to develop a phobia because his schema of dogs has been violated.

Answer: A

Diff: 2 Type: MC Page Ref: 143

Topic: Phobias as Learned Behavior

Skill: Applied

Objective:

- 21) Wendy went swimming in the ocean last week and became mildly fearful when she swallowed a lot of water and felt as though she would drown. Just yesterday someone told her that a shark was seen in the water at the same time she was swimming. Now she is petrified of going into the ocean. This best illustrates 21) _____
- A) the inability of the phobic person to direct their attention away from a feared object.
 - B) the "inflation effect."
 - C) the observational learning explanation for phobias.
 - D) classically conditioned generalization based on direct experience.
- Answer: B
Diff: 2 Type: MC Page Ref: 144
Topic: Phobias as Learned Behavior
Skill: Applied
Objective:
- 22) Which of the following is likely to maintain or strengthen conditioned fears over time? 22) _____
- A) overestimating the likelihood that the event will reoccur
 - B) having previously experienced a less traumatic event
 - C) a genetic vulnerability to phobias
 - D) viewing the trauma as uncontrollable and inescapable
- Answer: A
Diff: 2 Type: MC Page Ref: 144
Topic: Phobias as Learned Behavior
Skill: Conceptual
Objective:
- 23) Which of the following illustrates how cognitive variables may act to maintain acquired fears? 23) _____
- A) Jane no longer went to the park due to her fear of dogs.
 - B) Melvin knew that his heart was racing because he was afraid.
 - C) Karen would think happy thoughts whenever she drove over a bridge.
 - D) Ryan's fear of heights caused him to always wonder just how high up he was in a building.
- Answer: D
Diff: 2 Type: MC Page Ref: 144
Topic: Phobias as Learned Behavior
Skill: Applied
Objective:
- 24) Evolutionary preparedness explains 24) _____
- A) why phobic people are likely to maintain their avoidance behavior.
 - B) why cognitive variables are so important in phobias.
 - C) why some types of phobias are much more common than others.
 - D) how the inflation effect works.
- Answer: C
Diff: 2 Type: MC Page Ref: 144
Topic: Phobias as Learned Behavior
Skill: Factual
Objective:
- 25) What has research on the preparedness theory of phobias found? 25) _____
- A) Acquired fear responses can be elicited with subliminal exposure to fear-relevant stimuli.
 - B) Prepared fears are innate.
 - C) There are cross-cultural differences in the stimuli people are "prepared" to fear.
 - D) Fear responses can not be conditioned to fear-irrelevant stimuli.
- Answer: A
Diff: 1 Type: MC Page Ref: 144
Topic: Phobias as Learned Behavior
Skill: Factual
Objective:

- 26) Lauren is phobic of birds. Her therapist shows her how to approach a bird in a cage. The therapist then takes the bird out, pets it and feeds it. She then encourages Lauren to do the same behaviors. This type of procedure is called _____
- A) exposure therapy. B) classical conditioning.
C) virtual reality therapy. D) participant modeling.

Answer: D

Diff: 2 Type: MC Page Ref: 145
Topic: Specific Phobias/Treating Specific Phobias
Skill: Applied
Objective:

- 27) Which of the following explains why many people never seek treatment for phobias? _____
- A) the frequent use of exposure therapy
B) Even the simplest of phobias requires participation in many lengthy treatment sessions before any progress is seen.
C) Most individuals who have a phobia have agoraphobia or claustrophobia, leaving them less likely to venture out in public and making the use of many modes of transportation difficult.
D) the high likelihood that the individual with a phobia believes that their fear is rational

Answer: A

Diff: 3 Type: MC Page Ref: 145
Topic: Specific Phobias/Treating Specific Phobias
Skill: Conceptual
Objective:

- 28) Kayla has just started college and wants to make friends. She refuses to go to large parties because she is afraid that she will blush and sweat, and that other people will laugh at her. She is fine talking to people in one-on-one settings. Kayla's most likely diagnosis is _____
- A) agoraphobia without history of panic disorder.
B) social phobia.
C) generalized social phobia.
D) specific phobia, situational type.

Answer: B

Diff: 2 Type: MC Page Ref: 146
Topic: Social Phobias
Skill: Applied
Objective:

- 29) Social phobia _____
- A) involves a fear of one or more specific social situations.
B) is characterized by significant fear of most social situations.
C) typically develops in childhood.
D) and antisocial personality commonly are comorbid disorders.

Answer: A

Diff: 1 Type: MC Page Ref: 146
Topic: Social Phobias
Skill: Factual
Objective:

- 30) The individual with generalized social phobia _____
- A) has a specific phobia for all social situations.
B) is likely to receive a diagnosis of generalized anxiety disorder.
C) exhibits a fear of most social situations.
D) typically has a fear of public speaking, using a public restroom, and restaurants.

Answer: C

Diff: 1 Type: MC Page Ref: 146
Topic: Social Phobias
Skill: Factual
Objective:

- 31) Social phobia often begins 31) _____
A) at a time when the person seems relatively free of stressors.
B) after any traumatic experience, even if it didn't include other people.
C) at a time when the person was having problems with his/her peers.
D) after a parent criticized the person.
Answer: C
Diff: 1 Type: MC Page Ref: 151-152
Topic: Social Phobias
Skill: Factual
Objective:
- 32) Studies of preparedness and social phobia 32) _____
A) provide an explanation for why such a maladaptive behavioral response persists.
B) reveal that an explicit perception of threat is necessary to evoke a sympathetic response.
C) do not provide justification for the seemingly irrational nature of social phobia.
D) find that angry faces act as fear-relevant stimuli.
Answer: D
Diff: 2 Type: MC Page Ref: 147
Topic: Social Phobias/Psychosocial and Biological Causal Factors
Skill: Conceptual
Objective:
- 33) Behaviorally inhibited young children are more likely to develop specific phobias. This is an example of a 33) _____
_____ causal factor.
A) biological B) conditioning C) preparedness D) cognitive
Answer: A
Diff: 2 Type: MC Page Ref: 148
Topic: Social Phobias/Psychosocial and Biological Causal Factors
Skill: Conceptual
Objective:
- 34) Paul has social phobia. He walks into a meeting at work and two people look up and smile. Paul 34) _____
A) is likely to interpret this as a friendly gesture—he is finally liked by someone.
B) is likely to not notice—his anxiety will keep him from seeing the friendly gesture.
C) is likely to interpret this in a negative way—that they are laughing at him in a mean way.
D) is likely to not know how to interpret this and this will make him feel more anxious.
Answer: C
Diff: 2 Type: MC Page Ref: 152
Topic: Social Phobias/ Cognitive variables
Skill: Applied
Objective:
- 35) Social phobics are likely to 35) _____
A) be aggressive.
B) attribute events in their lives to external factors.
C) attribute negative life events to internal, global, and stable factors.
D) have been raised in a permissive environment.
Answer: B
Diff: 2 Type: MC Page Ref: 148
Topic: Social Phobias/Psychosocial and Biological Causal Factors
Skill: Conceptual
Objective:
- 36) The cognitive restructuring approach to social phobia focuses on 36) _____
A) identifying the underlying cause of the phobia.
B) extinguishing problematic behavioral responses.
C) challenging automatic thoughts.
D) minimizing symptoms.

Answer: C

Diff: 1 Type: MC Page Ref: 148

Topic: Social Phobias/Treating Social Phobias

Skill: Factual

Objective:

- 37) Panic attacks, by definition, 37) _____
- A) are seen in individuals with panic disorder.
 - B) require the presence of at least four of 13 characteristic symptoms.
 - C) are unexpected ("uncued").
 - D) are 30-60 minutes in duration.

Answer: B

Diff: 1 Type: MC Page Ref: 149

Topic: Panic Disorder With and Without Agoraphobia

Skill: Factual

Objective:

- 38) Which of the following is necessary for a diagnosis of panic disorder? 38) _____
- A) depersonalization
 - B) derealization
 - C) panic attacks, cued and uncued, consisting of at least 6 of the 13 symptoms of a panic attack
 - D) uncued panic attacks

Answer: D

Diff: 1 Type: MC Page Ref: 149

Topic: Panic Disorder With and Without Agoraphobia

Skill: Factual

Objective:

- 39) When Jill experience her first panic attack, she felt as if she were outside of herself, watching herself struggle to catch her breath. Jill's sense of not being part of herself is one of the symptoms of a panic attack known as 39) _____
- A) depersonalization.
 - B) derealization.
 - C) dissociative fugue.
 - D) personality disintegration.

Answer: A

Diff: 2 Type: MC Page Ref: 149

Topic: Panic Disorder With and Without Agoraphobia

Skill: Applied

Objective:

- 40) Compared to anxiety, panic is 40) _____
- A) slower to develop.
 - B) longer lasting.
 - C) less focused.
 - D) more intense.

Answer: D

Diff: 2 Type: MC Page Ref: 149

Topic: Panic Disorder With and Without Agoraphobia

Skill: Conceptual

Objective:

- 41) Panic disorders are often misdiagnosed because 41) _____
- A) the symptoms overlap so much with major depression.
 - B) symptoms are so somatic they are treated by physicians for medical problems.
 - C) the symptoms are so chronic and mild, they do not seem like serious forms of psychopathology.
 - D) patients are so embarrassed by their problems, they do not make them known to professionals.

Answer: B

Diff: 1 Type: MC Page Ref: 150

Topic: Panic Disorder With and Without Agoraphobia

Skill: Factual

Objective:

- 42) Agoraphobia is best described as a fear of _____ 42) _____
 A) experiencing a panic attack. B) open spaces.
 C) people. D) public events.
 Answer: A
 Diff: 1 Type: MC Page Ref: 150
 Topic: Overview of the Anxiety Disorders
 Skill: Factual
 Objective:
- 43) _____ was once thought to be a fear of crowded places, but now is seen as a complication of having _____ 43) _____
 panic attacks in public.
 A) Generalized anxiety disorder B) Agoraphobia
 C) Claustrophobia D) General social phobia
 Answer: B
 Diff: 1 Type: MC Page Ref: 150
 Topic: Agoraphobia
 Skill: Factual
 Objective:
- 44) Mrs. B. tells her psychologist, "I cannot leave a certain region around my home without having terrible _____ 44) _____
 fears. I am terribly worried when I am in a car or bus. I am afraid I will have another one of those
 terrifying experiences." What disorder does Mrs. B probably have and what experience is she talking
 about?
 A) The disorder is agoraphobia, the experience is a panic attack.
 B) The disorder is specific phobia, the experience is a panic attack.
 C) The disorder is generalized anxiety disorder, the experience is anxiety.
 D) The disorder is obsessive-compulsive disorder, the experience is an obsession.
 Answer: A
 Diff: 2 Type: MC Page Ref: 150
 Topic: Agoraphobia
 Skill: Applied
 Objective:
- 45) Which learning process best accounts for the progression of agoraphobia? _____ 45) _____
 A) social modeling B) avoidance learning
 C) generalization D) conditioning
 Answer: C
 Diff: 1 Type: MC Page Ref: 150
 Topic: Agoraphobia
 Skill: Conceptual
 Objective:
- 46) Limited symptom attacks are _____ 46) _____
 A) panic attacks consisting of fewer than four symptoms.
 B) unpredictable somatic ailments.
 C) typically seen in individuals with agoraphobia with panic.
 D) a characteristic of panic disorder.
 Answer: A
 Diff: 1 Type: MC Page Ref: 151
 Topic: Agoraphobia
 Skill: Factual
 Objective:
- 47) Panic disorder is best described as a(n) _____ condition. _____ 47) _____
 A) inherited B) dissociative C) acute D) chronic

Answer: D

Diff: 1 Type: MC Page Ref: 152

Topic: Panic Disorder and Agoraphobia/Prevalence and Age of Onset

Skill: Factual

Objective:

- 48) James began having panic attacks immediately after his mother died suddenly. As they became more frequent, he began to fear going into public situations where they might occur. Now he is unable to leave his apartment and has others go out to shop for him. What is unusual about this case? 48) _____
- A) There is nothing unusual about this case.
 - B) It is unusual for panic attacks to begin after a stressful life event.
 - C) It is unusual for a person with severe agoraphobia to be a man.
 - D) It is unusual for fear of panic attacks to lead to agoraphobia.

Answer: C

Diff: 2 Type: MC Page Ref: 152

Topic: Panic Disorder and Agoraphobia/Prevalence and Age of Onset

Skill: Applied

Objective:

- 49) Which of the following is a sociocultural explanation for the higher incidence of anxiety disorders in women? 49) _____
- A) Women have a natural tendency to be more cautious than men.
 - B) It is more acceptable for women to exhibit fear.
 - C) High levels of male hormones lead to aggression and fearlessness.
 - D) Historically, women have had to stay and care for young. Thus, a hyper-vigilant state was adaptive.

Answer: B

Diff: 2 Type: MC Page Ref: 152

Topic: Panic Disorder and Agoraphobia/Prevalence and Age of Onset

Skill: Applied

Objective:

- 50) Most first panic attacks 50) _____
- A) last more than an hour.
 - B) are uncued.
 - C) are followed by the development of panic disorder.
 - D) follow some distressing event.

Answer: D

Diff: 1 Type: MC Page Ref: 152

Topic: Panic Disorder With and Without Agoraphobia

Skill: Factual

Objective:

- 51) The genetic component of Panic Disorder appears to be 51) _____
- A) due to a single gene.
 - B) connected to the gene for obsessive compulsive disorder.
 - C) due to the heritability of neuroticism.
 - D) nonexistent.

Answer: C

Diff: 2 Type: MC Page Ref: 157

Topic: Panic Disorder and Agoraphobia/Biological Causal Factors

Skill: Factual

Objective:

- 52) Research using panic provocation agents has revealed 52) _____
- A) that there are probably multiple biological explanations for panic disorder.
 - B) flaws in the studies using sodium lactate infusion.
 - C) the neurobiological basis for panic disorder.
 - D) that there is no biological explanation for panic disorder.

Answer: A

Diff: 1 Type: MC Page Ref: 152
Topic: Panic Disorder and Agoraphobia/Biological Causal Factors
Skill: Factual
Objective:

- 53) What is thought to explain the effectiveness of the SSRIs in treating panic disorder? 53) _____
- A) They decrease serotonergic activity. B) They increase noradrenergic activity.
C) They increase serotonergic activity. D) They decrease noradrenergic activity.

Answer: D

Diff: 2 Type: MC Page Ref: 153
Topic: Panic Disorder and Agoraphobia/Biological Causal Factors
Skill: Conceptual
Objective:

- 54) Which brain structure is recognized as playing a central role in panic attacks? 54) _____
- A) hippocampus B) cerebellum C) amygdala D) locus coeruleus

Answer: C

Diff: 1 Type: MC Page Ref: 153
Topic: Panic Disorder and Agoraphobia/Biological Causal Factors
Skill: Factual
Objective:

- 55) "Repeated stimulation of the limbic system by discharges from the locus coeruleus may lower the threshold for later experiences of anxiety. Then, through learning, controlled by the prefrontal cortex, the person actively avoids fearful situations." This quotation most clearly refers to the biological processes involved in 55) _____
- A) obsessive-compulsive disorder. B) generalized anxiety disorder.
C) panic disorder with agoraphobia. D) social phobia.

Answer: C

Diff: 2 Type: MC Page Ref: 153
Topic: Panic Disorder and Agoraphobia/Biological Causal Factors
Skill: Conceptual
Objective:

- 56) Betty is hyper-aware of such bodily sensations as heart rate and respiration rate. When she perceives heart or breathing as getting faster she becomes afraid that she is having a heart attack. These thoughts make her symptoms worse and she has a panic attack. Betty's pattern of thinking best illustrates 56) _____
- A) the importance of perceived control in panic disorder.
B) interoceptive conditioning.
C) the cognitive theory of panic.
D) the role of the locus coeruleus in panic.

Answer: C

Diff: 2 Type: MC Page Ref: 154
Topic: Panic Disorder and Agoraphobia/Behavioral and Cognitive
Skill: Applied
Objective:

- 57) According to the fear of fear model of agoraphobia, 57) _____
- A) the avoidant behaviors that the agoraphobic engages in serve to both maintain and exaggerate existing conditioned fear reactions.
B) minimal signs of sympathetic arousal come to signal more intense levels of arousal such that slight changes in autonomic activity become triggers for panic attacks.
C) agoraphobics develop fear responses to so many environmental stimuli that it is impossible to identify the stimulus that triggers a panic attack.
D) agoraphobia develops when the fear caused by a traumatic event becomes associated with numerous diverse environmental stimuli.

Answer: B

Diff: 3 Type: MC Page Ref: 154
Topic: Panic Disorder and Agoraphobia/Behavioral and Cognitive
Skill: Conceptual
Objective:

- 58) People with agoraphobia 58) _____
- A) fear enclosed spaces.
 - B) fear fear.
 - C) fear open spaces.
 - D) fear situations in which they have experienced panic attacks.

Answer: B

Diff: 2 Type: MC Page Ref: 154
Topic: Agoraphobia
Skill: Conceptual
Objective:

- 59) "Fear of fear," fear of anger and depression, and fear of internal bodily sensations are all cognitive causal explanations for 59) _____
- A) agoraphobia.
 - B) social phobia.
 - C) obsessive-compulsive disorder.
 - D) generalized anxiety disorder.

Answer: A

Diff: 1 Type: MC Page Ref: 154-155
Topic: Panic Disorder and Agoraphobia/Behavioral and Cognitive
Skill: Factual
Objective:

- 60) Which of the following is NOT an existing piece of evidence that provides support for the role of cognitions in panic? 60) _____
- A) Panic can be prevented in a panic provocation study by explaining what will happen.
 - B) Only individuals who tend to catastrophize develop panic disorder.
 - C) Evidence regarding the effectiveness of cognitive therapy for panic disorder.
 - D) Panic clients are more likely to interpret bodily sensations as catastrophic events.

Answer: B

Diff: 2 Type: MC Page Ref: 154-155
Topic: Panic Disorder and Agoraphobia/Behavioral and Cognitive
Skill: Factual
Objective:

- 61) The cognitive model does not account for 61) _____
- A) findings from panic provocation studies.
 - B) nocturnal panic attacks.
 - C) the effectiveness of cognitive-behavioral therapies.
 - D) evidence of a role for genes in anxiety disorders.

Answer: B

Diff: 2 Type: MC Page Ref: 155
Topic: Panic Disorder and Agoraphobia/Behavioral and Cognitive
Skill: Factual
Objective:

- 62) High levels of anxiety sensitivity 62) _____
- A) are seen in all who develop agoraphobia.
 - B) can be effectively treated with drugs that minimize noradrenergic function.
 - C) are a diathesis for panic attacks.
 - D) increase the risk of all types of anxiety disorder.

Answer: C

Diff: 2 Type: MC Page Ref: 155
Topic: Panic Disorder and Agoraphobia/Behavioral and Cognitive
Skill: Conceptual
Objective:

- 63) Why do many people with panic disorder continue to believe they are having a heart attack despite the fact that they never have? 63) _____
- A) They continue to go through classical conditioned learning experiences each time they have a panic attack.
 - B) They tell themselves that physicians may have missed earlier heart attacks.
 - C) They tend to engage in "safety behaviors" that they believe are the reason the catastrophe didn't happen.
 - D) They have such a high level of fear that learning is not possible.

Answer: C

Diff: 2 Type: MC Page Ref: 156
Topic: Panic Disorder and Agoraphobia/Behavioral and Cognitive
Skill: Factual
Objective:

- 64) Which of the following are the antidepressants most widely prescribed today for the treatment of panic disorder? 64) _____
- A) tricyclics
 - B) benzodiazepines
 - C) SSRIs
 - D) anxiolytics

Answer: C

Diff: 1 Type: MC Page Ref: 156
Topic: Treating Panic Disorder and Agoraphobia
Skill: Factual
Objective:

- 65) Harold's panic attacks have become so severe that he has finally sought treatment. He sees a psychiatrist who writes Harold a prescription that should offer him some immediate relief. Which of the following drugs is Harold most likely to have been prescribed? 65) _____
- A) tricyclics
 - B) benzodiazepines
 - C) SSRIs
 - D) monamine oxidase inhibitors

Answer: B

Diff: 1 Type: MC Page Ref: 156
Topic: Treating Panic Disorder and Agoraphobia
Skill: Applied
Objective:

- 66) Quentin is seeking medication to treat his panic disorder. Due to Quentin's history of substance abuse, his doctor hesitates. After some consideration, the doctor is most likely to write Quentin a prescription for a _____, confident that abuse won't be an issue. 66) _____
- A) SSRI
 - B) monamine oxidase inhibitor
 - C) tricyclic
 - D) benzodiazepine

Answer: A

Diff: 1 Type: MC Page Ref: 156
Topic: Treating Panic Disorder and Agoraphobia
Skill: Applied
Objective:

- 67) While in treatment for panic disorder, Leroy is asked to engage in behaviors that activate the sympathetic nervous system. In other words, Leroy is engaging in behaviors that produce the physical sensation of fear. What type of treatment does this appear to be? 67) _____
- A) interoceptive exposure
 - B) exteroceptive exposure
 - C) anxiety sensitivity training
 - D) cognitive reconditioning

- 72) One of the main functions that worry seems to serve in generalized anxiety disorder is 72) _____
A) it keeps people from feeling the emotional and physiological consequences of anxiety.
B) it keeps people distracted from what is really bothering them.
C) it prevents people with the disorder from developing depression.
D) it keeps people with the disorder feeling happier than if they didn't worry.

Answer: A

Diff: 3 Type: MC Page Ref: 160

Topic: Generalized Anxiety Disorder/Psychosocial Causal Factors

Skill: Factual

Objective:

- 73) One of the main problems with the worry in generalized anxiety disorders is 73) _____
A) it increases the effects of operant conditioning on their fears.
B) it keeps people with the disorder feeling happier than if they don't worry.
C) it is a form of avoidance and prevents extinction.
D) it keeps people distracted from what is really bothering them.

Answer: C

Diff: 3 Type: MC Page Ref: 160

Topic: Generalized Anxiety Disorder/Psychosocial Causal Factors

Skill: Factual

Objective:

- 74) Neurobiological factors involved in panic disorder and generalized anxiety disorder provide evidence for the hypothesis that 74) _____
A) both disorders are caused by an excess of the GABA neurotransmitter.
B) the two disorders are genetically identical.
C) panic may be an acute version of generalized anxiety disorder.
D) fear and anxiety are fundamentally distinct.

Answer: D

Diff: 2 Type: MC Page Ref: 161

Topic: Generalized Anxiety Disorder/Biological Causal Factors

Skill: Conceptual

Objective:

- 75) What disorder does GAD appear to be most related to? 75) _____
A) PTSD
B) specific phobia
C) major depression
D) panic disorder

Answer: C

Diff: 2 Type: MC Page Ref: 161

Topic: Generalized Anxiety Disorder/Biological Causal Factors

Skill: Applied

Objective:

- 76) The effectiveness of Valium in treating GAD supports the hypothesis that 76) _____
A) anxiety increases noradrenergic activity.
B) a GABA deficiency underlies GAD.
C) heightened autonomic arousal causes the anxiety of those with GAD.
D) a serotonin deficiency underlies GAD.

Answer: B

Diff: 2 Type: MC Page Ref: 161

Topic: Generalized Anxiety Disorder/Biological Causal Factors

Skill: Applied

Objective:

- 77) If a pharmaceutical company were looking for a drug that would maximally treat generalized anxiety disorder they would want one that 77) _____
- A) decreased serotonin levels and suppressed activity in the locus coeruleus.
 - B) increased GABA levels while regulating serotonin.
 - C) suppressed the activity of the locus coeruleus in the brain stem and the central gray in the midbrain.
 - D) decreased GABA levels while increasing norepinephrine.
- Answer: B
Diff: 2 Type: MC Page Ref: 161
Topic: Generalized Anxiety Disorder/Treatment
Skill: Conceptual
Objective:
- 78) Which of the following is a disadvantage of treating GAD with a benzodiazepine? 78) _____
- A) a therapeutic response is not seen for several weeks
 - B) there is a high risk of overdose
 - C) the somatic symptoms are not treated
 - D) such drugs are frequently misused
- Answer: D
Diff: 1 Type: MC Page Ref: 162
Topic: Generalized Anxiety Disorder/Treatment
Skill: Applied
Objective:
- 79) Persistent and recurrent thoughts are 79) _____
- A) obsessions.
 - B) delusions.
 - C) compulsions.
 - D) hallucinations.
- Answer: A
Diff: 1 Type: MC Page Ref: 163
Topic: Obsessive-Compulsive Disorder
Skill: Factual
Objective:
- 80) Most people with obsessive-compulsive disorder 80) _____
- A) experience both obsessions and compulsions.
 - B) experience compulsions, but obsessions are relatively rare.
 - C) develop compulsions in childhood, and obsessions in adolescence or adulthood.
 - D) experience obsessions, but compulsions are relatively rare.
- Answer: A
Diff: 1 Type: MC Page Ref: 163
Topic: Obsessive-Compulsive Disorder
Skill: Factual
Objective:
- 81) Which of the following is characteristic of the obsessions seen in OCD? 81) _____
- A) The obsessions are clearly related to a traumatic live event.
 - B) The obsessions are rarely related to the compulsions exhibited.
 - C) The obsessions serve to alleviate the anxiety created by the compulsions.
 - D) The individual with OCD knows that their obsessions are irrational.
- Answer: D
Diff: 1 Type: MC Page Ref: 163
Topic: Obsessive-Compulsive Disorder
Skill: Applied
Objective:

- 82) Tara believes that it is extremely important to be clean. She cleans her kitchen and bathroom daily and the rest of the house at least once every few days. She uses antibacterial soap and sterile water to clean. She says she wants people to be able to eat off her floors. Tara is very proud of her house and the way she keeps it. She _____
- A) has obsessive compulsive disorder.
 - B) has generalized anxiety disorder.
 - C) has specific phobia, situational type.
 - D) has no disorder.

Answer: D

Diff: 3 Type: MC Page Ref: 163

Topic: Obsessive-Compulsive Disorder

Skill: Applied

Objective:

- 83) Jessica spends much of her day counting or saying certain words to herself. When she is not doing this, she is checking whether she left her doors unlocked. These symptoms illustrate _____
- A) obsessions.
 - B) compulsions.
 - C) both obsessions (the counting and saying words) and compulsions (the checking).
 - D) neither obsessions nor compulsions.

Answer: B

Diff: 1 Type: MC Page Ref: 163

Topic: Obsessive-Compulsive Disorder

Skill: Applied

Objective:

- 84) Mark feels the need to tap everything within his arms reach twice. He doesn't have any particular thoughts associated with this, he just becomes anxious if he doesn't do it, because "something bad might happen". Mark _____
- A) does not have obsessive compulsive disorder.
 - B) has an unusual type of specific phobia.
 - C) has no disorder.
 - D) has obsessive compulsive disorder.

Answer: D

Diff: 2 Type: MC Page Ref: 163

Topic: Obsessive-Compulsive Disorder

Skill: Applied

Objective:

- 85) Which of the following is necessary for a diagnosis of OCD? _____
- A) the symptomatic behavior causes distress
 - B) evidence of psychosis
 - C) a persistent awareness of the irrational nature of the obsessions experienced
 - D) the presence of compulsive behaviors

Answer: A

Diff: 2 Type: MC Page Ref: 163

Topic: Obsessive-Compulsive Disorder

Skill: Conceptual

Objective:

- 86) Dagmar is a musician and she loves the fact that she constantly hears new melodies in her head. In fact, she cannot remember a time when she did not hear music. Why is this NOT an example of an obsession? _____
- A) Obsessions must come on suddenly in response to a stressful life event.
 - B) Obsessions must be voluntary thoughts that a person knows are irrational.
 - C) Obsessions must be intrusive thoughts the person finds disturbing.
 - D) Obsessions must be accompanied by ritualistic actions.

Answer: C

Diff: 3 Type: MC Page Ref: 163

Topic: Obsessive-Compulsive Disorder

Skill: Applied

Objective:

- 87) Which of the following is unique about OCD, as compared to other anxiety disorders? 87) _____
- A) The incidence is about equal for men and women.
 - B) It is a culture-bound disorder.
 - C) It usually begins in childhood.
 - D) It afflicts more men than women.

Answer: A

Diff: 1 Type: MC Page Ref: 164

Topic: Obsessive-Compulsive Disorder

Skill: Factual

Objective:

- 88) Which of the following is true of obsessive-compulsive disorder? 88) _____
- A) Although most people have both obsessive thoughts and compulsive rituals, rarely are the two issues related.
 - B) Once thought to be a fairly common disorder, with new diagnostic criteria, it is seen as quite rare.
 - C) This disorder tends to begin in adolescence or early adulthood, but is not uncommon in children.
 - D) Nearly six times more women than men suffer from OCD.

Answer: C

Diff: 2 Type: MC Page Ref: 164

Topic: Obsessive-Compulsive Disorder

Skill: Factual

Objective:

- 89) Which of the following is not a common type of obsession seen in OCD? 89) _____
- A) fear of contamination
 - B) fear of discrimination
 - C) pathological doubt
 - D) lack of symmetry

Answer: B

Diff: 1 Type: MC Page Ref: 164-165

Topic: Obsessive-Compulsive Disorder

Skill: Factual

Objective:

- 90) What of the following are amongst the most common obsessive thoughts in people with OCD? 90) _____
- A) fear of contamination and fear of harming others
 - B) worry about humiliating oneself in public
 - C) desire to get intoxicated on drugs and alcohol
 - D) being the victim of crime and having a panic attack in public

Answer: A

Diff: 1 Type: MC Page Ref: 164-165

Topic: Obsessive-Compulsive Disorder

Skill: Factual

Objective:

- 91) Which of the following is NOT one of the five primary types of compulsive acts seen in individuals with OCD? 91) _____
- A) scanning
 - B) cleaning
 - C) repeating
 - D) checking

Answer: A

Diff: 1 Type: MC Page Ref: 165

Topic: Obsessive-Compulsive Disorder

Skill: Factual

Objective:

- 92) What do all of the compulsions seen in OCD have in common? 92) _____
- A) They are engaged in as means of alleviating tension.
 - B) There is a strong desire to engage in the compulsion.
 - C) All involve counting.
 - D) They all take 15-20 minutes to perform.

Answer: A

Diff: 1 Type: MC Page Ref: 165

Topic: Obsessive-Compulsive Disorder

Skill: Conceptual

Objective:

- 93) According to the behavioral viewpoint, compulsions are repeated because 93) _____
- A) they serve to reduce anxiety.
 - B) they are reflexive responses that can't be controlled.
 - C) they permit the expression of repressed urges.
 - D) the act of engaging in the behavior is pleasurable.

Answer: A

Diff: 1 Type: MC Page Ref: 165

Topic: Obsessive-Compulsive Disorder/Psychosocial Causal Factors

Skill: Factual

Objective:

- 94) Which of the following is a true statement about Mowrer's two-process theory of avoidance learning? 94) _____
- A) While it suggests a mechanisms for the development of GAD, it does not account for the development of panic disorder and OCD.
 - B) It provides an explanation for the development of all anxiety disorders.
 - C) It does not account for the effectiveness of extinction procedures in the treatment of OCD.
 - D) The two processes that it refers to are classical and operant conditioning.

Answer: D

Diff: 2 Type: MC Page Ref: 165

Topic: Obsessive-Compulsive Disorder/Psychosocial Causal Factors

Skill: Applied

Objective:

- 95) Mowrer's two-process theory of avoidance learning provides a theoretical rationale for an effective treatment for obsessive-compulsive disorder. What is this treatment? 95) _____
- A) exposure prevention therapy
 - B) exposure therapy with response prevention
 - C) response provocation therapy
 - D) response activation therapy

Answer: B

Diff: 2 Type: MC Page Ref: 165

Topic: Obsessive-Compulsive Disorder/Psychosocial Causal Factors

Skill: Conceptual

Objective:

- 96) The fact that dirt and contamination were threats to our ancestors suggests 96) _____
- A) that obsessive-compulsive disorder probably exists in many species, not just humans.
 - B) that preparedness theory may help explain obsessive-compulsive disorder.
 - C) that obsessive-compulsive disorder is one of the oldest disorders in existence.
 - D) that fear of these things is rational.

Answer: B

Diff: 2 Type: MC Page Ref: 166

Topic: Obsessive-Compulsive Disorder/Psychosocial Causal Factors

Skill: Factual

Objective:

- 97) Which of the following provides a unique challenge when trying to eliminate the obsessions seen in OCD? 97) _____
- A) Attempting to not think about something may lead to thinking about it more.
 - B) The client is likely to feel that their concerns are justified.
 - C) Medications are ineffective in suppressing obsessions.
 - D) Obsessions are likely to only be experienced under certain environmental conditions.

Answer: A

Diff: 1 Type: MC Page Ref: 166
Topic: Obsessive-Compulsive Disorder/Psychosocial Causal Factors
Skill: Conceptual
Objective:

- 98) Thought-action fusion is 98) _____
- A) support for the preparedness theory of obsessive-compulsive disorder.
 - B) a psychotic symptom that helps distinguish between anxiety disorders and psychotic disorders.
 - C) the belief that thinking about something is as bad as actually doing it.
 - D) the reason why trying to suppress unwanted thoughts often causes an increase in those thoughts.

Answer: C

Diff: 2 Type: MC Page Ref: 166
Topic: Obsessive-Compulsive Disorder/Psychosocial Causal Factors
Skill: Factual
Objective:

- 99) Research on the role of genetics in the development of OCD suggests that 99) _____
- A) genes do not play a role in OCD.
 - B) altered serotonergic functioning is inherited.
 - C) an abnormality on the X chromosome underlies OCD.
 - D) there may be personality factors that increase susceptibility to OCD.

Answer: D

Diff: 2 Type: MC Page Ref: 166-167
Topic: Obsessive-Compulsive Disorder/Biological Causal Factors
Skill: Conceptual
Objective:

- 100) As discussed in your text, much evidence now suggests a number of biological causal factors in obsessive-compulsive disorder including all of the following EXCEPT 100) _____
- A) a moderate genetic contribution.
 - B) decreased activity in the orbital frontal cortex.
 - C) abnormalities in serotonin systems.
 - D) abnormalities in the functioning of the basal ganglia.

Answer: B

Diff: 1 Type: MC Page Ref: 166-167
Topic: Obsessive-Compulsive Disorder/Biological Causal Factors
Skill: Factual
Objective:

- 101) Anxiety disorders 101) _____
- A) exist only in technologically advanced cultures.
 - B) are especially prevalent in Japan, where strong pressures exist to compete and succeed.
 - C) involve different causal factors in different cultures.
 - D) probably exist in all societies, but take different forms in different cultures.

Answer: D

Diff: 1 Type: MC Page Ref: 169
Topic: General Sociocultural Causal Factors/All Anxiety Disorders
Skill: Conceptual
Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 102) Neurotic behavior is an indication that a person is out of touch with reality. 102) _____
- Answer: True False
- Diff: 2 Type: TF Page Ref: 138
Topic:
Skill:
Objective:

- 103) By definition, a panic attack is a fear response that occurs in the absence of any danger. 103) _____
Answer: True False
Diff: 3 Type: TF Page Ref: 139
Topic:
Skill:
Objective:
- 104) While anxiety is characterized by avoidant behavior, a desire to flee is more consistent with fear. 104) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 139
Topic:
Skill:
Objective:
- 105) While fear responses may be conditioned to formerly neutral stimuli, conditioned anxiety does not exist. 105) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 139
Topic:
Skill:
Objective:
- 106) Many of those with blood-injury phobia have fainted in response to the presence of blood. 106) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 142
Topic:
Skill:
Objective:
- 107) Only humans exhibit vicarious conditioning of a fear response. 107) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 143
Topic:
Skill:
Objective:
- 108) Events that happen before, during, and after the pairing of a neutral stimulus and fear-eliciting stimulus will play a role in determining the level of fear that is later seen in response to the previous neutral stimulus. 108) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 143-144
Topic:
Skill:
Objective:
- 109) Exposure therapy can be very successful in as little as a single, three hour session. 109) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 145
Topic:
Skill:
Objective:
- 110) Anti-anxiety medications may interfere with the beneficial effects of exposure therapy. 110) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 146
Topic:
Skill:
Objective:

- 111) All social phobics experience panic attacks. 111) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 146
Topic:
Skill:
Objective:
- 112) Unlike specific phobias, most people with social phobia have no evidence of classically conditioned learning. 112) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 147
Topic:
Skill:
Objective:
- 113) Very few excessively shy children develop social phobia as adults. 113) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 148
Topic:
Skill:
Objective:
- 114) To be diagnosed with panic disorder, people must have recurrent unexpected panic attacks. 114) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 149
Topic:
Skill:
Objective:
- 115) Individuals who report chest pains but have no evidence of heart disease should be assessed for panic disorder. 115) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 150
Topic:
Skill:
Objective:
- 116) People with agoraphobia are afraid of being around other people because they are shy. 116) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 150-151
Topic:
Skill:
Objective:
- 117) Panic disorder is twice as common in men as compared to women. 117) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 152
Topic:
Skill:
Objective:
- 118) Most first panic attacks occur during a stress-free time in the person's life. 118) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 152
Topic:
Skill:
Objective:

- 119) According to the fear of fear model of agoraphobia, internal bodily sensations become conditioned stimuli that may trigger a panic attack. 119) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 154
Topic:
Skill:
Objective:
- 120) People with high levels of anxiety sensitivity are less prone to developing anxiety disorders because they are better able to avoid uncomfortable situations. 120) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 155
Topic:
Skill:
Objective:
- 121) Breathing slowly is an example of a "safety behavior." 121) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 156
Topic:
Skill:
Objective:
- 122) People with panic disorder pay more attention to threatening information when compared to people without panic disorder. 122) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 156
Topic:
Skill:
Objective:
- 123) A lack of cues in the environment to signal when it is safe to relax may explain some of the behavior of individuals with panic disorder. 123) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 156
Topic:
Skill:
Objective:
- 124) People with generalized anxiety disorder worry about many different things. 124) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 158
Topic:
Skill:
Objective:
- 125) "Free-floating anxiety" is an accurate description of generalized anxiety disorder. 125) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 160
Topic:
Skill:
Objective:
- 126) When individuals with GAD worry, their emotional responses to aversive stimuli are suppressed. 126) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 160
Topic:
Skill:
Objective:

- 127) The neurobiological factors underlying panic attacks and GAD are not the same. 127) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 161-162
Topic:
Skill:
Objective:
- 128) One of the most common types of obsessions are fears of harming others. 128) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 164
Topic:
Skill:
Objective:
- 129) Counting and praying are examples of obsessions. 129) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 164-165
Topic:
Skill:
Objective:
- 130) Performing compulsions typically make people with obsessive-compulsive disorder more anxious. 130) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 165
Topic:
Skill:
Objective:
- 131) People with obsessive-compulsive disorder feel less of a sense of responsibility because of their symptoms. 131) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 166
Topic:
Skill:
Objective:
- 132) The most effective treatment for obsessive-compulsive disorder is medication. 130) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 168-169
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

- 133) What are the three components of fear? 133) _____
Answer: Modern definitions of fear define fear as a basic emotion, characterized by physiological, cognitive, and behavioral components. The sympathetic nervous system is activated by a fear-producing stimulus, a feeling of fear is experienced, and there is some appropriate behavioral response, such as running away.
Diff: 1 Type: SA Page Ref: 139
Topic:
Skill:
Objective:

- 134) Describe how a phobia could be learned through vicarious conditioning. 134) _____
Answer: Phobias can be learned by watching another person who has a phobia. Watching that person behave with fear around the feared object or situation can cause distress in the observer and lead to learning of the phobia.
Diff: 2 Type: SA Page Ref: 143
Topic:
Skill:
Objective:
- 135) What differences in life experiences can lessen the likelihood that someone will develop a phobia? 135) _____
Answer: Previous positive or non-traumatic experiences with the conditioned stimulus (e.g. if lots of good experiences with dogs, less likely to develop a phobia after being bitten), observing a non-fearful other approaching the situation or object, and having a feeling of control or ability to escape from a traumatic event will lessen the likelihood.
Diff: 2 Type: SA Page Ref: 143-144
Topic:
Skill:
Objective:
- 136) How do cognitions help maintain phobias? 136) _____
Answer: Phobic people are constantly on the alert for their phobic object or situation, or for relevant stimuli. Nonphobic people tend to focus their attention away from these things. Phobic people overestimate the probability that the feared object will be followed by something bad, which may strengthen the fear over time.
Diff: 2 Type: SA Page Ref: 144
Topic:
Skill:
Objective:
- 137) Describe the purpose of exposure therapy for specific phobia. 137) _____
Answer: To place people in the situation they fear for long enough that extinction occurs and their fear subsides.
Diff: 2 Type: SA Page Ref: 145
Topic:
Skill:
Objective:
- 138) What do the results of panic provocation agents tell us about panic disorder? 138) _____
Answer: That no one neurobiological mechanism could explain the results, so there may be multiple different biological causes of panic.
Diff: 2 Type: SA Page Ref: 152 & 155
Topic:
Skill:
Objective:
- 139) How do "safety behaviors" contribute to the persistence of panic disorder? 139) _____
Answer: Panic disorder often persists despite infrequent panic attacks and no occurrence of dire consequences as a result of a panic attack. This may be explained by the use of "safety behaviors," behaviors that the individual engages in before or during an attack. When nothing catastrophic occurs, it is attributed to the use of the safety behaviors, as opposed to the lack of any real danger.
Diff: 1 Type: SA Page Ref: 156
Topic:
Skill:
Objective:

140) What is necessary for a diagnosis of generalized anxiety disorder? 140) _____

Answer: In order to be diagnosed with generalized anxiety disorder (GAD), an individual must exhibit worry on the majority of days over at least a 6-month period. The worry must not be associated with another disorder and it must be perceived as difficult to control. In addition to the experience of worry, at least three of the following six symptoms must be present: (1) restlessness or edginess, (2) a feeling of being easily tired, (3) problems concentrating, (4) irritability, (5) muscle tension, and (6) sleep disturbance.

Diff: 2 Type: SA Page Ref: 158-159

Topic:

Skill:

Objective:

141) What role might a lack of safety signals play in the development and maintenance of generalized anxiety disorder? 141) _____

Answer: It is well-established that a lack of predictability and control creates stress. Safety signals are environment cues that signal when it is appropriate to relax. For example, if you knew your boss was always in a good mood on Friday, it might be safe to relax and not worry about a mistake you made. The fact that it is Friday would serve as a safety signal. The rest of the week, however, you should feel anxious about having made a mistake. When safety signals are present, it signals that one can relax. In the absence of such signals, anxiety prevails, providing a possible explanation for generalized anxiety disorder.

Diff: 2 Type: SA Page Ref: 160

Topic:

Skill:

Objective:

142) What benefit do those with GAD derive from worrying? 142) _____

Answer: Research has revealed that worrying does have a positive effect on those with GAD. While it does not prevent catastrophe, when those with GAD worry emotional and physiological responses to negative stimuli are suppressed. In other words, the act of worrying about an event lessens the impact of that event if and when it does occur.

Diff: 2 Type: SA Page Ref: 160-161

Topic:

Skill:

Objective:

143) What are obsessions? Compulsions? Give an example of each. 143) _____

Answer: Obsessions are persistent, recurrent, intrusive thoughts. Examples include contamination and fear of harming self or others. Compulsions are repetitive behaviors or mental acts the person feels driven to perform in a ritualistic way. They are usually in response to an obsession and done to reduce anxiety. Examples include washing and checking.

Diff: 2 Type: SA Page Ref: 163-165

Topic:

Skill:

Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

144) Discuss the difference between fear and anxiety.

Answer: Fear is a basic emotion that involves activation of the sympathetic nervous system, preparing the body for action. Fear is a response to a threat that we are faced with; fear is a reaction to a stimulus that is before us. Anxiety is not a basic emotion, but a combination of emotions and thoughts that are directed toward some anticipated event. Thus, fear is a reaction to a stimulus and anxiety is a more cognitive reaction to some dreaded event. Fear is a reaction to something in front of us, while anxiety is a dread of some future event.

GRADING RUBRIC: 9 points total, 3 for each definition and 3 for explaining how the two differ.

Diff: 1 Type: ES Page Ref: 139

Topic:

Skill:

Objective:

145) How do cognitive factors affect the onset and maintenance of social phobia? Explain and provide 3 specific examples to illustrate your understanding.

Answer: Cognitive factors play a role in both the onset and maintenance of social phobia. It has been suggested that those who develop social phobia may tend to expect that others will reject them or view them negatively, setting the stage for a fear of any situation in which one will be evaluated. An expectation that one will behave in a socially unacceptable fashion can also contribute to the development of social phobia, as well as increase the chance that one's behavior will be unacceptable. Thus, both negative expectations of how one will be perceived and how one will act can contribute to social phobia. These cognitive distortions may then maintain social phobia by increasing social awkwardness and a belief in negative evaluations. There is also some evidence to suggest that perceptions of uncontrollability and unpredictability, possibly resulting from social defeat, may also play a role in the development of social phobia.

GRADING RUBRIC: 6 points total, 2 for each of 3 cognitive factors identified.

Diff: 2 Type: ES Page Ref: 148
Topic:
Skill:
Objective:

146) Discuss the theory of evolutionary preparedness and how it may apply to specific phobia, social phobia and obsessive-compulsive disorder.

Answer: Our evolutionary history has affected the stimuli we are most likely to fear. People and primates seem genetically prepared to quickly associate certain objects with fear rather than other objects. While there are many types of specific phobias, most involve animals and situations that were a threat to our ancestors. Those primates and humans who had this rapid acquisition of fear were more likely to survive and pass on their genes. The fear itself is not inherited, the tendency to make certain connections quickly is. It was also advantageous to acquire fears of social stimuli that signaled danger - angry or contemptuous faces. So social phobias may have an evolutionary basis. The most common obsession in OCD - contamination and dirt - was also a threat to our ancestors and may have the same type of preparedness component.

GRADING RUBRIC: 10 points.

Diff: 2 Type: ES Page Ref: 144, 147 & 166
Topic:
Skill:
Objective:

147) Compare the comprehensive learning theory and the cognitive theory of panic disorder.

Answer: The comprehensive learning theory suggests that initial panic attacks cause conditioning of anxiety to internal and external cues. Anxiety then is created in the presence of these cues, leading to more panic attacks. Because anxiety is conditioned to internal cues, panic attacks can seem to come out of nowhere. The internal cues that resemble panic attacks can cause an attack, regardless of how the person is actually feeling at the time. The cognitive theory suggests that people with panic disorder are highly sensitive to body sensations and tend to catastrophize in response to unusual sensations. This causes a vicious circle ending in a panic attack. The difference here is that it is the meaning people attribute to their symptoms that cause the panic. It is not necessary for people to make any attributions in the learning theory. So the learning theory is a better explanation for panic attacks that occur without any negative thoughts, such as during sleep.

GRADING RUBRIC: 10 points, 5 for each theory.

Diff: 2 Type: ES Page Ref: 154-155
Topic:
Skill:
Objective:

148) Discuss the findings of cross-cultural research on the anxiety disorders. Provide at least two examples of disorders that illustrate the role of culture.

Answer: As with most disorders, cultural influences are seen in the anxiety disorders. While most emotional responses are universal, the stimuli that elicit emotional reactions will vary and how emotions are expressed varies. In the case of anxiety disorders, the prevalence of the different types of disorders varies with culture. Differences in sources of anxiety are easily found. Nigerians, for example, are likely to be concerned about fertility and maintaining a large family. In some Asian cultures Koro may be seen, a fear of the penis shrinking and disappearing. Both of these sources of anxiety are clearly related to the value the culture places on procreating, a concern not seen in most Western societies. Social phobia takes different forms across cultures, being characterized by a fear of embarrassing one's self in some and a fear of embarrassing others in some. Thus, the anxiety disorders are very much impacted by culture in numerous ways.

GRADING RUBRIC: 8 total, 4 for general discussion and 2 each for 2 specific examples.

Diff: 2 Type: ES Page Ref: 169-170

Topic:

Skill:

Objective:

- 1) C
- 2) A
- 3) B
- 4) A
- 5) D
- 6) A
- 7) D
- 8) A
- 9) C
- 10) D
- 11) B
- 12) A
- 13) B
- 14) A
- 15) D
- 16) D
- 17) A
- 18) A
- 19) D
- 20) A
- 21) B
- 22) A
- 23) D
- 24) C
- 25) A
- 26) D
- 27) A
- 28) B
- 29) A
- 30) C

- 31) C
- 32) D
- 33) A
- 34) C
- 35) B
- 36) C
- 37) B
- 38) D
- 39) A
- 40) D
- 41) B
- 42) A
- 43) B
- 44) A
- 45) C
- 46) A
- 47) D
- 48) C
- 49) B
- 50) D
- 51) C
- 52) A
- 53) D
- 54) C
- 55) C
- 56) C
- 57) B
- 58) B
- 59) A
- 60) B

- 61) B
- 62) C
- 63) C
- 64) C
- 65) B
- 66) A
- 67) A
- 68) C
- 69) B
- 70) A
- 71) A
- 72) A
- 73) C
- 74) D
- 75) C
- 76) B
- 77) B
- 78) D
- 79) A
- 80) A
- 81) D
- 82) D
- 83) B
- 84) D
- 85) A
- 86) C
- 87) A
- 88) C
- 89) B
- 90) A

- 91) A
- 92) A
- 93) A
- 94) D
- 95) B
- 96) B
- 97) A
- 98) C
- 99) D
- 100) B
- 101) D
- 102) FALSE
- 103) FALSE
- 104) TRUE
- 105) FALSE
- 106) TRUE
- 107) FALSE
- 108) TRUE
- 109) TRUE
- 110) TRUE
- 111) FALSE
- 112) FALSE
- 113) FALSE
- 114) TRUE
- 115) TRUE
- 116) FALSE
- 117) FALSE
- 118) FALSE
- 119) TRUE
- 120) FALSE

- 121) TRUE
- 122) FALSE
- 123) FALSE
- 124) TRUE
- 125) FALSE
- 126) TRUE
- 127) TRUE
- 128) TRUE
- 129) FALSE
- 130) FALSE
- 131) FALSE
- 132) FALSE
- 133) Modern definitions of fear define fear as a basic emotion, characterized by physiological, cognitive, and behavioral components. The sympathetic nervous system is activated by a fear-producing stimulus, a feeling of fear is experienced, and there is some appropriate behavioral response, such as running away.
- 134) Phobias can be learned by watching another person who has a phobia. Watching that person behave with fear around the feared object or situation can cause distress in the observer and lead to learning of the phobia.
- 135) Previous positive or non-traumatic experiences with the conditioned stimulus (e.g. if lots of good experiences with dogs, less likely to develop a phobia after being bitten), observing a non-fearful other approaching the situation or object, and having a feeling of control or ability to escape from a traumatic event will lessen the likelihood.
- 136) Phobic people are constantly on the alert for their phobic object or situation, or for relevant stimuli. Nonphobic people tend to focus their attention away from these things. Phobic people overestimate the probability that the feared object will be followed by something bad, which may strengthen the fear over time.
- 137) To place people in the situation they fear for long enough that extinction occurs and their fear subsides.
- 138) That no one neurobiological mechanism could explain the results, so there may be multiple different biological causes of panic.
- 139) Panic disorder often persists despite infrequent panic attacks and no occurrence of dire consequences as a result of a panic attack. This may be explained by the use of "safety behaviors," behaviors that the individual engages in before or during an attack. When nothing catastrophic occurs, it is attributed to the use of the safety behaviors, as opposed to the lack of any real danger.
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- 141) It is well-established that a lack of predictability and control creates stress. Safety signals are environment cues that signal when it is appropriate to relax. For example, if you knew your boss was always in a good mood on Friday, it might be safe to relax and not worry about a mistake you made. The fact that it is Friday would serve as a safety signal. The rest of the week, however, you should feel anxious about having made a mistake. When safety signals are present, it signals that one can relax. In the absence of such signals, anxiety prevails, providing a possible explanation for generalized anxiety disorder.

142) Research has revealed that worrying does have a positive effect on those with GAD. While it does not prevent catastrophe, when those with GAD worry emotional and physiological responses to negative stimuli are suppressed. In other words, the act of worrying about an event lessens the impact of that event if and when it does occur.

143) Obsessions are persistent, recurrent, intrusive thoughts. Examples include contamination and fear of harming self or others. Compulsions are repetitive behaviors or mental acts the person feels driven to perform in a ritualistic way. They are usually in response to an obsession and done to reduce anxiety. Examples include washing and checking.

Fear is a basic emotion that involves activation of the sympathetic nervous system, preparing the body for action. Fear is a response to a threat that we are faced with; fear is a reaction to a stimulus that is before us. Anxiety is not a basic emotion, but a combination of emotions and thoughts that are directed toward some anticipated event. Thus, fear is a reaction to a stimulus and anxiety is a more cognitive reaction to some dreaded event. Fear is a reaction to something in front of us, while anxiety is a dread of some future event.

GRADING RUBRIC: 9 points total, 3 for each definition and 3 for explaining how the two differ.

145) Cognitive factors play a role in both the onset and maintenance of social phobia. It has been suggested that those who develop social phobia may tend to expect that others will reject them or view them negatively, setting the stage for a fear of any situation in which one will be evaluated. An expectation that one will behave in a socially unacceptable fashion can also contribute to the development of social phobia, as well as increase the chance that one's behavior will be unacceptable. Thus, both negative expectations of how one will be perceived and how one will act can contribute to social phobia. These cognitive distortions may then maintain social phobia by increasing social awkwardness and a belief in negative evaluations. There is also some evidence to suggest that perceptions of uncontrollability and unpredictability, possibly resulting from social defeat, may also play a role in the development of social phobia.

GRADING RUBRIC: 6 points total, 2 for each of 3 cognitive factors identified.

146) Our evolutionary history has affected the stimuli we are most likely to fear. People and primates seem genetically prepared to quickly associate certain objects with fear rather than other objects. While there are many types of specific phobias, most involve animals and situations that were a threat to our ancestors. Those primates and humans who had this rapid acquisition of fear were more likely to survive and pass on their genes. The fear itself is not inherited, the tendency to make certain connections quickly is. It was also advantageous to acquire fears of social stimuli that signaled danger - angry or contemptuous faces. So social phobias may have an evolutionary basis. The most common obsession in OCD - contamination and dirt - was also a threat to our ancestors and may have the same type of preparedness component.

GRADING RUBRIC: 10 points.

147) The comprehensive learning theory suggests that initial panic attacks cause conditioning of anxiety to internal and external cues. Anxiety then is created in the presence of these cues, leading to more panic attacks. Because anxiety is conditioned to internal cues, panic attacks can seem to come out of nowhere. The internal cues that resemble panic attacks can cause an attack, regardless of how the person is actually feeling at the time. The cognitive theory suggests that people with panic disorder are highly sensitive to body sensations and tend to catastrophize in response to unusual sensations. This causes a vicious circle ending in a panic attack. The difference here is that it is the meaning people attribute to their symptoms that cause the panic. It is not necessary for people to make any attributions in the learning theory. So the learning theory is a better explanation for panic attacks that occur without any negative thoughts, such as during sleep.

GRADING RUBRIC: 10 points, 5 for each theory.

148) As with most disorders, cultural influences are seen in the anxiety disorders. While most emotional responses are universal, the stimuli that elicit emotional reactions will vary and how emotions are expressed varies. In the case of anxiety disorders, the prevalence of the different types of disorders varies with culture. Differences in sources of anxiety are easily found. Nigerians, for example, are likely to be concerned about fertility and maintaining a large family. In some Asian cultures Koro may be seen, a fear of the penis shrinking and disappearing. Both of these sources of anxiety are clearly related to the value the culture places on procreating, a concern not seen in most Western societies. Social phobia takes different forms across cultures, being characterized by a fear of embarrassing one's self in some and a fear of embarrassing others in some. Thus, the anxiety disorders are very much impacted by culture in numerous ways.

GRADING RUBRIC: 8 total, 4 for general discussion and 2 each for 2 specific examples.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) What do all mood disorders have in common? 1) _____
A) The presence of a negative mood state.
B) They are at least 6 months in duration.
C) They are characterized by emotional extremes.
D) The presence of irrational thoughts.

Answer: C

Diff: 1 Type: MC Page Ref: 174

Topic: Unipolar Mood Disorders

Skill: Conceptual

Objective:

- 2) What are the two key moods involved in mood disorders? 2) _____
A) anger and depression B) anger and mania
C) mania and depression D) sadness and anxiety

Answer: C

Diff: 1 Type: MC Page Ref: 174

Topic: Unipolar Mood Disorders

Skill: Factual

Objective:

- 3) Which of the following is true of unipolar major depression? 3) _____
A) It occurs five times as often in elderly people as in middle-aged adults.
B) It does not begin until adolescence.
C) It is the most prevalent mood disorder.
D) It is equally common in men and women.

Answer: C

Diff: 1 Type: MC Page Ref: 175

Topic: Unipolar Mood Disorders

Skill: Factual

Objective:

- 4) In order to meet the criteria for a major depressive episode, a person MUST have 4) _____
A) significant weight loss.
B) significant distress or impairment.
C) insomnia.
D) a depressed mood most of the day for at least 2 weeks.

Answer: B

Diff: 2 Type: MC Page Ref: 175

Topic: Unipolar Mood Disorders

Skill: Factual

Objective:

- 5) Manic and hypomanic episodes 5) _____
A) have totally different symptoms.
B) have the same symptoms but hypomanic episodes cause less impairment.
C) occur at the same time.
D) have the same symptoms but manic episodes cause less impairment.

Answer: B

Diff: 2 Type: MC Page Ref: 182

Topic: Types of Mood Disorders

Skill: Factual

Objective:

- 6) "Normal" depression becomes a mood disorder when 6) _____
A) there is no identifiable cause for it.
B) it lasts for more than a month.
C) it ceases to be justified and adaptive.
D) the degree of impairment is judged severe enough to warrant a diagnosis.

Answer: D

Diff: 1 Type: MC Page Ref: 176

Topic: Unipolar Mood Disorders

Skill: Conceptual

Objective:

- 7) Two months after her husband's death, Connie was still not herself. She often forgot to feed the dog, was late for work on a regular basis, and had not yet thrown out his clothes. Which of the following diagnoses would apply to Connie? 7) _____
A) postpartum depression
B) Connie does not have a disorder
C) dysthymia
D) adjustment disorder with depressed mood

Answer: B

Diff: 1 Type: MC Page Ref: 176

Topic: Unipolar Mood Disorders

Skill: Applied

Objective:

- 8) Newer research suggests that the DSM approach of not diagnosing depression in the first two months of bereavement? 8) _____
A) is accurate.
B) is too long – after one month is enough.
C) is completely wrong – depression should be diagnosed immediately even in bereavement.
D) is too short and too exclusive – other types of sadness responses should be excepted as well.

Answer: D

Diff: 2 Type: MC Page Ref: 184

Topic: Depressions that are not Mood Disorders

Skill: Factual

Objective:

- 9) "Postpartum blues" are 9) _____
A) a subtype of Major Depressive Disorder.
B) common, usually brief and not a disorder.
C) serious, brief and a type of unipolar depression.
D) a serious disorder.

Answer: B

Diff: 1 Type: MC Page Ref: 177

Topic: Unipolar Mood Disorders

Skill: Factual

Objective:

- 10) Which of the following must be present for at least 2 years in order for a diagnosis to be made? 10) _____
A) dysthymia
B) major depressive disorder
C) bipolar I disorder
D) bipolar II disorder

Answer: A

Diff: 1 Type: MC Page Ref: 177

Topic: Unipolar Mood Disorders

Skill: Factual

Objective:

- 11) How does dysthymia compare to major depressive disorder? 11) _____
- A) Symptoms change from day to day, with lots of days with normal functioning in between dysthymic episodes.
 - B) There are many more symptoms required to meet dysthymia than to meet major depressive disorder.
 - C) Symptoms are much more severe than in major depressive disorder.
 - D) Symptoms are mild to moderate but last for much longer than in major depressive disorder.

Answer: D

Diff: 2 Type: MC Page Ref: 177

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Conceptual

Objective:

- 12) What is the most important characteristic used to distinguish dysthymia from major depression? 12) _____
- A) The types of symptoms the person has.
 - B) The length of time the person has had the symptoms.
 - C) Whether or not there are occasional brief periods of normal moods during the disorder.
 - D) How severe the symptoms are.

Answer: C

Diff: 2 Type: MC Page Ref: 177

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Conceptual

Objective:

- 13) Sean describes himself as having hardly ever been happy. He occasionally feels okay, but it never lasts more than a day or so. He has trouble sleeping, doesn't eat much, and feels like nothing will ever change in his life. He says this has been going on for as long as he can remember. The best diagnosis for Sean is 13) _____
- A) bipolar II.
 - B) dysthymia.
 - C) cyclothymia.
 - D) major depressive disorder.

Answer: B

Diff: 2 Type: MC Page Ref: 177

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Applied

Objective:

- 14) Which of the following is NOT a symptom of major depressive disorder? 14) _____
- A) excessive fidgeting and an inability to sit still
 - B) bouts of anxiety
 - C) sleeping excessive amounts
 - D) considerable appetite and weight gain

Answer: B

Diff: 3 Type: MC Page Ref: 178

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Applied

Objective:

- 15) George, a twenty-two-year-old mechanic, always seems to have a cloud over his head. For the past three years, he has had problems sleeping and he seems to always overeat. While he may sometimes seem to be relatively content for short periods of time, this happens very rarely and it never lasts for more than a week. If George were to seek help for his negative mood state, which of the following diagnoses would he most likely receive? 15) _____
- A) adjustment disorder with depressed mood
 - B) dysthymia
 - C) chronic adjustment disorder with depressed mood
 - D) major depressive disorder

Answer: D

Diff: 1 Type: MC Page Ref: 178

Topic: Unipolar Mood Disorders

Skill: Applied

Objective:

- 16) Brittany come to a therapist complaining that she just doesn't enjoy life lately. She says that for the past couple of months, she finds she just doesn't feel like doing the things that she used to love to do. She has also lost a lot of weight and sleeps much more than usual but still feels tired all the time. She says she just can't concentrate on anything. However, she denies feeling sad. Brittany's most likely diagnosis is 16) _____
- A) dysthymic disorder. B) major depressive disorder.
C) bipolar II disorder. D) She has no disorder.

Answer: B

Diff: 2 Type: MC Page Ref: 178

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Applied

Objective:

- 17) Herbert awakens early in the morning and feels more depressed in the morning than the evening. He has lost all interest in activities and derives no pleasure from things that used to please him. If he is suffering from major depression, Herbert's symptoms suggest the subtype called 17) _____
- A) dysthymic. B) post-partum.
C) melancholic. D) mood-congruent.

Answer: C

Diff: 1 Type: MC Page Ref: 179

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Applied

Objective:

- 18) A person who shows psychotic depression that involves mood-incongruent thinking 18) _____
- A) rarely shows the symptoms of melancholia.
B) has a poorer prognosis than others with major depression.
C) usually responds rapidly to anti-depressant medications.
D) is diagnosed as having "double depression."

Answer: B

Diff: 1 Type: MC Page Ref: 179

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Factual

Objective:

- 19) Sam has been diagnosed with major depressive disorder. He tells you that he is certain the world will end next Tuesday because everyone in it is so wicked. He refuses to consider that he might be wrong. Sam has 19) _____
- A) melancholic features. B) atypical features.
C) mood congruent delusions. D) mood incongruent delusions.

Answer: C

Diff: 2 Type: MC Page Ref: 179

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Applied

Objective:

- 20) Kerry suffers from depression. He is experiencing delusions that his brain is deteriorating and that he is aging quickly. These delusions 20) _____
- A) suggest that he is suffering from a bipolar rather than a unipolar disorder.
B) are typical of depressive delusions because they are mood-congruent.
C) are most likely to persist after the depression remits.
D) are uncommon in depression and suggest a diagnosis of schizophrenia.

Answer: B

Diff: 1 Type: MC Page Ref: 179

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Factual

Objective:

- 21) Deena has major depressive disorder. Most days she feels very sad, but when her sister came and told Deena she was going to be an Aunt, Deena felt happy for a little while. She has been gaining weight and sleeping much of the day. Deena most likely has _____
- A) double depression.
 - B) psychotic features.
 - C) atypical features.
 - D) melancholic features.

Answer: C

Diff: 2 Type: MC Page Ref: 179

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Applied

Objective:

- 22) What is meant by the phrase "double depression"? _____
- A) The individual has been diagnosed with an anxiety disorder and a mood disorder.
 - B) Symptoms of both typical and atypical depression are exhibited.
 - C) An individual with dysthymia later develops major depressive disorder as well.
 - D) Symptoms are consistent with two different subtypes of major depression.

Answer: C

Diff: 1 Type: MC Page Ref: 180

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Factual

Objective:

- 23) Margaret has been suffering with dysthymia for several years and has sought treatment on several occasions. About one month ago she developed more severe symptoms of depression which have been maintained almost daily. The condition she is experiencing is best described as _____
- A) chronic melancholia.
 - B) adjustment disorder with bipolar features.
 - C) double depression.
 - D) recurring melancholic depression.

Answer: C

Diff: 1 Type: MC Page Ref: 180

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Factual

Objective:

- 24) A recurrent depressive episode _____
- A) typically lasts 2-3 weeks.
 - B) is characteristic of all forms of bipolar disorder.
 - C) suggests that chronic major depression has developed.
 - D) is preceded by one or more previous episodes.

Answer: D

Diff: 1 Type: MC Page Ref: 180

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Factual

Objective:

- 25) The average duration of an untreated episode of depression is _____
- A) 6 months.
 - B) unknown as individuals not seeking treatment haven't been studied.
 - C) 2 years.
 - D) 1 year.

Answer: A

Diff: 1 Type: MC Page Ref: 180

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Factual

Objective:

- 26) Which of the following is a true statement about the recurrence of depressive symptoms? 26) _____
- A) If a recurrence is not experienced within 1 year after an initial depressive episode, recurrence is highly unlikely.
 - B) Those with depression with psychotic features are less likely to experience a recurrence.
 - C) Most individuals diagnosed with major depression will exhibit a recurrence.
 - D) Clients are usually asymptomatic between depressive episodes.

Answer: C

Diff: 1 Type: MC Page Ref: 180

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Factual

Objective:

- 27) A rapid return of symptoms immediately after drug treatment is terminated is a common example of _____. A return to depressive symptoms after a period of spontaneous remission of symptoms is called a _____. 27) _____
- A) recurrence; relapse
 - B) mood-congruent depression; mood-incongruent depression
 - C) relapse; recurrence
 - D) melancholia; recurrence

Answer: C

Diff: 2 Type: MC Page Ref: 180

Topic: Unipolar Mood Disorders/Major Depressive Disorder

Skill: Conceptual

Objective:

- 28) Seasonal affective disorder is best described as a _____ depressive disorder. 28) _____
- A) psychotic
 - B) atypical
 - C) mood-congruent
 - D) recurrent

Answer: D

Diff: 1 Type: MC Page Ref: 181

Topic: Unipolar Mood Disorders/Seasonal Affective Disorder

Skill: Factual

Objective:

- 29) Over the past two years, Kelly has experienced depressive episodes three different times. Two of the three episodes occurred in the winter and the third occurred last spring. It is now winter and Kelly's depressive symptoms once again are consistent with major depressive disorder. Which of the following diagnoses should she be given? 29) _____
- A) dysthymic disorder
 - B) recurrent major depressive disorder with a seasonal pattern
 - C) recurrent major depressive disorder
 - D) chronic major depressive disorder

Answer: C

Diff: 2 Type: MC Page Ref: 181

Topic: Unipolar Mood Disorders/Seasonal Affective Disorder

Skill: Applied

Objective:

- 30) Which of the following statements is supported by research on the role of genetic influences in unipolar disorder? 30) _____
- A) The more severe the depressive disorder, the greater the genetic contribution.
 - B) Genes play a more significant causal role in bipolar disorders than they do in unipolar disorders.
 - C) Twin studies do not consistently find evidence of an inherited susceptibility to depression.
 - D) Bipolar and unipolar disorders are equally heritable.

Answer: A

Diff: 2 Type: MC Page Ref: 181

Topic: Unipolar Mood Disorders/Biological Causal Factors

Skill: Conceptual

Objective:

- 31) The finding that people with one type of serotonin transporter gene and childhood maltreatment had higher rates of depression than either those without the gene or those with the gene without the maltreatment suggests that 31) _____
- A) only one type of gene causes depression.
 - B) both a gene and certain environmental factors need to be present to cause depression.
 - C) childhood maltreatment causes depression.
 - D) either a gene or certain environmental factors need to be present to cause depression.

Answer: B

Diff: 2 Type: MC Page Ref: 181-182
Topic: Unipolar Mood Disorders/Biological Causal Factors
Skill: Factual
Objective:

- 32) Which of the following is a research finding that is inconsistent with the monoamine hypothesis of depression? 32) _____
- A) Drugs that increase serotonergic activity are effective in treating depression.
 - B) Heightened sensitivity to drugs that increase GABA activity is commonly seen in individuals with bipolar disorder.
 - C) Tricyclic antidepressants work by blocking monoamine reuptake.
 - D) Increases in noradrenergic activity have been seen in the brains of depressed patients.

Answer: D

Diff: 2 Type: MC Page Ref: 182
Topic: Unipolar Mood Disorders/Biological Causal Factors
Skill: Applied
Objective:

- 33) Drugs that alter the availability of norepinephrine and serotonin are not clinically effective in the treatment of depression for several weeks. Which of the following does this finding suggest? 33) _____
- A) These neurotransmitters are not involved in depression.
 - B) That the effectiveness of antidepressants is a placebo effect, as opposed to a result of a biochemical manipulation.
 - C) Changes in neurotransmitter function, as opposed to neurotransmitter level, cause depression.
 - D) It is overactivity of these neurotransmitters that underlies depression, not underactivity.

Answer: C

Diff: 2 Type: MC Page Ref: 183
Topic: Unipolar Mood Disorders/Biological Causal Factors
Skill: Conceptual
Objective:

- 34) Individuals who do not show a decrease in cortisol levels in response to an injection of dexamethasone 34) _____
- A) are likely to be suffering from both major depression and a personality disorder.
 - B) will not respond well to pharmacological treatment.
 - C) have a severe form of depression.
 - D) have an HPA axis that is not functioning normally.

Answer: D

Diff: 2 Type: MC Page Ref: 183
Topic: Unipolar Mood Disorders/Biological Causal Factors
Skill: Factual
Objective:

- 35) Which of the following is most likely to be seen in children who are at risk for depression? 35) _____
- A) decreased left hemisphere activity
 - B) increased GABA levels
 - C) decreased right hemisphere activity
 - D) increased serotonin levels

Answer: A

Diff: 2 Type: MC Page Ref: 183
Topic: Unipolar Mood Disorders/Biological Causal Factors
Skill: Applied
Objective:

- 36) Which of the following is NOT a brain area that has been found to exhibit abnormalities in depressed patients? 36) _____
- A) hippocampus
B) anterior cingulate gyrus
C) basal ganglia
D) amygdala
- Answer: C
Diff: 3 Type: MC Page Ref: 184
Topic: Unipolar Mood Disorders/Biological Causal Factors
Skill: Factual
Objective:
- 37) Many people who are depressed 37) _____
- A) enter REM sleep at a normal time, but have very slow and mild rapid eye movements and have less overall time in REM sleep than normal.
B) enter REM sleep earlier than normal and have larger amounts of REM sleep early in the night.
C) show very little REM sleep, instead they spend large amounts of time in the deeper stages (3 and 4) of sleep.
D) do not enter REM sleep until much later in the night than normal and have smaller amounts of REM sleep throughout the night than normal.
- Answer: B
Diff: 2 Type: MC Page Ref: 185
Topic: Unipolar Mood Disorders/Biological Causal Factors
Skill: Factual
Objective:
- 38) The fact that bright light may be an effective treatment for seasonal affective disorder suggests that 38) _____
- A) this form of depression is produced by a malfunctioning biological clock that needs resetting.
B) seasonal affective disorder is a unique entity that should not be categorized with other forms of unipolar depression.
C) this is not a real form of depression as any response to light is merely a placebo effect.
D) changes in circadian rhythms underlie most forms of depression.
- Answer: A
Diff: 2 Type: MC Page Ref: 185
Topic: Unipolar Mood Disorders/Biological Causal Factors
Skill: Applied
Objective:
- 39) Independent life events are those that 39) _____
- A) are out of the client's control.
B) only affect one area of a client's functioning.
C) are linked causally to the behavior or personality of the client.
D) affect the client and not those around him or her.
- Answer: A
Diff: 2 Type: MC Page Ref: 186
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Conceptual
Objective:
- 40) John's erratic behavior finally ruined his marriage. What kind of life event would this be described as? 40) _____
- A) acute
B) independent
C) chronic
D) dependent
- Answer: D
Diff: 2 Type: MC Page Ref: 186
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Applied
Objective:

- 41) Which of the following is true? 41) _____
- A) Mildly stressful events are only associated with the onset of first time depression, not with recurrent episodes.
 - B) Most first time episodes of depression are preceded by a very stressful life event but this is not as true for recurrent episodes.
 - C) Both first time and recurrent episodes of depression are usually preceded by a very stressful life event.
 - D) Even mildly stressful events are associated with the onset of episodes of depression.

Answer: B

Diff: 2 Type: MC Page Ref: 186

Topic: Unipolar Mood Disorders/Psychosocial Causal Factors

Skill: Factual

Objective:

- 42) Which of the following is an example of a COGNITIVE diathesis for depression? 42) _____
- A) optimism
 - B) attributing negative events to external causes
 - C) neuroticism
 - D) attributing negative events to internal causes

Answer: D

Diff: 2 Type: MC Page Ref: 187

Topic: Unipolar Mood Disorders/Psychosocial Causal Factors

Skill: Applied

Objective:

- 43) Which of the following reactions to poor test performance suggests a cognitive diathesis for depression? 43) _____
- A) That test was way too hard.
 - B) I'll never understand this.
 - C) Why didn't I study more?
 - D) I'll do better next time.

Answer: B

Diff: 1 Type: MC Page Ref: 187

Topic: Unipolar Mood Disorders/Psychosocial Causal Factors

Skill: Applied

Objective:

- 44) Joanne tends to blow up at people and then feel guilty. She worries a lot. She complains that she just doesn't really find anything exciting and life is boring. Joanne 44) _____
- A) shows evidence of introversion, and has a mild risk of developing depression.
 - B) shows evidence of neuroticism and has a moderate risk of developing depression.
 - C) shows no evidence of any kind that would increase her risk for developing depression.
 - D) shows evidence of neuroticism and low positive affectivity, and has a high risk of developing depression.

Answer: D

Diff: 2 Type: MC Page Ref: 187

Topic: Unipolar Mood Disorders/Psychosocial Causal Factors

Skill: Applied

Objective:

- 45) According to Freud, depression 45) _____
- A) and grief are the same thing.
 - B) must be treated with introjection.
 - C) reflects fixation in the anal stage.
 - D) is a consequence of loss.

Answer: D

Diff: 1 Type: MC Page Ref: 188

Topic: Unipolar Mood Disorders/Psychosocial Causal Factors

Skill: Applied

Objective:

- 46) Freud suggested that depression _____
A) was actually a healthy adaptation to stress.
B) was anger turned inward.
C) involved the anal stage of development.
D) was a result of overly high self-esteem.
Answer: B
Diff: 2 Type: MC Page Ref: 188
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Factual
Objective:
- 47) Which of the following is a behavioral explanation for depression? _____
A) reliance on depressogenic schemas
B) insecure attachment
C) pessimistic tendencies
D) lack of environmental reinforcers
Answer: D
Diff: 1 Type: MC Page Ref: 189
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Factual
Objective:
- 48) Depressogenic schemas _____
A) serve a protective function and are readily modified by positive life experiences.
B) ensure that a low rate of reinforcement will be experienced.
C) are inherited.
D) predispose a person to develop depression.
Answer: D
Diff: 2 Type: MC Page Ref: 189
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Applied
Objective:
- 49) A therapist with a _____ orientation would emphasize the depressed person's need to improve their social skills. _____
A) behavioral
B) sociocultural
C) cognitive
D) psychodynamic
Answer: A
Diff: 1 Type: MC Page Ref: 189
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Conceptual
Objective:
- 50) Beck's negative cognitive triad involves feeling negatively about _____
A) one's self, one's experiences and one's future.
B) one's past, one's present and one's future.
C) one's family, one's self and one's friends.
D) helplessness, hopelessness and sorrow.
Answer: A
Diff: 2 Type: MC Page Ref: 189
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Factual
Objective:
- 51) Debbie receives her paper back from her instructor. It is marked with an A grade and has several positive comments. The instructor also suggested Debbie reword one small section. Debbie becomes extremely upset and tells her friends her instructor hated the paper and wants her to redo it. This is an example of _____
A) learned helplessness.
B) dichotomous thinking.
C) arbitrary inference.
D) selective abstraction.
Answer: D

Diff: 2 Type: MC Page Ref: 189
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Applied
Objective:

- 52) Selective abstraction 52) _____
A) is part of Beck's cognitive triad.
B) is a tendency to focus on one negative detail of a situation while ignoring other aspects.
C) is a tendency to jump to conclusions based on little or no evidence.
D) is a tendency to think in extremes.

Answer: B

Diff: 2 Type: MC Page Ref: 189
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Conceptual
Objective:

- 53) Which of the following is an example of arbitrary inference? 53) _____
A) Life is so unfair.
B) Why should I even try? She'll definitely reject me.
C) She looked at me funny. She hates me.
D) If she won't go out with me, I'll die.

Answer: C

Diff: 2 Type: MC Page Ref: 189
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Applied
Objective:

- 54) While there is much support for some elements of Beck's cognitive theory, 54) _____
A) it does not account for sex differences in depression.
B) treatments based on his view of depression are not effective.
C) findings supporting it as a causal hypothesis are limited.
D) it does not account for the known biological aspects of depression.

Answer: C

Diff: 2 Type: MC Page Ref: 190
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Conceptual
Objective:

- 55) No matter what prisoners try to do, they cannot escape. Eventually they become passive and depressed. 55) _____
This illustrates the central idea in the _____ theory of depression.
A) behavioral B) depressogenic schema
C) learned helplessness D) attribution

Answer: C

Diff: 1 Type: MC Page Ref: 190
Topic: Causal Factors in Unipolar Disorder/Psychosocial Factors
Skill: Applied
Objective:

- 56) Jacob and Matt both flunk their math test. Jacob says to his friends that there is no point in his continuing 56) _____
in the course because the teacher just doesn't like him. Matt says he is going to drop the course because he
is just stupid in math. According to the reformulated learned helplessness theory
A) Jacob is more likely to become depressed than Matt.
B) Matt is more likely to become depressed than Jacob.
C) Matt is more likely to feel helpless than Jacob.
D) Jacob is more likely to feel helpless than Matt.

Answer: B

Diff: 2 Type: MC Page Ref: 190-191
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Applied
Objective:

- 57) Which of the following is the type of attribution that is most likely to cause depression? 57) _____
- A) I am never going to make it through this course because the professor is unfair.
 - B) I am never going to make it through this course because it is too early in the morning and I'm having trouble getting up.
 - C) I am never going to make it through this course because I just don't feel like studying lately.
 - D) I am never going to make it through this course because I'm stupid and I just can't learn the material.

Answer: D

Diff: 2 Type: MC Page Ref: 190-191

Topic: Unipolar Mood Disorders/Psychosocial Causal Factors

Skill: Applied

Objective:

- 58) Abramson revised the learned helplessness theory to suggest that 58) _____
- A) the number of negative life events someone experiences is more important than their attributions for those events.
 - B) hopelessness is needed in addition to helplessness in order to produce depression.
 - C) hopelessness is needed to produce depression, helplessness is not important.
 - D) the internal/external dimension of attributions is the most important to depression.

Answer: B

Diff: 2 Type: MC Page Ref: 190-191

Topic: Unipolar Mood Disorders/Psychosocial Causal Factors

Skill: Factual

Objective:

- 59) Which of the following statements about gender difference in unipolar depression is true? 59) _____
- A) Biological factors have been most clearly linked to the development of depression in those who do not have a family history of mood disorders.
 - B) Gender differences in depression are seen in all cultures and at all ages.
 - C) As a biological basis for the gender differences in depression has not been established, researchers have sought a psychosocial explanation.
 - D) The finding that boys are more likely to be depressed than girls prior to puberty is consistent with the established role of hormones in the development of depression.

Answer: C

Diff: 2 Type: MC Page Ref: 192-193

Topic: Unipolar Mood Disorders/Psychosocial Causal Factors

Skill: Conceptual

Objective:

- 60) When a nondepressed student lives with a depressed roommate, which of the following often results? 60) _____
- A) a decrease in depression in the depressed roommate
 - B) increased depression and hostility in the roommate who was not originally depressed
 - C) frequent verbal fights which may even become physical
 - D) increased caretaking by the nondepressed roommate, but only after the nondepressed roommate becomes depressed

Answer: B

Diff: 2 Type: MC Page Ref: 192

Topic: Causal Factors in Unipolar Disorder/Psychosocial Factors

Skill: Applied

Objective:

- 61) Which variable has been found to be strongly linked to relapse in depression? 61) _____
- A) Criticism.
 - B) Denial.
 - C) Unrealistic hopefulness.
 - D) Living together without being married.

Answer: A

Diff: 2 Type: MC Page Ref: 202

Topic: Depression/Marriage and Family Life

Skill: Factual

Objective:

- 62) Childhood depression 62) _____
A) has not been associated with parental depression.
B) can usually be causally related to marital discord.
C) has been clearly linked to genetic factors.
D) is more likely in children with a depressed parent.

Answer: D

Diff: 1 Type: MC Page Ref: 194
Topic: Unipolar Mood Disorders/Psychosocial Causal Factors
Skill: Factual
Objective:

- 63) A hypomanic episode is best described as a 63) _____
A) short manic episode.
B) manic episode followed by symptoms of a mild depression.
C) manic episode characterized by inactivity.
D) mild manic episode.

Answer: D

Diff: 1 Type: MC Page Ref: 194
Topic: Bipolar Disorders
Skill: Conceptual
Objective:

- 64) The main difference between a manic episode and a hypomanic episode is 64) _____
A) the amount of social and occupational impairment.
B) the number of symptoms the person has.
C) whether or not the person also experiences depression.
D) whether or not the person has irritable mood.

Answer: A

Diff: 1 Type: MC Page Ref: 194
Topic: Bipolar Disorders
Skill: Conceptual
Objective:

- 65) Bipolar disorder is to major depression as _____ is to _____. 65) _____
A) mania; hypomania B) hypomania; mania
C) cyclothymia; dysthymia D) dysthymia; cyclothymia

Answer: C

Diff: 1 Type: MC Page Ref: 194
Topic: Bipolar Disorders
Skill: Factual
Objective:

- 66) Which of the following is necessary for a diagnosis of cyclothymia? 66) _____
A) unremitting symptoms for a period of at least two years
B) the occurrence of two or more episodes of major depression
C) the occurrence of at least one manic episode
D) clinically significant distress or impairment

Answer: D

Diff: 2 Type: MC Page Ref: 194
Topic: Bipolar Disorders
Skill: Factual
Objective:

- 67) Which of the following would eliminate a potential diagnosis of cyclothymia? 67) _____
A) Gil had been showing both hypomanic and depressed symptoms for over three years.
B) Between her more recent episodes, Carla functioned quite well for 3 weeks.
C) Carol was absolutely convinced that her mother wanted to kill her, although there was no evidence for this.
D) Bob's most recent hypomanic episode lasted 3 days.

Answer: C

Diff: 1 Type: MC Page Ref: 194

Topic: Bipolar Disorders

Skill: Applied

Objective:

- 68) Lori has periods of dejection and apathy that are not as severe as are seen in major depression. She also has periods when she abruptly becomes elated and has little need for sleep. Her symptoms never reach the level of psychosis, but the mood swings have been recurrent for over four years. The best diagnosis for Lori is _____
- A) cyclothymia. B) Bipolar I disorder.
C) recurrent dysthymia. D) schizoaffective disorder.

Answer: A

Diff: 2 Type: MC Page Ref: 194

Topic: Bipolar Disorders

Skill: Applied

Objective:

- 69) Which of the following is necessary for a diagnosis of bipolar I disorder? _____
- A) the occurrence of at least one manic episode
B) unremitting symptoms for a period of at least two years
C) the occurrence of two or more episodes of major depression
D) symptoms of psychosis

Answer: A

Diff: 2 Type: MC Page Ref: 195

Topic: Bipolar Disorders

Skill: Factual

Objective:

- 70) Although bipolar I disorder is described as "bipolar," _____
- A) both depressed and manic symptoms typically occur simultaneously.
B) a year or two commonly passes between manic and depressed episodes.
C) few patients show both manic and depressed symptoms.
D) a depressed episode is not necessary for a diagnosis.

Answer: D

Diff: 2 Type: MC Page Ref: 195

Topic: Bipolar Disorders

Skill: Factual

Objective:

- 71) A diagnosis of bipolar I disorder indicates that the person has experienced _____
- A) an episode of mania.
B) an episode of mania and a major depression.
C) an episode of mania or major depression.
D) an episode of hypomania and a major depression.

Answer: A

Diff: 1 Type: MC Page Ref: 195

Topic: Bipolar Disorders

Skill: Factual

Objective:

- 72) Angela has had several periods of extremely "up" moods. They last for a couple of weeks and she has gotten into trouble several times. During those times she doesn't sleep, spends way too much money, gets involved in bad business decisions, talks quickly and thinks even more quickly and believes she can do anything. The best diagnosis for Angela is _____
- A) manic disorder. B) cyclothymic disorder.
C) bipolar I disorder. D) bipolar II disorder.

Answer: C

Diff: 2 Type: MC Page Ref: 195
Topic: Bipolar Disorders
Skill: Applied
Objective:

- 73) Which statement about bipolar I disorder is accurate? 73) _____
- A) The depressive phase is more likely to involve psychotic features than in major depressive disorder.
 - B) Single episodes of the disorder are extremely rare.
 - C) The onset of bipolar symptoms is never associated with seasons of the year as they are in unipolar depression.
 - D) Manic and depressive phases are always separated by lengthy intervals of normal mood.

Answer: B

Diff: 1 Type: MC Page Ref: 196
Topic: Bipolar Disorders
Skill: Factual
Objective:

- 74) A diagnosis of bipolar II disorder indicates that the person has experienced 74) _____
- A) an episode of hypomania and an episode of major depression.
 - B) an episode of mania.
 - C) an episode of mania and an episode of major depression.
 - D) an episode of mania or major depression.

Answer: A

Diff: 1 Type: MC Page Ref: 196
Topic: Bipolar Disorders
Skill: Factual
Objective:

- 75) Carleen comes to therapy because she is feeling sad. She says her she has often had periods of extreme 75) _____
sadness in the past and they typically last between 6 and 8 months. During those times she overeats, has trouble sleeping, feels exhausted all the time and thinks a lot about dying. At other times, however, Carleen says she feels wonderful. During those times, which last about a week, she gets a lot done, feels as if she could do anything, talks a lot and quickly, doesn't sleep but doesn't feel tired. Carleen says her "up" times are great and have never caused her any trouble. Carleen's most likely diagnosis is
- A) dysthymia.
 - B) bipolar I.
 - C) major depressive disorder.
 - D) bipolar II.

Answer: D

Diff: 2 Type: MC Page Ref: 196
Topic: Bipolar Disorders
Skill: Applied
Objective:

- 76) How is the depression in Bipolar disorders different than depression in Unipolar Major Depression? 76) _____
- A) The episodes are more severe and cause more impairment in Bipolar disorders.
 - B) The episodes are more severe and cause more impairment in Unipolar depression.
 - C) People with Bipolar disorders show more anxiety and weight loss during depressive episodes than those with Unipolar depression.
 - D) People with Unipolar depression have more psychotic features than people with Bipolar disorders

Answer: A

Diff: 2 Type: MC Page Ref: 205-206
Topic: Bipolar Disorders
Skill: Factual
Objective:

- 77) Which of the following is a true statement about rapid cycling? 77) _____
- A) lithium may trigger a cycling episode
 - B) it occurs in only those with Bipolar II disorder
 - C) it is seen in 5-10 percent of those with bipolar disorder
 - D) it is seen in men more than women

Answer: C

Diff: 2 Type: MC Page Ref: 196

Topic: Bipolar Disorders

Skill: Factual

Objective:

- 78) Why is it not wise to treat an individual who has a bipolar disorder with an antidepressant? 78) _____
- A) the drug may trigger rapid cycling
 - B) the drugs used to treat unipolar disorders do not alter the activity of the neurotransmitters that are affected in bipolar disorder
 - C) individuals with bipolar disorder may or may not exhibit symptoms of depression
 - D) the combination of antidepressants and lithium is likely to be lethal

Answer: A

Diff: 2 Type: MC Page Ref: 196

Topic: Bipolar Disorders

Skill: Factual

Objective:

- 79) The prognosis for bipolar disorder is 79) _____
- A) guarded—most people continue to have some symptoms.
 - B) unpredictable—all possible outcomes are seen frequently.
 - C) uncertain.
 - D) excellent—most people recover fully.

Answer: A

Diff: 1 Type: MC Page Ref: 197

Topic: Bipolar Disorders

Skill: Factual

Objective:

- 80) Reynaldo has been diagnosed with bipolar disorder. The most effective drug for him is 80) _____
- A) one which will increase his dopamine levels.
 - B) lithium.
 - C) dexamethasone.
 - D) one which will counteract the effect of sodium in his nerve cells.

Answer: B

Diff: 1 Type: MC Page Ref: 197

Topic: Causal Factors in Bipolar Disorders/Biological Factors

Skill: Applied

Objective:

- 81) Which of the following is true? 81) _____
- A) Unipolar disorder is more strongly inherited than bipolar disorder.
 - B) Bipolar disorder is more strongly inherited than unipolar disorder.
 - C) Both unipolar and bipolar disorders have a strong genetic contribution.
 - D) Neither unipolar nor bipolar disorders have a strong genetic contribution.

Answer: B

Diff: 2 Type: MC Page Ref: 198

Topic: Causal Factors in Bipolar Disorders/Biological Factors

Skill: Conceptual

Objective:

- 82) Efforts to find the gene or genes that underlie bipolar disorder suggest that 82) _____
- A) the underlying gene is on the X chromosome.
 - B) the underlying gene is on the Y chromosome.
 - C) there is a genetic basis for bipolar disorder, but not for cyclothymia.
 - D) multiple genes are involved.

Answer: D

Diff: 1 Type: MC Page Ref: 198
Topic: Causal Factors in Bipolar Disorders/Biological Factors
Skill: Conceptual
Objective:

- 83) Which of the following neurochemical profiles has been associated with manic episodes? 83) _____
- A) low serotonin, high norepinephrine, high dopamine
 - B) low serotonin, low norepinephrine, high dopamine
 - C) high serotonin, high norepinephrine, high dopamine
 - D) low serotonin, high norepinephrine, low dopamine

Answer: A

Diff: 2 Type: MC Page Ref: 198
Topic: Causal Factors in Bipolar Disorders/Biological Factors
Skill: Factual
Objective:

- 84) Knowing what we know about the neurotransmitter imbalances in bipolar disorder, a physician should give which of the following pieces of advice? 84) _____
- A) "If you can keep your serotonin levels normal, you do not have to worry about having a manic episode."
 - B) "Stay away from drugs that include lithium because bipolar is associated with excessive lithium activity."
 - C) "Don't take drugs that increase dopamine levels because they can produce manic-like behavior."
 - D) "Eat lots of foods that are rich in norepinephrine."

Answer: C

Diff: 1 Type: MC Page Ref: 198
Topic: Causal Factors in Bipolar Disorders/Biological Factors
Skill: Applied
Objective:

- 85) Which of the following is a hormonal abnormality associated with both bipolar disorder and unipolar depression? 85) _____
- A) increased thyroid hormone levels
 - B) increased cortisol levels
 - C) decreased cortisol levels
 - D) decreased thyroid hormone levels

Answer: B

Diff: 1 Type: MC Page Ref: 198
Topic: Causal Factors in Bipolar Disorders/Biological Factors
Skill: Factual
Objective:

- 86) Stressful life events 86) _____
- A) may precipitate an initial manic episode, but tend to play less of a role over time.
 - B) appear to increase the time to recovery from a manic episode.
 - C) do not trigger manic episodes.
 - D) play no role in the development or progression of Bipolar II disorder.

Answer: B

Diff: 1 Type: MC Page Ref: 199
Topic: Causal Factors in Bipolar Disorders/Psychosocial Factors
Skill: Factual
Objective:

- 87) A sophisticated prospective study of the role of stressful life events in bipolar disorder found that 87) _____
- A) low levels of stress protected an individual against manic episodes.
 - B) high levels of stress were associated with the occurrence of manic, hypomanic, and depressive episodes.
 - C) low levels of stress protected an individual against depressive episodes.
 - D) high levels of stress were not associated with the occurrence of manic or depressive episodes.

Answer: B

Diff: 1 Type: MC Page Ref: 199
Topic: Causal Factors in Bipolar Disorders/Psychosocial Factors
Skill: Factual
Objective:

- 88) Recent research on relapse among bipolar patients suggests that 88) _____
- A) relapse is most likely among those with unrealistically positive attributional styles.
 - B) stressful life events have very little influence.
 - C) personality styles interact with stress to increase the likelihood of relapse.
 - D) the more frequently a person has bipolar episodes, the less likely stressful events are able to induce a relapse.

Answer: C

Diff: 1 Type: MC Page Ref: 199
Topic: Causal Factors in Bipolar Disorders/Psychosocial Factors
Skill: Factual
Objective:

- 89) Cross-cultural studies of mood disorders are made difficult due to 89) _____
- A) differences in diagnostic practices.
 - B) the variability in the prevalence of unipolar disorders.
 - C) the variability in the prevalence of bipolar disorders.
 - D) the lack of clear-cut distinctions between bipolar and unipolar disorders.

Answer: A

Diff: 2 Type: MC Page Ref: 200
Topic: Sociocultural Factors Affecting Unipolar & Bipolar Disorders
Skill: Factual
Objective:

- 90) Which of the following might explain why rates of depression are low in China and Japan? 90) _____
- A) The lack of emphasis on the individual decreases the likelihood of blaming the self for failure.
 - B) Blunted emotions characterize Asian peoples, so both positive and negative emotional extremes are rare.
 - C) Symptoms of depression tend to be somatic.
 - D) Mental illnesses are not stigmatized, thus those who are depressed receive much social support and do not seek treatment.

Answer: A

Diff: 2 Type: MC Page Ref: 200
Topic: Sociocultural Factors Affecting Unipolar & Bipolar Disorders
Skill: Conceptual
Objective:

- 91) Selective serotonin reuptake inhibitors 91) _____
- A) were the first antidepressants to be developed.
 - B) may lead to sexual problems.
 - C) are more effective than the tricyclic antidepressants.
 - D) act to stabilize the mood swings of those with bipolar disorder.

Answer: B

Diff: 1 Type: MC Page Ref: 202
Topic: Mood Disorders/Pharmacotherapy and ECT
Skill: Factual
Objective:

- 92) Jill's marriage has suffered ever since the birth of her second child. Since the birth, she has been depressed and has had little interest in intimacy with her husband. Jill feels unattractive with the additional weight she carries since the birth and has been rejecting her husband's advances. After discussing her feelings with Dr. Tora, Dr. Tora has decided to prescribe her an antidepressant. Considering the problems she has been having in her marriage, which of the following is Dr. Tora most likely to prescribe? 92) _____
- A) vanlafaxine B) imipramine C) Bupropion D) Prozac

Answer: C

Diff: 3 Type: MC Page Ref: 203

Topic: Mood Disorders/Pharmacotherapy and ECT

Skill: Applied

Objective:

- 93) Lithium 93) _____
- A) is an anticonvulsant.
B) is well-tolerated by most bipolar patients.
C) is more effective than antidepressants at treating bipolar depression.
D) has both antimanic and antidepressant effects.

Answer: D

Diff: 1 Type: MC Page Ref: 203

Topic: Mood Disorders/Pharmacotherapy and ECT

Skill: Factual

Objective:

- 94) Quentin is severely depressed and presents an immediate and serious suicidal risk. In the past he has not responded to tricyclics. A wise course of action is to treat him with 94) _____
- A) lithium because suicide is almost always accompanied by manic episodes.
B) anticonvulsants such as carbamazepine and valproate because they can prevent future depressions.
C) Prozac because it can reduce symptoms in 12-24 hours.
D) electroconvulsive therapy because it can rapidly reduce symptoms.

Answer: D

Diff: 1 Type: MC Page Ref: 203-204

Topic: Mood Disorders/Pharmacotherapy and ECT

Skill: Applied

Objective:

- 95) Transcranial magnetic stimulation 95) _____
- A) is a noninvasive biological treatment for depression.
B) is a noninvasive biological test for changes in brain function in depression.
C) is a noninvasive biological treatment for manic episodes.
D) is a biological test for altered brain waves in bipolar disorder.

Answer: A

Diff: 2 Type: MC Page Ref: 204

Topic: Mood Disorders/Alternative Biological Treatments

Skill: Factual

Objective:

- 96) Nadia has been depressed for several months. She is considering cognitive therapy. What advice would you give her? 96) _____
- A) "Many studies have shown the usefulness of cognitive therapy and it seems to prevent relapse."
B) "Drug treatment is much more effective than cognitive therapy and has less likelihood of relapse."
C) "The only way that cognitive therapy is of any value is if it is coupled with family therapy."
D) "Cognitive therapy is much less effective than interpersonal therapy and takes much longer, too."

Answer: A

Diff: 2 Type: MC Page Ref: 204-205

Topic: Mood Disorders/Psychotherapy

Skill: Applied

Objective:

- 97) Behavior activation treatment 97) _____
A) combines pharmacotherapy and behavioral therapy.
B) combines interpersonal therapy and behavioral methodology.
C) emphasizes activity and involvement in interpersonal relationships.
D) focuses on implementing cognitive changes.

Answer: C

Diff: 2 Type: MC Page Ref: 205

Topic: Mood Disorders/Psychotherapy

Skill: Conceptual

Objective:

- 98) Dianas treatment for depression included training in meditation techniques that helped her become aware of her unwanted negative thoughts and to accept them as just thoughts. She was undergoing 98) _____
A) psychodynamic therapy. B) mindfulness-based cognitive therapy.
C) transcranial magnetic stimulation. D) behavioral activation therapy.

Answer: B

Diff: 2 Type: MC Page Ref: 205

Topic: Mood Disorders/Psychotherapy

Skill: Applied

Objective:

- 99) One factor that is especially likely to produce depression relapse is 99) _____
A) behavior by a spouse that can be interpreted as criticism.
B) excessive attention from family members.
C) family members ignoring the depressed behavior expressed by the depressed individual.
D) family members discussing the depressed individual's negative thoughts and feelings with him or her.

Answer: A

Diff: 2 Type: MC Page Ref: 205

Topic: Mood Disorders/Psychotherapy

Skill: Factual

Objective:

- 100) Which of the following is most likely to attempt suicide? 100) _____
A) a twenty-five-year-old divorced man B) a twenty-five-year-old single woman
C) a twenty-five-year-old single man D) a twenty-five-year-old divorced woman

Answer: D

Diff: 2 Type: MC Page Ref: 206

Topic: Suicide

Skill: Applied

Objective:

- 101) Which statement about the risk of suicide is true? 101) _____
A) About half of people who complete suicide do so during or in the recovery phase of a depressive episode.
B) Suicide is most likely when a person in a manic episode is getting "high."
C) Depressed people are no more likely to commit suicide than nondepressed people.
D) The risk of suicide is greatest at the lowest point in a depression.

Answer: A

Diff: 1 Type: MC Page Ref: 206

Topic: Suicide

Skill: Factual

Objective:

- 102) The majority of individuals who ATTEMPT suicide are _____ and the majority of those who COMPLETE suicide are _____. 102) _____
- A) adolescents; the elderly
 - B) women and people under age 35; men and people over age 65
 - C) the elderly; adolescents
 - D) men and people over age 65; women and people under age 35

Answer: B

Diff: 1 Type: MC Page Ref: 207

Topic: Suicide

Skill: Factual

Objective:

- 103) The director of a city health department wants to know who is most likely to complete suicide in her city. 103) _____
- The group with the highest risk is
- A) young women who were recently separated or divorced.
 - B) elderly men with chronic physical illnesses.
 - C) college-educated people.
 - D) teenagers, especially depressed girls.

Answer: B

Diff: 1 Type: MC Page Ref: 207

Topic: Suicide

Skill: Applied

Objective:

- 104) Childhood suicide 104) _____
- A) is one of the top ten causes of death for children in the United States.
 - B) has been declining since the early 1980's.
 - C) is common.
 - D) most commonly is seen in victims of early onset schizophrenia.

Answer: A

Diff: 1 Type: MC Page Ref: 207

Topic: Suicide

Skill: Factual

Objective:

- 105) Which of the following is most likely to attempt, but not complete, suicide? 105) _____
- A) Charlie, a sixteen-year-old alcoholic with a history of petty crimes
 - B) Crystal, a fourteen-year-old substance abusing teen who has been diagnosed with schizophrenia and bipolar disorder
 - C) thirteen-year-old Jamie who has been depressed since her parent's divorce
 - D) twelve-year-old Paul who receives constant rejection from the girls at school and has an overprotective mother

Answer: C

Diff: 1 Type: MC Page Ref: 207

Topic: Suicide

Skill: Applied

Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 106) The incidence of suicide is high amongst those with both unipolar and bipolar disorder. 106) _____

Answer: True False

Diff: 2 Type: TF Page Ref: 174

Topic:

Skill:

Objective:

- 107) Bipolar disorder is more common than unipolar disorder. 107) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 174
Topic:
Skill:
Objective:
- 108) A manic episode always involves significant impairment in functioning. 108) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 175
Topic:
Skill:
Objective:
- 109) Yearning and searching for a loved one who has died is a sign of normal grief, not depression. 109) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 176
Topic:
Skill:
Objective:
- 110) An individual who has experience a hypomanic episode can not be diagnosed with major depressive disorder. 110) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 23176
Topic:
Skill:
Objective:
- 111) A grief reaction is a type of major depressive disorder. 111) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 176-177
Topic:
Skill:
Objective:
- 112) Major depressive disorder is especially likely to occur after the birth of a child. 112) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 177
Topic:
Skill:
Objective:
- 113) Intermittent normal moods are one of the main ways to distinguish dysthymic disorder from major depressive disorder. 113) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 177
Topic:
Skill:
Objective:
- 114) A depressed individual who experiences delusions would be diagnosed with major depressive disorder with atypical features. 114) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 179
Topic:
Skill:
Objective:

- 115) Mood congruent psychotic features mean that the content of delusions or hallucinations is negative. 115) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 179
Topic:
Skill:
Objective:
- 116) Double depression means a person is experiencing a particularly severe type of major depressive disorder. 116) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 180
Topic:
Skill:
Objective:
- 117) It is likely that major depressive disorder is due to a single gene. 117) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 182
Topic:
Skill:
Objective:
- 118) Elevated cortisol levels are a common symptom of depression. 118) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 183
Topic:
Skill:
Objective:
- 119) People with major depressive disorder often have early onset REM sleep. 119) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 185
Topic:
Skill:
Objective:
- 120) The relationship between severe stress and depression is strongest for first time episodes. 120) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 186
Topic:
Skill:
Objective:
- 121) Beck's negative cognitive triad includes thoughts about self, significant others and relationships. 121) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 189
Topic:
Skill:
Objective:
- 122) Nondepressed people show a positive bias about the future. 122) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 189
Topic:
Skill:
Objective:

- 123) According to the original learned helplessness theory, if people experience stressful life events over which they feel they have no control, they may develop depression. 123) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 190
Topic:
Skill:
Objective:
- 124) At all ages studied the incidence of depression is higher for females than it is for males. 124) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 192
Topic:
Skill:
Objective:
- 125) Environmental factors appear to be more important than genetics in explaining major depressive disorder. 125) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 192
Topic:
Skill:
Objective:
- 126) Even after full recovery from major depression, criticism often has a powerful effect on those vulnerable to depression. 127) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 202
Topic:
Skill:
Objective:
- 127) Anxiety, guilt, and suicidal thoughts may be seen during a manic episode. 127) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 194
Topic:
Skill:
Objective:
- 128) If a person has had a manic episode, the diagnosis must be bipolar I. 128) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 195
Topic:
Skill:
Objective:
- 129) Depressive episodes in Unipolar Major Depression are the same as those found in Bipolar Disorders. 129) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 205-206
Topic:
Skill:
- 130) Full recovery from bipolar disorder is fairly rare. 130) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 197
Topic:
Skill:
Objective:

- 131) Bipolar disorder appears to be the most heritable adult psychiatric disorder. 131) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 198
Topic:
Skill:
Objective:
- 132) Stressful events have no impact on bipolar disorder. 132) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 199
Topic:
Skill:
Objective:
- 133) Depression occurs in all cultures that have been studied. 133) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 200
Topic:
Skill:
Objective:
- 134) Antidepressant drugs require at least 3 to 4 weeks to take effect. 134) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 203
Topic:
Skill:
Objective:
- 135) Lithium is the treatment of choice for both bipolar disorder and major depressive disorder. 135) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 203
Topic:
Skill:
Objective:
- 136) Approximately 90% of suicides had some psychiatric condition at the time of their death. 136) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 206
Topic:
Skill:
Objective:
- 137) Conduct disorder and substance abuse are more strongly associated with suicide completion than mood disorders. 137) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 207
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

138) What are the four phases of the grieving process? 138) _____

Answer: The normal response to the loss of spouse or close family member begins with a numbing and disbelief. This is followed by a yearning for the person that may possibly last for months. Eventually, despair is seen and then, finally, some adaptation and reorganization such that life can continue without the departed loved one.

Diff: 1 Type: SA Page Ref: 176-177

Topic:

Skill:

Objective:

139) What type of psychotic symptoms might be seen in someone suffering from major depression? 139) _____

Answer: The presence of psychotic symptoms indicate that a break with reality has occurred and involves the presence of hallucinations and/or delusions. The psychotic symptoms seen in depression are mood-congruent, they are symptoms that are consistent with being depressed. The depressed individual, for example, might believe that their friends and family want them dead.

Diff: 2 Type: SA Page Ref: 179

Topic:

Skill:

Objective:

140) What changes in sleep are seen in depression? 140) _____

Answer: Over half of depressed patients experience some form of insomnia. In addition to having problems getting to sleep or staying asleep, the sleep of the depressed is not normal. More time is spent in REM sleep and REM sleep is entered more quickly, leading to a reduction in the amount of time spent in other forms of deep sleep. The observed alterations in sleep suggest a general disturbance in biological rhythms.

Diff: 2 Type: SA Page Ref: 185

Topic:

Skill:

Objective:

141) What are independent and dependent life events? What is their importance? 141) _____

Answer: Independent—stressful events that are not a result of a person's behavior or character, dependent—are a result of those things, at least partly. Dependent events are especially important in the onset of major depression.

Diff: 2 Type: SA Page Ref: 186

Topic:

Skill:

Objective:

142) Describe the hopelessness theory of depression. 142) _____

Answer: Having a pessimistic attributional style along with negative life events is not enough to produce depression. A state of hopelessness is needed as well. Hopelessness expectancy is the perception that one has no control over a situation that is about to occur as well as an absolute belief that what is going to happen is going to be bad.

Diff: 2 Type: SA Page Ref: 191

Topic:

Skill:

Objective:

143) Discuss the impact of critical comments on depression. 143) _____

Answer: A person recovered from depression is likely to relapse if he/she is in a marriage characterized by high levels of critical and hostile comments. Also after recovery, criticism is still a powerful trigger for those vulnerable to depression.

Diff: 2 Type: SA Page Ref:

Topic:

Skill:

Objective:

- 144) What is the difference between Bipolar I and Bipolar II disorder? 144) _____
Answer: A diagnosis of Bipolar I is made when there had been manic episode. This diagnosis is made with or without the occurrence of a bout of major depression. In Bipolar II, there is at least one episode of major depression and a hypomanic episode. If the individual with Bipolar II exhibits a manic episode, a diagnosis of Bipolar I would be warranted.
Diff: 2 Type: SA Page Ref: 195-196
Topic:
Skill:
Objective:
- 145) In what way do the symptoms of depression in Western and non-Western societies differ? 145) _____
Answer: While the Western constellation of depressive symptoms is primarily psychological, in many cultures the symptoms tend to be more somatic. In those cultures in which there is great stigma associated with mental illness and/or a lack of emotional expressiveness, depression may manifest itself in symptoms such as weight loss, sleep disturbances, and sexual dysfunction. In addition, the feelings of guilt and worthlessness that characterize depression in individualistic cultures may not be seen in more communal cultures.
Diff: 1 Type: SA Page Ref: 200
Topic:
Skill:
Objective:
- 146) Discuss the risk factors for adolescent suicide. 146) _____
Answer: Mood disorders, conduct disorder and substance abuse all increase the risk of both nonfatal and fatal suicide attempts. If the adolescent has 2 or more of these, the risk for completion of suicide is extremely high. Antidepressant medications slightly increase the risk as well.
Diff: 2 Type: SA Page Ref: 207
Topic:
Skill:
Objective:
- 147) What are the warning signs of student suicide? 147) _____
Answer: Marked change in mood and behavior, especially withdrawal, decline in self-esteem, not taking care of personal hygiene, uncharacteristically impulsive behaviors, not attending classes. Many students communicate their impulses. Often the behavior is a reaction to the break-up of a romance.
Diff: 2 Type: SA Page Ref: 208
Topic:
Skill:
Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

- 148) What are the two main forms of mood disorder? How are these disorders further characterized?
Answer: The two main forms of mood disorder are unipolar, in which a person only experiences depression, and bipolar, in which a person has mood swings that range from hypomania or mania to depression. A person with bipolar disorder, however, may not exhibit any depression. The mood disorders are differentiated in terms of severity - the number of areas of life that are impaired and the degree of impairment, and duration - whether the disorder is acute, chronic, or intermittent. In addition, each type of mood disorder is further divided into multiple subtypes. GRADING RUBRIC: 8 points total - 4 points for correct identification, 2 points each for 2 aspects of how they are classified.
Diff: 1 Type: ES Page Ref: 174-175
Topic:
Skill:
Objective:

149) Discuss Beck's cognitive theory of depression.

Answer: Beck's theory is that thinking preceded and caused depression. First, people hold dysfunctional beliefs that predispose them to depression. These are rigid, extreme and unhelpful beliefs about the world. They create automatic, negative thoughts that center around the cognitive triad - the self, the world and the future. Negative beliefs and feelings about the triad are maintained by cognitive errors such as all or none reasoning and arbitrary inference. This theory has been well supported as an explanation for many aspects of depression, but evidence confirming it as a cause of depression is mixed.

GRADING RUBRIC: 10 points.

Diff: 2 Type: ES Page Ref: 188-189

Topic:

Skill:

Objective:

150) Distinguish between cyclothymic disorder, bipolar I disorder and bipolar II disorder. How are these disorders alike and how are they different?

Answer: Cyclothymia is best described as a less severe, yet chronic, version of bipolar disorder. While the individual with bipolar I disorder exhibits a full manic state, the individual with cyclothymia exhibits hypomania. People with bipolar II have full major depressive episodes, people with cyclothymia have depressive symptoms but not full episodes. In cyclothymia the lows and the highs do not rise to the level that is needed for a diagnosis of major depressive episode or manic episode, respectively. The disorders differ in that there need not be any depressive symptoms in bipolar I disorder, although this is usually the case as pure mania is rare. Only bipolar I involves manic episodes.

GRADING RUBRIC: 10 points - Descriptions of each disorder 2 points each, note the difference in severity 2, note the major differences 2.

Diff: 2 Type: ES Page Ref: 194-196

Topic:

Skill:

Objective:

- 1) C
- 2) C
- 3) C
- 4) B
- 5) B
- 6) D
- 7) B
- 8) D
- 9) B
- 10) A
- 11) D
- 12) C
- 13) B
- 14) B
- 15) D
- 16) B
- 17) C
- 18) B
- 19) C
- 20) B
- 21) C
- 22) C
- 23) C
- 24) D
- 25) A
- 26) C
- 27) C
- 28) D
- 29) C
- 30) A

- 31) B
- 32) D
- 33) C
- 34) D
- 35) A
- 36) C
- 37) B
- 38) A
- 39) A
- 40) D
- 41) B
- 42) D
- 43) D
- 44) B
- 45) D
- 46) B
- 47) D
- 48) D
- 49) A
- 50) A
- 51) D
- 52) B
- 53) C
- 54) C
- 55) C
- 56) B
- 57) D
- 58) B
- 59) C
- 60) B

- 61) A
- 62) D
- 63) D
- 64) A
- 65) C
- 66) D
- 67) C
- 68) A
- 69) A
- 70) D
- 71) A
- 72) C
- 73) B
- 74) A
- 75) D
- 76) A
- 77) C
- 78) A
- 79) A
- 80) B
- 81) B
- 82) D
- 83) A
- 84) C
- 85) B
- 86) B
- 87) B
- 88) C
- 89) A
- 90) A

- 91) B
- 92) C
- 93) D
- 94) D
- 95) A
- 96) A
- 97) C
- 98) B
- 99) A
- 100) D
- 101) A
- 102) B
- 103) B
- 104) A
- 105) C
- 106) TRUE
- 107) FALSE
- 108) TRUE
- 109) TRUE
- 110) TRUE
- 111) FALSE
- 112) FALSE
- 113) TRUE
- 114) FALSE
- 115) TRUE
- 116) FALSE
- 117) FALSE
- 118) FALSE
- 119) TRUE
- 120) TRUE

- 121) FALSE
- 122) TRUE
- 123) TRUE
- 124) FALSE
- 125) TRUE
- 126) TRUE
- 127) TRUE
- 128) TRUE
- 129) FALSE
- 130) TRUE
- 131) TRUE
- 132) FALSE
- 133) TRUE
- 134) TRUE
- 135) FALSE
- 136) TRUE
- 137) TRUE
- 138) The normal response to the loss of spouse or close family member begins with a numbing and disbelief. This is followed by a yearning for the person that may possibly last for months. Eventually, despair is seen and then, finally, some adaptation and reorganization such that life can continue without the departed loved one.
- 139) The presence of psychotic symptoms indicate that a break with reality has occurred and involves the presence of hallucinations and/or delusions. The psychotic symptoms seen in depression are mood-congruent, they are symptoms that are consistent with being depressed. The depressed individual, for example, might believe that their friends and family want them dead.
- 140) Over half of depressed patients experience some form of insomnia. In addition to having problems getting to sleep or staying asleep, the sleep of the depressed is not normal. More time is spent in REM sleep and REM sleep is entered more quickly, leading to a reduction in the amount of time spent in other forms of deep sleep. The observed alterations in sleep suggest a general disturbance in biological rhythms.
- 141) Independent - stressful events that are not a result of a person's behavior or character, dependent - are a result of those things, at least partly. Dependent events are especially important in the onset of major depression.
- 142) Having a pessimistic attributional style along with negative life events is not enough to produce depression. A state of hopelessness is needed as well. Hopelessness expectancy is the perception that one has no control over a situation that is about to occur as well as an absolute belief that what is going to happen is going to be bad.
- 143) A person recovered from depression is likely to relapse if he/she is in a marriage characterized by high levels of critical and hostile comments. Also after recovery, criticism

- 144) A diagnosis of Bipolar I is made when there had been manic episode. This diagnosis is made with or without the occurrence of a bout of major depression. In Bipolar II, there is at least one episode of major depression and a hypomanic episode. If the individual with Bipolar II exhibits a manic episode, a diagnosis of Bipolar I would be warranted.
- 145) While the Western constellation of depressive symptoms is primarily psychological, in many cultures the symptoms tend to be more somatic. In those cultures in which there is great stigma associated with mental illness and/or a lack of emotional expressiveness, depression may manifest itself in symptoms such as weight loss, sleep disturbances, and sexual dysfunction. In addition, the feelings of guilt and worthlessness that characterize depression in individualistic cultures may not be seen in more communal cultures.
- 146) Mood disorders, conduct disorder and substance abuse all increase the risk of both nonfatal and fatal suicide attempts. If the adolescent has 2 or more of these, the risk for completion of suicide is extremely high. Antidepressant medications slightly increase the risk as well.
- 147) Marked change in mood and behavior, especially withdrawal, decline in self-esteem, not taking care of personal hygiene, uncharacteristically impulsive behaviors, not attending classes. Many students communicate their impulses. Often the behavior is a reaction to the break-up of a romance.
- 148) The two main forms of mood disorder are unipolar, in which a person only experiences depression, and bipolar, in which a person has mood swings that range from hypomania or mania to depression. A person with bipolar disorder, however, may not exhibit any depression. The mood disorders are differentiated in terms of severity - the number of areas of life that are impaired and the degree of impairment, and duration - whether the disorder is acute, chronic, or intermittent. In addition, each type of mood disorder is further divided into multiple subtypes.
GRADING RUBRIC: 8 points total - 4 points for correct identification, 2 points each for 2 aspects of how they are classified.
- 149) Beck's theory is that thinking preceded and caused depression. First, people hold dysfunctional beliefs that predispose them to depression. These are rigid, extreme and unhelpful beliefs about the world. They create automatic, negative thoughts that center around the cognitive triad - the self, the world and the future. Negative beliefs and feelings about the triad are maintained by cognitive errors such as all or none reasoning and arbitrary inference. This theory has been well supported as an explanation for many aspects of depression, but evidence confirming it as a cause of depression is mixed.
GRADING RUBRIC: 10 points.
- 150) Cyclothymia is best described as a less severe, yet chronic, version of bipolar disorder. While the individual with bipolar I disorder exhibits a full manic state, the individual with cyclothymia exhibits hypomania. People with bipolar II have full major depressive episodes, people with cyclothymia have depressive symptoms but not full episodes. In cyclothymia the lows and the highs do not rise to the level that is needed for a diagnosis of major depressive episode or manic episode, respectively. The disorders differ in that there need not be any depressive symptoms in bipolar I disorder, although this is usually the case as pure mania is rare. Only bipolar I involves manic episodes.
GRADING RUBRIC: 10 points - Descriptions of each disorder 2 points each, note the difference in severity 2, note the major differences 2.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Conditions involving physical complaints or disabilities occurring in the absence of any physical pathology that could account for them are 1) _____

A) anxiety disorders. B) somatoform disorders.
C) hypochondriacal disorders. D) dissociative disorders.

Answer: B

Diff: 1 Type: MC Page Ref: 216
Topic: Somatoform and Dissociative Disorders
Skill: Factual
Objective:

- 2) Individuals with somatoform disorders 2) _____

A) usually have little concern over their state of health.
B) intentionally fake their illnesses in order to obtain some special treatment.
C) believe that their symptoms are real and serious.
D) generally have a physical cause for their illness.

Answer: C

Diff: 1 Type: MC Page Ref: 216
Topic: Somatoform and Dissociative Disorders
Skill: Factual
Objective:

- 3) All of the following are somatoform disorders EXCEPT 3) _____

A) somatization disorder. B) conversion disorder.
C) hypochondriasis. D) fugue disorder.

Answer: D

Diff: 1 Type: MC Page Ref: 216
Topic: Somatoform and Dissociative Disorders
Skill: Factual
Objective:

- 4) Evan is terrified because he is convinced that he has a terminal heart condition. He has consulted with several physicians about it who have found no evidence of any heart disease. Interestingly, Evan feels disappointed when the doctors find no physical problem. His diagnosis is probably 4) _____

A) pain disorder. B) conversion disorder.
C) somatization disorder. D) hypochondriasis.

Answer: D

Diff: 2 Type: MC Page Ref: 216
Topic: Somatoform Disorders/Hypochondriasis
Skill: Applied
Objective:

- 5) John and Ira eat dinner together after work. Several hours later, each starts to feel nausea and stomach pains. John is a hypochondriac, Ira is not. Most likely 5) _____

A) both men will think that the food they ate made them sick.
B) John will think the food he ate made him sick and Ira will not think anything at all.
C) John will think that he has stomach cancer and Ira will think the food he ate made him sick.
D) Ira will think he has stomach cancer and John will think the food he ate made him sick.

Answer: C

Diff: 2 Type: MC Page Ref: 216
Topic: Somatoform Disorders/Hypochondriasis
Skill: Applied
Objective:

- 6) If Ronald is typical of people with hypochondriasis, he will 6) _____
A) use a wide range of self-medications.
B) avoid visiting a physician.
C) feel relieved when his doctor tells him he is healthy.
D) have bizarre delusions about his body rotting out.

Answer: A

Diff: 1 Type: MC Page Ref: 217
Topic: Somatoform Disorders/Hypochondriasis
Skill: Applied
Objective:

- 7) Sara notices a lump on her side. She goes to her physician because she is worried that it is cancer. The physician sends her for a biopsy. During the three weeks between first noticing the lump and getting her results that it is not cancer, Sara was almost unable to function. She felt constant anxiety and thought constantly about having cancer. After she found out that she did not have cancer, Sara felt much better. Sara 7) _____
A) has hypochondriasis. B) has somatization disorder.
C) has conversion disorder. D) has no mental disorder.

Answer: D

Diff: 1 Type: MC Page Ref: 217
Topic: Somatoform Disorders/Hypochondriasis
Skill: Applied
Objective:

- 8) Consciously faking symptoms is characteristic of 8) _____
A) hypochondriasis. B) somatoform disorder.
C) somatization disorder. D) malingering.

Answer: D

Diff: 1 Type: MC Page Ref: 217
Topic: Somatoform Disorders/Hypochondriasis
Skill: Factual
Objective:

- 9) People with hypochondriasis, like people with obsessive-compulsive disorder, have intrusive thoughts that cause them anxiety. The major difference is 9) _____
A) in hypochondriasis, the thoughts are seen as inappropriate and alien, in obsessive-compulsive disorder the intrusive thoughts are seen as appropriate and reasonable.
B) in hypochondriasis, the thoughts are about one disease only, in obsessive-compulsive disorder the thoughts are about multiple diseases.
C) in hypochondriasis, the person knows the thoughts are coming from their own head and in obsessive-compulsive disorder, the person believes the thoughts are coming from someone else.
D) in hypochondriasis, the thoughts are seen as appropriate and reasonable, in obsessive-compulsive disorder the intrusive thoughts are seen as inappropriate and alien.

Answer: D

Diff: 1 Type: MC Page Ref: 218
Topic: Somatoform Disorders/Hypochondriasis
Skill: Conceptual
Objective:

- 10) Dysfunctional assumptions are a component of a cognitive-behavioral explanation of 10) _____
A) somatization disorder. B) depersonalization disorder.
C) dissociative fugue. D) hypochondriasis.

Answer: D

Diff: 1 Type: MC Page Ref: 218
Topic: Somatoform Disorders/Hypochondriasis
Skill: Factual
Objective:

- 11) Research on hypochondriasis has shown that people with the disorder tend to _____
A) overestimate their ability to handle being ill.
B) overestimate the dangerousness of diseases.
C) ignore information about illness.
D) underestimate the dangerousness of diseases.
Answer: B
Diff: 2 Type: MC Page Ref: 218
Topic: Somatoform Disorders/Hypochondriasis
Skill: Factual
Objective:
- 12) Response prevention has been used in the treatment of both _____
A) dissociative identity disorder and obsessive-compulsive disorder.
B) dissociative identity disorder and PTSD.
C) hypochondriasis and obsessive compulsive disorder.
D) hypochondriasis and PTSD.
Answer: C
Diff: 3 Type: MC Page Ref: 218
Topic: Somatoform Disorders/Hypochondriasis
Skill: Conceptual
Objective:
- 13) Catastrophizing about minor bodily sensations is characteristic of individuals with both _____
A) hypochondriasis and somatization disorder.
B) dissociative fugue and somatization disorder.
C) hypochondriasis and conversion disorder.
D) dissociative fugue and conversion disorder.
Answer: A
Diff: 2 Type: MC Page Ref: 218
Topic: Somatoform Disorders/Somatization Disorder
Skill: Factual
Objective:
- 14) Somatization disorder _____
A) involves multiple symptoms involving one body part of function.
B) involves the fear of having multiple different diseases.
C) involves multiple symptoms of at least four different types.
D) involves having pain in at least four different areas of the body.
Answer: C
Diff: 2 Type: MC Page Ref: 219
Topic: Somatoform Disorders/Somatization Disorder
Skill: Factual
Objective:
- 15) Somatization disorder and hypochondriasis are similar in that _____
A) both pay more attention to bodily sensations and see them as symptoms.
B) both react to physical symptoms by becoming more physically active.
C) both think they have a physical disease.
D) both think that they can easily cope with their symptoms.
Answer: A
Diff: 2 Type: MC Page Ref: 219
Topic: Somatoform Disorders/Somatization Disorder
Skill: Conceptual
Objective:

- 16) Somatization disorder and hypochondriasis differ because 16) _____
- A) in somatization disorder, people are concerned about multiple different physical symptoms, in hypochondriasis, people are concerned about having an organic disease.
 - B) in somatization disorder, people are concerned about having an organic disease, in hypochondriasis, people have physical symptoms involving one body part or function.
 - C) in somatization disorder, people have physical symptoms involving one body part or function, in hypochondriasis, people are concerned about having an organic disease.
 - D) in somatization disorder, people are concerned about having an organic disease, in hypochondriasis, people are concerned about multiple different physical symptoms.

Answer: A

Diff: 2 Type: MC Page Ref: 219

Topic: Somatoform Disorders/Somatization Disorder

Skill: Conceptual

Objective:

- 17) The most effective treatment to date for somatization disorder 17) _____
- A) does not decrease psychological distress.
 - B) has not been shown to effect physical functioning.
 - C) does not decrease health care expenditures.
 - D) results in only temporary changes in psychological symptoms.

Answer: A

Diff: 2 Type: MC Page Ref: 220

Topic: Somatoform Disorders/Somatization Disorder

Skill: Factual

Objective:

- 18) Ryan has diabetes but has no trouble functioning. One day, his wife informs him that she is leaving him. Ryan suddenly develops terrible pain in his back, to the point he is unable to get out of bed. His wife agrees to stay for "a while" to take care of him. Ryan probably has 18) _____
- A) somatization disorder.
 - B) paid disorder associated with both psychological factors and a general medical condition.
 - C) body dysmorphic disorder.
 - D) pain disorder associated with psychological factors.

Answer: D

Diff: 2 Type: MC Page Ref: 221

Topic: Somatoform Disorders/Pain Disorder

Skill: Applied

Objective:

- 19) What would be most helpful to a person with pain disorder? 19) _____
- A) restricting physical activity as much as possible
 - B) getting a great deal of sympathy and attention
 - C) being allowed to avoid unpleasant tasks while they are in pain
 - D) staying physically active despite the pain

Answer: D

Diff: 2 Type: MC Page Ref: 221

Topic: Somatoform Disorders/Pain Disorder

Skill: Factual

Objective:

- 20) People with predominantly psychogenic (psychologically caused) pain tend to 20) _____
- A) adopt an invalid lifestyle, visiting many doctors in search of relief.
 - B) seem indifferent to their symptoms.
 - C) report less pain than people whose somatoform pain disorder is related to a medical condition.
 - D) be consistent in their report of pain, regardless of the stress they feel.

Answer: A

Diff: 1 Type: MC Page Ref: 221

Topic: Somatoform Disorders/Pain Disorder

Skill: Factual

Objective:

- 21) Which of the following was once viewed as form of "hysteria?" 21) _____
- A) hypochondriasis
 - B) dissociative identity disorder
 - C) dissociative fugue
 - D) conversion disorder

Answer: D

Diff: 1 Type: MC Page Ref: 221

Topic: Somatoform Disorders/Conversion Disorder

Skill: Factual

Objective:

- 22) In what way was Freud's view of conversion disorder consistent with behavioral theories? 22) _____
- A) He believed that the symptoms of conversion disorder were maintained by the relief from anxiety they provided.
 - B) He advocated treating conversion disorder by punishing the problem behaviors.
 - C) Freud proposed that faulty thinking underlies the symptoms of conversion disorder.
 - D) Freud believed that those with conversion disorder were suffering bodily symptoms due to a conflict between their inner desires and the demands placed on them by society (the environment).

Answer: A

Diff: 2 Type: MC Page Ref: 222

Topic: Somatoform Disorders/Conversion Disorder

Skill: Conceptual

Objective:

- 23) The current view is that primary gain is _____ and secondary gain is _____. 23) _____
- A) attention from others; continued escape from a stressful situation
 - B) continued escape from a stressful situation; attention from others
 - C) the repression of sexual desires; sympathy and attention from others
 - D) attention from others; the repression of sexual desire
 - E) sympathy and attention from others; the repression of sexual desires

Answer: B

Diff: 2 Type: MC Page Ref: 222

Topic: Somatoform Disorders/Conversion Disorder

Skill: Factual

Objective:

- 24) Which of the following disorders was once the most frequently diagnosed disorder amongst soldiers? 24) _____
- A) hypochondriasis
 - B) dissociative identity disorder
 - C) conversion disorder
 - D) acute anxiety disorder

Answer: C

Diff: 2 Type: MC Page Ref: 222

Topic: Somatoform Disorders/Conversion Disorder

Skill: Factual

Objective:

- 25) Which of the following best explains why conversion disorder is a less common diagnosis today than it was historically? 25) _____
- A) Advances in the psychiatric profession have decreased the prevalence of all disorders linked to traumatic events.
 - B) Advances in the medical field have facilitated the determination of organic causes for physical dysfunctions.
 - C) Those once diagnosed with conversion disorder are now more likely to be diagnosed with PTSD.
 - D) Today's psychiatrists tend to view this diagnosis as one that lacks reliability and validity, thus they are hesitant to even consider it as a diagnostic option.

Answer: B

Diff: 2 Type: MC Page Ref: 222
Topic: Somatoform Disorders/Conversion Disorder
Skill: Conceptual
Objective:

- 26) Following the rejection of his latest novel, Jim experienced an inability to make some movements with his right hand. While he was unable to write, he could scratch and make other simple motions with his affected hand. Two weeks later he was able to write again. What is unique about Jim's case of conversion disorder? 26) _____
- A) Jim's symptoms subsided after only two weeks.
 - B) Jim had some ability to move his hand.
 - C) Jim only lost the ability to move his right hand.
 - D) Jim is male.

Answer: D

Diff: 2 Type: MC Page Ref: 222
Topic: Somatoform Disorders/Conversion Disorder
Skill: Applied
Objective:

- 27) A person who has conversion disorder where the symptom is blindness 27) _____
- A) is likely to refuse to move in an unfamiliar room because of extreme anxiety.
 - B) is likely to trip over every object in an unfamiliar room.
 - C) is likely to close his/her eyes in an unfamiliar room before walking about.
 - D) is likely to walk around an unfamiliar room without bumping into things.

Answer: D

Diff: 2 Type: MC Page Ref: 223
Topic: Somatoform Disorders/Conversion Disorder
Skill: Factual
Objective:

- 28) Which of the following is a good clue that a person has a conversion disorder rather than a true physical disorder? 28) _____
- A) They have had a medical examination.
 - B) Their symptoms don't match the symptoms of the particular disease.
 - C) Their symptoms match the symptoms of the particular disease too perfectly.
 - D) Their symptoms stay consistent no matter what state they are in—hypnotized, drugged, etc.

Answer: B

Diff: 2 Type: MC Page Ref: 223
Topic: Somatoform Disorders/Conversion Disorder
Skill: Factual
Objective:

- 29) Which of the following is a way to distinguish between someone with conversion disorder and someone who is malingering? 29) _____
- A) People with conversion disorder will be very cautious about talking about their symptoms, malingers are very willing to talk about them.
 - B) People with conversion disorder are very willing to talk about their symptoms, malingers will be more cautious.
 - C) If their symptoms are shown to be inconsistent, people with conversion disorder become very defensive while malingers do not.
 - D) People with conversion disorder are usually very defensive, malingers will try to seem very open and trusting.

Answer: B

Diff: 2 Type: MC Page Ref: 224
Topic: Somatoform Disorders/Conversion Disorder
Skill: Conceptual
Objective:

- 30) Earl falls at work. The initial medical tests showed no major physical problems. However, Earl calls the next day and tells his boss that he is unable to use his right leg because it is paralyzed. He also informs his boss that he plans to sue the company. Earl most likely _____
- A) has factitious disorder. B) is malingering.
C) has conversion disorder. D) has somatization disorder.

Answer: B

Diff: 2 Type: MC Page Ref: 224

Topic: Somatoform Disorders/Conversion Disorder

Skill: Applied

Objective:

- 31) Kristie is talking to a career counselor at college. She suddenly announces that it is pointless to discuss jobs, when she knows that her face is incredibly hideous due to her huge number of acne scars. The counselor is surprised, because, while she can barely see a couple of scars at Kristie's hairline, they were not noticeable until Kristie pointed them out. It is probable that Kristie suffers from _____
- A) conversion disorder. B) body dysmorphic disorder.
C) hypochondriasis. D) depersonalization disorder.

Answer: B

Diff: 2 Type: MC Page Ref: 224

Topic: Somatoform Disorders/Body Dysmorphic Disorder

Skill: Applied

Objective:

- 32) People with body dysmorphic disorder are similar to people with hypochondriasis in that _____
- A) both know that they are faking their symptoms for attention.
B) both ask for reassurance about their symptoms but don't feel relief when they get it.
C) both believe that a disease is causing their symptoms.
D) both focus only on symptoms involving the face.

Answer: B

Diff: 2 Type: MC Page Ref: 226

Topic: Somatoform Disorders/Body Dysmorphic Disorder

Skill: Conceptual

Objective:

- 33) Body dysmorphic disorder is thought to be related to _____
- A) obsessive-compulsive disorder and eating disorders.
B) panic disorder.
C) depression and bipolar disorders.
D) dissociative disorders.

Answer: A

Diff: 2 Type: MC Page Ref: 226

Topic: Somatoform Disorders/Body Dysmorphic Disorder

Skill: Factual

Objective:

- 34) Compulsive checking behaviors are characteristic of individuals with _____
- A) somatization disorder. B) body dysmorphic disorder.
C) conversion disorder. D) dissociative identity disorder.

Answer: B

Diff: 1 Type: MC Page Ref: 226

Topic: Somatoform Disorders/Body Dysmorphic Disorder

Skill: Factual

Objective:

- 35) A possible causal factor for body dysmorphic disorder is 35) _____
A) being taught that appearances are unimportant.
B) being raised in a family with sufferers of eating disorders.
C) having a dissociative disorder.
D) being criticized for his/her appearance when young.

Answer: D

Diff: 2 Type: MC

Page Ref: 237

Topic: Somatoform Disorders/ Body Dysmorphic Disorder

Skill: Factual

Objective:

- 36) What do the somatoform and dissociative disorders have in common? 36) _____
A) Both are more common in men.
B) Both appear to be ways of alleviating anxiety.
C) Both are characterized by physical complaints.
D) Both have onset during early childhood.

Answer: B

Diff: 2 Type: MC Page Ref: 228

Topic: Dissociative Disorders

Skill: Factual

Objective:

- 37) Dissociation 37) _____
A) only occurs in people with a dissociative disorder.
B) is a sign that something is seriously wrong.
C) is extremely rare and not necessarily pathological.
D) is extremely common and not necessarily pathological.

Answer: D

Diff: 2 Type: MC Page Ref: 228

Topic: Dissociative Disorders

Skill: Factual

Objective:

- 38) After learning of her father's death, Sophia felt dazed and confused. When speaking of her response to the news, she said she felt like she was in a movie watching the events happening to her. Despite this strange feeling, she understood what was happening and did the things that she needed to do. What can be said of Sophia's response to her father's death? 38) _____
A) She had a psychotic break.
B) She experienced an instance of derealization.
C) She experience an instance of depersonalization.
D) Her response is not typical and suggests that she is suffering from acute stress disorder.

Answer: B

Diff: 2 Type: MC Page Ref: 228

Topic: Dissociative Disorders/Depersonalization Disorder

Skill: Applied

Objective:

- 39) The disorder involving the experience of sudden loss of the sense of self is 39) _____
A) depersonalization disorder. B) psychogenic amnesia.
C) derealization disorder. D) disidentity disorder.

Answer: A

Diff: 1 Type: MC Page Ref: 228

Topic: Dissociative Disorders/Depersonalization Disorder

Skill: Factual

Objective:

- 40) The inability to learn new information is known as _____
A) retrograde amnesia. B) selective amnesia.
C) anterograde amnesia. D) localized amnesia.
Answer: C
Diff: 2 Type: MC Page Ref: 229
Topic: Dissociative Disorder/Dissociative Amnesia and Fugue
Skill: Factual
Objective:
- 41) Although Charlie remembered most of the main issues of the meeting, he had no recollection of the decision to eliminate the department that he headed. Which form of psychogenic amnesia would this be characteristic of? _____
A) selective amnesia B) localized amnesia
C) depersonalization amnesia D) autobiographical amnesia
Answer: A
Diff: 2 Type: MC Page Ref: 229
Topic: Dissociative Disorder/Dissociative Amnesia and Fugue
Skill: Applied
Objective:
- 42) Jeremy suffers from psychogenic amnesia. He probably _____
A) seems quite normal other than for his amnesia.
B) is able to recognize close friends and relatives but not acquaintances.
C) can perform only simple tasks, regardless of the complex work that he was able to do previously.
D) remembers only events from the past and does not remember skills he learned more recently.
Answer: A
Diff: 2 Type: MC Page Ref: 229
Topic: Dissociative Disorder/Dissociative Amnesia and Fugue
Skill: Applied
Objective:
- 43) Jill did not remember the accident happening, or the following two days. What form of amnesia is this memory loss characteristic of? _____
A) fugue B) localized C) selective D) derealization
Answer: B
Diff: 2 Type: MC Page Ref: 229
Topic: Dissociative Disorder/Dissociative Amnesia and Fugue
Skill: Applied
Objective:
- 44) When a person experiences psychogenic amnesia, only one portion of memory is usually affected. Which? _____
A) procedural memory (how to do things)
B) semantic memory (pertaining to language and concepts)
C) perceptual memory (the representation of things in images)
D) episodic memory (the events we have experienced)
Answer: D
Diff: 1 Type: MC Page Ref: 229
Topic: Dissociative Disorder/Dissociative Amnesia and Fugue
Skill: Factual
Objective:
- 45) Gerard became amnesic, wandered away from home and assumed a completely new identity as a shoe salesman. He suffers from _____
A) dissociative fugue. B) depersonalization.
C) malingering identity disorder. D) dissociative identity disorder.

Answer: A

Diff: 1 Type: MC Page Ref: 230
Topic: Dissociative Disorder/Dissociative Amnesia and Fugue
Skill: Applied
Objective:

- 46) Assuming a new identity in a new place is characteristic of 46) _____
A) dissociative identity disorder. B) dissociative fugue.
C) depersonalization disorder. D) all forms of dissociative amnesia.

Answer: B

Diff: 2 Type: MC Page Ref: 230
Topic: Dissociative Disorder/Dissociative Amnesia and Fugue
Skill: Factual
Objective:

- 47) Once a dissociative fugue ends, people 47) _____
A) can remember their past but keep their new identity.
B) remembers who they are but cannot remember their past.
C) can remember everything that has happened to them.
D) can remember their past but cannot remember what happened during the fugue.

Answer: D

Diff: 2 Type: MC Page Ref: 230
Topic: Dissociative Disorder/Dissociative Amnesia and Fugue
Skill: Factual
Objective:

- 48) Which of the following has been demonstrated about the effects of psychogenic amnesias on memory? 48) _____
A) Semantic memory is most dramatically affected.
B) Implicit memory is generally intact.
C) Episodic memory is not compromised.
D) Explicit memory is rarely affected.

Answer: B

Diff: 1 Type: MC Page Ref: 230
Topic: Dissociative Disorder/Dissociative Amnesia and Fugue
Skill: Factual
Objective:

- 49) Why has there been little systematic research conducted on dissociative amnesia and fugue? 49) _____
A) These conditions are too rare to permit more extensive study.
B) The diagnosis of both disorders is too controversial; until a consensus is reached as to whether or not there is a true "psychogenic" amnesia, further study is virtually impossible.
C) Case studies provide more useful information.
D) Both disorders are relatively brief, preventing researchers from having ample time to systematically conduct full evaluations.

Answer: A

Diff: 3 Type: MC Page Ref: 230
Topic: Dissociative Disorder/Dissociative Amnesia and Fugue
Skill: Conceptual
Objective:

- 50) The German man, in the study mentioned in the text, who had dissociative fugue denied that he could speak German. However, he learned German-English word pairs much faster than control words. This supports that 50) _____
A) mainly episodic memory is lost, implicit memory stays intact.
B) both episodic and implicit memory are affected.
C) most people with dissociative fugue are faking.
D) mainly implicit memory is lost, episodic memory stays intact.

Answer: A

Diff: 3 Type: MC Page Ref: 231
Topic: Dissociative Disorder/Dissociative Amnesia and Fugue
Skill: Conceptual
Objective:

- 51) Dissociative identity disorder was formerly known as _____
A) multiple personality disorder. B) conversion hysteria.
C) neurasthenia. D) psychogenic amnesia.

Answer: A

Diff: 1 Type: MC Page Ref: 231
Topic: Dissociative Disorders/Dissociative Identity Disorder
Skill: Factual
Objective:

- 52) Which of the following is most suggestive of dissociative identity disorder? _____
A) Kyla could not recall where she had been or what she had done all day.
B) Grace's feelings about James switch from positive to negative instantly.
C) Peter could not explain why he didn't complete the project.
D) Delilah was never able to make up her mind.

Answer: A

Diff: 1 Type: MC Page Ref: 231
Topic: Dissociative Disorders/Dissociative Identity Disorder
Skill: Applied
Objective:

- 53) A person with two or more well-developed identities has the disorder called _____
A) dissociative identity disorder. B) localized psychogenic amnesia.
C) depersonalization disorder. D) fugue state.

Answer: A

Diff: 1 Type: MC Page Ref: 231
Topic: Dissociative Disorders/Dissociative Identity Disorder
Skill: Factual
Objective:

- 54) Which of the following is most commonly true of the host identity in DID? _____
A) It is the second or third alter to develop.
B) It is not the original identity.
C) It does not answer to the person's actual name.
D) It is the most well-adjusted of the identities.

Answer: B

Diff: 2 Type: MC Page Ref: 231
Topic: Dissociative Disorders/Dissociative Identity Disorder
Skill: Factual
Objective:

- 55) Which of the following is true of opposite sex alters in DID? _____
A) They are quite common.
B) When they do occur, they usually assume the role of host.
C) They occur most commonly when sexual abuse has occurred.
D) They are rare.

Answer: A

Diff: 1 Type: MC Page Ref: 231
Topic: Dissociative Disorders/Dissociative Identity Disorder
Skill: Factual
Objective:

- 56) Brigid has been diagnosed with dissociative identity disorder. Brigid is the host personality. We can expect that the alter identities _____
- A) are very much like Brigid.
 - B) are very much like one another.
 - C) only "come out" when there is no stress in the environment.
 - D) are strikingly different from Brigid.

Answer: D

Diff: 1 Type: MC Page Ref: 231

Topic: Dissociative Disorders/Dissociative Identity Disorder

Skill: Applied

Objective:

- 57) Octavia has been diagnosed with dissociative identity disorder (DID). She has seventeen different "alters" which are strikingly different from her host personality. Some of her alters are not full personalities, but fragments and memories. Some of the alters are children. What aspect of this case is unusual? _____
- A) No aspect of this case is unusual.
 - B) It is unusual for a person with DID to have alters that are very different from the host personality.
 - C) It is unusual for a person with DID to have seventeen alters.
 - D) It is unusual for a person with DID to have fragmentary alters.

Answer: A

Diff: 2 Type: MC Page Ref: 231

Topic: Dissociative Disorders/Dissociative Identity Disorder

Skill: Applied

Objective:

- 58) In the individual with DID, "switches" between identities _____
- A) produce gaps in memory.
 - B) are controlled by the host identity.
 - C) occur symmetrically, such that all identities share equal control.
 - D) usually take several days.

Answer: A

Diff: 1 Type: MC Page Ref: 231

Topic: Dissociative Disorders/Dissociative Identity Disorder

Skill: Factual

Objective:

- 59) Why has the term "multiple personality disorder" been replaced with "dissociative identity disorder"? _____
- A) A new diagnostic term was wanted to remove some of the stigma associated with the old term and its presentation in the media.
 - B) The word "multiple" suggested the presence of more identities than were commonly observed.
 - C) Fully developed personalities are not present in DID, just varying expressions of different aspects of the patient's personality.
 - D) The old term was often used to refer to both schizophrenia and DID, thus a new term was needed to end this confusion.

Answer: C

Diff: 2 Type: MC Page Ref: 231

Topic: Dissociative Disorders/Dissociative Identity Disorder

Skill: Conceptual

Objective:

- 60) All of the following are associated with DID except _____
- A) depression.
 - B) substance abuse.
 - C) psychosis.
 - D) hallucinations.

Answer: C

Diff: 2 Type: MC Page Ref: 231-232

Topic: Dissociative Disorders/Dissociative Identity Disorder

Skill: Factual

Objective:

- 61) The text presented the case of Mary Kendall, who suffered from dissociative identity disorder. She is typical of individuals with this disorder in that _____
- A) she was aware of her separate personalities prior to beginning treatment.
 - B) tended to express her emotional distress in complaints about her body.
 - C) was socially inept as a child.
 - D) she has periods of "lost time."

Answer: D

Diff: 2 Type: MC Page Ref: 232
Topic: Dissociative Disorders/Dissociative Identity Disorder
Skill: Conceptual
Objective:

- 62) Recent estimates suggest that those with DID have _____
- A) over ten identities.
 - B) only two identities.
 - C) as many as two hundred identities.
 - D) two alters, in addition to the host identity.

Answer: A

Diff: 2 Type: MC Page Ref: 232
Topic: Dissociative Disorders/Dissociative Identity Disorder
Skill: Factual
Objective:

- 63) Why has the prevalence of DID been increasing? _____
- A) It may be that the prevalence of DID has not changed at all, but that clinicians may unknowingly encourage the emergence of new identities.
 - B) Children in today's society are far more likely to experience severe trauma than they were in the past.
 - C) As of 1980 most insurance companies had to accept DID as a billable diagnosis.
 - D) DID has only recently received full acceptance from the psychiatric community and, as a result, once hesitant professionals now readily using this diagnosis.

Answer: A

Diff: 2 Type: MC Page Ref: 232-233
Topic: Dissociative Disorders/Dissociative Identity Disorder
Skill: Conceptual
Objective:

- 64) All of the following are explanations for the increased prevalence of DID EXCEPT _____
- A) therapists may be actively looking for DID.
 - B) changes in the diagnostic criteria for schizophrenia.
 - C) increased public awareness of DID.
 - D) the increased incidence of sexual abuse.

Answer: D

Diff: 2 Type: MC Page Ref: 232-233
Topic: Dissociative Disorders/Dissociative Identity Disorder
Skill: Applied
Objective:

- 65) Experimental studies of DID find that interpersonality amnesia exists for _____
- A) explicit memories.
 - B) conditioned responses.
 - C) implicit memories.
 - D) all types of memories.

Answer: A

Diff: 1 Type: MC Page Ref: 234
Topic: Dissociative Disorders/Dissociative Identity Disorder
Skill: Factual
Objective:

- 66) Studies of the brains of individuals with DID 66) _____
A) support the assertion that DID is a real disorder.
B) find no differences in brain activity associated with different identities.
C) do not indicate any explanation for interpersonal amnesia.
D) have provided no consistent findings.

Answer: A

Diff: 1 Type: MC Page Ref: 234

Topic: Dissociative Disorders/Dissociative Identity Disorder

Skill: Conceptual

Objective:

- 67) There is debate as to the relationship between DID and abuse because 67) _____
A) there is little evidence of a link between trauma and psychopathology.
B) few of those who develop DID have a history of abuse.
C) most reports of abuse are faked.
D) other factors correlated with abuse may be the true causal factors in DID.

Answer: D

Diff: 1 Type: MC Page Ref: 235

Topic: Dissociative Disorders/DID/Causal Factors

Skill: Factual

Objective:

- 68) According to sociocognitive theory, 68) _____
A) DID has a factitious origin.
B) the alters in DID develop as a means of escaping from some form of trauma.
C) DID may develop when a suggestive patient is treated by an overzealous clinician.
D) the mind separates due to some traumatic experience and is never fully integrated, resulting in the multiple identities observed in DID.

Answer: C

Diff: 1 Type: MC Page Ref: 235-236

Topic: Dissociative Disorders/DID/Causal Factors

Skill: Conceptual

Objective:

- 69) Which of the following summarizes the post-traumatic theory for the origin of DID? 69) _____
A) Genetically programmed tendencies to dissociate are triggered by stress.
B) Therapists unwittingly reinforce role-playing of alter identities.
C) Children deal with severe abuse by creating alters who provide an "escape"
D) The rewards of avoiding punishment from the legal system induces people to fake symptoms.

Answer: C

Diff: 1 Type: MC Page Ref: 235

Topic: Dissociative Disorders/DID/Causal Factors

Skill: Conceptual

Objective:

- 70) Sociocognitive theory 70) _____
A) can't account for the role that trauma appears to play in DID.
B) does not explain the phenomenon of "lost time."
C) explains why symptoms of DID are often not seen until after treatment is initiated.
D) explains why the number of alters is usually constant.

Answer: C

Diff: 2 Type: MC Page Ref: 235

Topic: Dissociative Disorders/DID/Causal Factors

Skill: Conceptual

Objective:

- 71) When it comes to the effectiveness of treatment for dissociative disorders, we know 71) _____
A) that medications are worthless, but that psychotherapy is quite effective.
B) that anti-depressant medications are most effective in treating dissociative identity disorder.
C) that depersonalization is much more effectively treated than amnesia.
D) very little.

Answer: D

Diff: 1 Type: MC Page Ref: 238
Topic: Dissociative Disorders/Treatment and Outcomes
Skill: Factual
Objective:

- 72) The treatment goal for most therapists who treat dissociative identity disorder is 72) _____
A) reduction in the impact of distress and impairment.
B) self-understanding of the causes for the alter personalities.
C) acceptance of the alter personalities.
D) integration of the alter personalities.

Answer: D

Diff: 1 Type: MC Page Ref: 238
Topic: Dissociative Disorders/Treatment and Outcomes
Skill: Factual
Objective:

- 73) Your textbook authors report that rigorously designed and controlled studies on the treatment of dissociative identity disorder 73) _____
A) have only examined psychodynamic forms of treatment.
B) are non-existent.
C) are widespread.
D) demonstrate the effectiveness of cognitive-behavior therapy.

Answer: B

Diff: 1 Type: MC Page Ref: 239
Topic: Dissociative Disorders/Treatment and Outcomes
Skill: Factual
Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 74) A key feature of somatoform disorders is the intentional faking of physical symptoms in order to receive attention or sympathy. 74) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 216
Topic:
Skill:
Objective:

- 75) Malingering is a type of somatoform disorder. 75) _____

Answer: True False

Diff: 2 Type: TF Page Ref: 217
Topic:
Skill:
Objective:

- 76) Hypochondriasis may be partly caused by early experience with illness. 76) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 218
Topic:
Skill:
Objective:

- 77) The incidence of somatization disorder in men and women is about equal. 77) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 219
Topic:
Skill:
Objective:
- 78) There is evidence of a genetic relationship between antisocial personality disorder and somatization disorder. 78) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 220
Topic:
Skill:
Objective:
- 79) Somatoform pain disorder is usually easier to treat than somatization disorder. 79) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 221
Topic:
Skill:
Objective:
- 80) Dissociation can be adaptive. 80) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 228
Topic:
Skill:
Objective:
- 81) "Psychogenic amnesia" and "dissociative amnesia" refer to the same thing. 81) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 229
Topic:
Skill:
Objective:
- 82) In more recent times, the number of alters seen in DID, as well as their variability, has been increasing. 82) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 232
Topic:
Skill:
Objective:
- 83) Media attention to DID is thought to explain, in part, the increased prevalence of this disorder. 83) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 232
Topic:
Skill:
Objective:
- 84) Multiple personality disorder and schizophrenia are the same thing. 84) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 233
Topic:
Skill:
Objective:

- 85) Therapists may unknowingly foster the establishment of multiples identities in their clients. 85) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 233
Topic:
Skill:
Objective:
- 86) In DID, the emotional reactions learned by one identity may be shared with other identities. 86) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 234
Topic:
Skill:
Objective:
- 87) That abuse plays a causal role in the development of DID is well-established. 87) _____
Answer: True False
Diff: 3 Type: TF Page Ref: 235
Topic:
Skill:
Objective:
- 88) The high incidence of abuse amongst those seeking treatment for DID indicates that abuse plays a specific causal role in the development of DID. 88) _____
Answer: True False
Diff: 3 Type: TF Page Ref: 235
Topic:
Skill:
Objective:
- 89) Hypnosis is commonly used in the treatment of DID. 89) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 238
Topic:
Skill:
Objective:
- 90) All treatment outcome data for large groups of DID patients have failed to include a control group. 90) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 239
Topic:
Skill:
Objective:
- 91) Research on the effectiveness of treatment for DID clearly indicate that in order for treatment to be successful is must be prolonged. 91) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 239
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

92) Explain the difference between somatoform and dissociative disorders. Why are these disorders commonly considered at the same time? 92) _____

Answer: Somatoform disorders are characterized by physical complaints, thought to be manifestations of some psychological problem. In contrast, dissociative disorders involve some separation of the functioning of consciousness, memory, identity or perception. Again, the underlying cause for the observed distortions is some psychological abnormality. Both were once classified as neuroses and are thought to have anxiety as their underlying cause.

Diff: 1 Type: SA Page Ref: 216

Topic:

Skill:

Objective:

93) How do people with hypochondriasis typically relate to physicians? 93) _____

Answer: They repeatedly visit physicians seeking medical advice, but their concerns that they have a dread illness are not reduced when the doctors find nothing wrong. In fact, they often are disappointed that no physical problem has been found.

Diff: 2 Type: SA Page Ref: 217

Topic:

Skill:

Objective:

94) Discuss two of the causal factors of hypochondriasis. 94) _____

Answer: 1. Misinterpretations of bodily sensations - over focus on symptoms, perceiving them as more dangerous than they are, look for confirming evidence and discount disconfirming evidence.
2. Dysfunctional beliefs about themselves - believe will be unable to cope with illness, see self as weak and unable to tolerate exercise.
3. Secondary reinforcements - current and past history - special comfort, relieved of responsibilities.

Diff: 2 Type: SA Page Ref: 218

Topic:

Skill:

Objective:

95) Briefly describe somatization disorder. 95) _____

Answer: Somatization characterized by multiple complaints of physical ailments over a long period of time, with onset before the age of thirty. These physical symptoms can not be adequately explained by organic causes and result in either medical treatment or significant life impairment. The patient must report pain symptoms at four different sites or involving different functions, two gastrointestinal symptoms, one sexual symptom, and one pseudoneurological symptom such as memory problems or loss of sensation.

Diff: 1 Type: SA Page Ref: 218-219

Topic:

Skill:

Objective:

96) Explain the difference between somatization disorder and hypochondriasis. 96) _____

Answer: Only people with hypochondria believe they have an organic disease. People with hypochondria usually have only a few symptoms, people with somatization disorder have multiple symptoms.

Diff: 2 Type: SA Page Ref: 219

Topic:

Skill:

Objective:

- 97) Distinguish between the primary and secondary gains experienced by those with conversion disorder. 97) _____
Answer: Primary gains refer to the alleviation of anxiety or avoidance of stressful situations that result from the conversion symptoms. External "rewards" for the physical complaints experienced are those external factors that maintain the behaviors, such as sympathy and extra attention.
Diff: 2 Type: SA Page Ref: 222
Topic:
Skill:
Objective:
- 98) What factors tend to be associated with the onset of conversion disorder? 98) _____
Answer: An individual typically experiences an intolerable stressor, has the fleeting thought that it would be desirable to be sick in order to escape dealing with the stressor, but immediately suppresses this thought as unacceptable. Conversion symptoms then develop and provide an escape from the unwanted situation, although the individual sees no connection between the situation and the symptoms. Guilt, self-punishment, and the opportunity for financial compensation following injury are also associated with the origin of conversion disorder.
Diff: 2 Type: SA Page Ref: 222
Topic:
Skill:
Objective:
- 99) What are some ways to distinguish between conversion disorder and a true physical problem? 99) _____
Answer: Symptoms don't conform to the normal symptoms of the disorder, the selective nature of the dysfunction and symptoms can be changed under hypnosis or narcosis.
Diff: 2 Type: SA Page Ref: 223
Topic:
Skill:
Objective:
- 100) What is the difference between malingering and factitious disorder? 100) _____
Answer: Both disorders involve the conscious faking of physical symptoms. The malingerer, however, has a clear reason for the faked symptoms while the individual with factitious disorder apparently is making complaints for no apparent external cause. The child who feigns illness to miss school is malingering while the teen who adopts the "sick roll" for the attention he gains may meet the diagnostic criteria for factitious disorder.
Diff: 2 Type: SA Page Ref: 225
Topic:
Skill:
Objective:
- 101) What is the main goal of treatment for DID? 101) _____
Answer: The goal of treatment in DID is usually the reintegration of the alters. As DID develops due to a dissociation of aspects of the self, a true remission would involve a complete integration of the various identities into a cohesive whole. Hypnosis is commonly used in an attempt to achieve this goal.
Diff: 2 Type: SA Page Ref: 238
Topic:
Skill:
Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

102) Explain the similarities and the difference between conversion disorder, factitious disorder and malingering.

Answer: Similarities—all involve physical symptoms with no physical cause. All involve some gain. Differences—only in conversion disorder are the symptoms involuntary, in factitious and malingering the person is consciously faking. While all can involve gain, the main type of gain is different. In conversion disorder the main gain is avoiding or escaping a stressful situation without taking responsibility for doing so. In factitious disorder, the person enjoys the sick role. In malingering, the gain is typically monetary, e.g. a law suit.

GRADING RUBRIC: 10 points - 4 for similarities, 6 for differences.

Diff: 2 Type: ES Page Ref: 217, 221 & 225

Topic:

Skill:

Objective:

103) What is dissociative fugue? Under what circumstances is this disorder likely to develop?

Answer: Dissociative fugue has been described as a walking amnesia. In this form of amnesia, an individual not only forgets their history, but they also leave. The individual with dissociative fugue may actually leave their home and begin a new life elsewhere with a new identity. Such an extreme means of dealing with anxiety is most commonly seen when faced with a situation that both intolerable and inescapable.

GRADING RUBRIC: 4 points for explaining disorder, 2 points for identifying when it occurs.

Diff: 1 Type: ES Page Ref: 230

Topic:

Skill:

Objective:

104) Discuss the various controversies surrounding the role of abuse in the development of DID. What evidence is there to suggest that abuse does play a causal role in DID?

Answer: While a history of abuse is often reported by those diagnosed with DID, it can only be said that abuse may play a nonspecific causal role on the development of DID. While abuse is common in those with DID, there are many other environmental factors that may accompany an abusive situation which may play a more significant role in DID. Furthermore, if abuse were the true "cause" of DID, it would be expected that DID would be even more common than it is. There is also the possibility that many of the reported cases of abuse by those with DID may not have actually occurred. Thus, while abuse is often frequently reported by those with DID, the conclusion that abuse plays a causal role is not warranted.

GRADING RUBRIC: 10 points - 2 for stating that abuse can't be said to play a causal role, 4 points each for two explanations of this conclusion.

Diff: 2 Type: ES Page Ref: 235 & 237

Topic:

Skill:

Objective:

- 1) B
- 2) C
- 3) D
- 4) D
- 5) C
- 6) A
- 7) D
- 8) D
- 9) D
- 10) D
- 11) B
- 12) C
- 13) A
- 14) C
- 15) A
- 16) A
- 17) A
- 18) D
- 19) D
- 20) A
- 21) D
- 22) A
- 23) B
- 24) C
- 25) B
- 26) D
- 27) D
- 28) B
- 29) B
- 30) B

- 31) B
- 32) B
- 33) A
- 34) B
- 35) D
- 36) B
- 37) D
- 38) B
- 39) A
- 40) C
- 41) A
- 42) A
- 43) B
- 44) D
- 45) A
- 46) B
- 47) D
- 48) B
- 49) A
- 50) A
- 51) A
- 52) A
- 53) A
- 54) B
- 55) A
- 56) D
- 57) A
- 58) A
- 59) C
- 60) C

- 61) D
- 62) A
- 63) A
- 64) D
- 65) A
- 66) A
- 67) D
- 68) C
- 69) C
- 70) C
- 71) D
- 72) D
- 73) B
- 74) FALSE
- 75) FALSE
- 76) TRUE
- 77) FALSE
- 78) TRUE
- 79) TRUE
- 80) TRUE
- 81) TRUE
- 82) TRUE
- 83) TRUE
- 84) FALSE
- 85) TRUE
- 86) TRUE
- 87) FALSE
- 88) FALSE
- 89) TRUE
- 90) TRUE

- 91) TRUE
- 92) Somatoform disorders are characterized by physical complaints, thought to be manifestations of some psychological problem. In contrast, dissociative disorders involve some separation of the functioning of consciousness, memory, identity or perception. Again, the underlying cause for the observed distortions is some psychological abnormality. Both were once classified as neuroses and are thought to have anxiety as their underlying cause.
- 93) They repeatedly visit physicians seeking medical advice, but their concerns that they have a dread illness are not reduced when the doctors find nothing wrong. In fact, they often are disappointed that no physical problem has been found.
- 94) 1. Misinterpretations of bodily sensations - over focus on symptoms, perceiving them as more dangerous than they are, look for confirming evidence and discount disconfirming evidence.
2. Dysfunctional beliefs about themselves - believe will be unable to cope with illness, see self as weak and unable to tolerate exercise.
3. Secondary reinforcements - current and past history - special comfort, relieved of responsibilities.
- 95) Somatization characterized by multiple complaints of physical ailments over a long period of time, with onset before the age of thirty. These physical symptoms can not be adequately explained by organic causes and result in either medical treatment or significant life impairment. The patient must report pain symptoms at four different sites or involving different functions, two gastrointestinal symptoms, one sexual symptom, and one pseudoneurological symptom such as memory problems or loss of sensation.
- 96) Only people with hypochondria believe they have an organic disease. People with hypochondria usually have only a few symptoms, people with somatization disorder have multiple symptoms.
- 97) Primary gains refer to the alleviation of anxiety or avoidance of stressful situations that results from the conversion symptoms. External "rewards" for the physical complaints experienced are those external factors that maintain the behaviors, such as sympathy and extra attention.
- 98) An individual typically experiences an intolerable stressor, has the fleeting thought that it would be desirable to be sick in order to escape dealing with the stressor, but immediately suppresses this thought as unacceptable. Conversion symptoms then develop and provide an escape from the unwanted situation, although the individual sees no connection between the situation and the symptoms. Guilt, self-punishment, and the opportunity for financial compensation following injury are also associated with the origin of conversion disorder.
- 99) Symptoms don't conform to the normal symptoms of the disorder, the selective nature of the dysfunction and symptoms can be changed under hypnosis or narcosis.
- 100) Both disorders involve the conscious faking of physical symptoms. The malingering, however, has a clear reason for the faked symptoms while the individual with factitious disorder apparently is making complaints for no apparent external cause. The child who feigns illness to miss school is malingering while the teen who adopts the "sick roll" for the attention he gains may meet the diagnostic criteria for factitious disorder.
- 101) The goal of treatment in DID is usually the reintegration of the alters. As DID develops due to a dissociation of aspects of the self, a true remission would involve a complete integration of the various identities into a cohesive whole. Hypnosis is commonly used in an attempt to achieve this goal.
- 102) Similarities - all involve physical symptoms with no physical cause. All involve some gain. Differences - only in conversion disorder are the symptoms involuntary, in factitious and malingering the person is consciously faking. While all can involve gain, the main type of gain is different. In conversion disorder the main gain is avoiding or escaping a stressful situation without taking responsibility for doing so. In factitious disorder, the person enjoys the sick role. In malingering, the gain is typically monetary, e.g. a law suit.
- GRADING RUBRIC: 10 points - 4 for similarities, 6 for differences.

103) Dissociative fugue has been described as a walking amnesia. In this form of amnesia, an individual not only forgets their history, but they also leave. The individual with dissociative fugue may actually leave their home and begin a new life elsewhere with a new identity. Such an extreme means of dealing with anxiety is most commonly seen when faced with a situation that both intolerable and inescapable.

GRADING RUBRIC: 4 points for explaining disorder, 2 points for identifying when it occurs.

104) While a history of abuse is often reported by those diagnosed with DID, it can only be said that abuse may play a nonspecific causal role on the development of DID. While abuse is common in those with DID, there are many other environmental factors that may accompany an abusive situation which may play a more significant role in DID. Furthermore, if abuse were the true "cause" of DID, it would be expected that DID would be even more common than it is. There is also the possibility that many of the reported cases of abuse by those with DID may not have actually occurred. Thus, while abuse is often frequently reported by those with DID, the conclusion that abuse plays a causal role is not warranted.

GRADING RUBRIC: 10 points - 2 for stating that abuse can't be said to play a causal role, 4 points each for two explanations of this conclusion.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Which of the following accounts for more morbidity and mortality than all eating disorders combined? 1) _____
A) bulimia nervosa B) binge-eating disorder
C) anorexia nervosa D) obesity

Answer: D

Diff: 2 Type: MC Page Ref: 243

Topic: Eating Disorders and Obesity

Skill: Factual

Objective:

- 2) Which of the following is not a condition found in the DSM? 2) _____
A) bulimia nervosa B) obesity
C) anorexia nervosa D) binge-eating disorder

Answer: B

Diff: 2 Type: MC Page Ref: 248

Topic: Eating Disorders and Obesity

Skill: Factual

Objective:

- 3) Which of the following is a controversial aspect of the diagnostic criteria for anorexia nervosa? 3) _____
A) amenorrhea
B) refusal to maintain normal body weight
C) distorted perception of body size and shape
D) denial

Answer: A

Diff: 1 Type: MC Page Ref: 243

Topic: Anorexia Nervosa

Skill: Factual

Objective:

- 4) Which of the following is characteristic of the binge-eating/purging type of anorexia? 4) _____
A) body weight is within normal range
B) efforts to restrict food intake
C) the use of laxatives
D) 30 to 50 percent of those who begin by binge-eating and purging become restricting type anorexics

Answer: C

Diff: 2 Type: MC Page Ref: 244

Topic: Anorexia Nervosa

Skill: Factual

Objective:

- 5) Andrea has anorexia nervosa, restricting type. Which of the following behaviors would you expect her to have? 5) _____
A) normal menstrual periods
B) cutting up her food into little pieces when she eats
C) self-induced vomiting
D) occasional bouts of overeating

Answer: B

Diff: 1 Type: MC Page Ref: 244

Topic: Anorexia Nervosa

Skill: Factual

Objective:

- 6) Cindy is 5' 6" tall and weighs 92 pounds. She is very concerned about her weight. However, at times she finds herself eating large amounts of food - several boxes of cookies, gallons of ice cream, entire cakes - all in an evening. Afterwards, she makes herself throw up. Cindy's most likely diagnosis is 6) _____
- A) anorexia nervosa, restricting type.
 - B) anorexia nervosa, binge-eating/purging type.
 - C) no disorder.
 - D) bulimia nervosa, purging type.

Answer: B

Diff: 1 Type: MC Page Ref: 244

Topic: Anorexia Nervosa

Skill: Applied

Objective:

- 7) Which of the following is a potential consequence of anorexia nervosa? 7) _____
- A) hair loss
 - B) death
 - C) memory loss
 - D) muscle atrophy

Answer: B

Diff: 1 Type: MC Page Ref: 245

Topic: Anorexia Nervosa

Skill: Factual

Objective:

- 8) How do you distinguish between the binge-eating/purging type of anorexia nervosa and bulimia nervosa, purging type? 8) _____
- A) The bulimic type results in more severe health consequences than the anorexic type.
 - B) Altered eating and exercise habits result in missed periods in the bulimic type only.
 - C) People with the bulimic type are normal weight; people with the anorexic type are underweight.
 - D) The bulimic type involves throwing up and the anorexic type involves fasting.

Answer: C

Diff: 2 Type: MC Page Ref: 245

Topic: Bulimia Nervosa

Skill: Conceptual

Objective:

- 9) Which of the following do those with anorexia nervosa and bulimia nervosa have in common? 9) _____
- A) fear of being or becoming fat
 - B) below normal weight
 - C) restricted eating
 - D) a need for control

Answer: A

Diff: 1 Type: MC Page Ref: 245

Topic: Bulimia Nervosa

Skill: Factual

Objective:

- 10) In order to make a diagnosis of bulimia nervosa, the client must 10) _____
- A) not meet the criteria for anorexia nervosa.
 - B) have a distorted body image.
 - C) admit that they have a problem.
 - D) have missed three consecutive menstrual periods.

Answer: A

Diff: 1 Type: MC Page Ref: 245

Topic: Bulimia Nervosa

Skill: Factual

Objective:

- 11) Someone who binges and purges and is severely underweight is diagnosed as anorexic, not bulimic. This is because 11) _____
- A) bingeing and purging are not considered very important symptoms.
 - B) they will eventually stop bingeing and purging and start fasting.
 - C) anorexia is considered the more reliable diagnosis.
 - D) anorexia has a much higher death rate than bulimia.

Answer: D

Diff: 2 Type: MC Page Ref: 245

Topic: Bulimia Nervosa

Skill: Factual

Objective:

- 12) Elena binges on high calorie foods and then makes herself throw up. She feels terribly ashamed and horrified by what she does. You would predict 12) _____
- A) she will not stop because her vomiting is reinforced by anxiety reduction.
 - B) she will stop because her vomiting is being punished by the feelings of disgust and shame.
 - C) she will stop making herself throw up because she is ashamed and distressed.
 - D) she will not stop because she has become physiologically addicted to vomiting.

Answer: A

Diff: 2 Type: MC Page Ref: 246

Topic: Bulimia Nervosa

Skill: Applied

Objective:

- 13) The mind-set of people with bulimia and people with anorexia 13) _____
- A) is basically the same.
 - B) is very different—people with anorexia don't seem bothered by other people's opinion (usually distress) about them and people with bulimia are very concerned and will do their best to hide their disorder.
 - C) is very different—people with anorexia eventually become satisfied with their weight loss and people with bulimia never do.
 - D) is very different—people with bulimia don't seem bothered by other people's opinion (usually distress) about them and people with anorexia are very concerned and will do their best to hide their disorder.

Answer: B

Diff: 2 Type: MC Page Ref: 246

Topic: Bulimia Nervosa

Skill: Conceptual

Objective:

- 14) The text presented the case of Nicole, a college student with bulimia nervosa. She is typical of such individuals because she 14) _____
- A) experienced shame, guilt, and self-deprecation.
 - B) had suffered few health problems.
 - C) did not realize that her eating habits were abnormal.
 - D) had few thoughts of food except when she was eating.

Answer: A

Diff: 1 Type: MC Page Ref: 246-247

Topic: Bulimia Nervosa

Skill: Applied

Objective:

- 15) Raquel has occasions when she eats enormous amounts of food in a short time. Afterwards she will refuse to eat anything solid for a couple of days. Her most likely diagnosis is 15) _____
- A) anorexia nervosa, binge-purging type.
 - B) bulimia nervosa, nonpurging type.
 - C) anorexia nervosa, restricting type.
 - D) bulimia nervosa, purging type.

Answer: B

Diff: 1 Type: MC Page Ref: 246

Topic: Bulimia Nervosa

Skill: Applied

Objective:

- 16) In her mid-thirties, Cheryl became preoccupied with her weight and began dieting and exercising. After losing a substantial amount of weight, she was still not happy with how she looked and continued to restrict her food intake. After several fainting spells resulting from her low calorie intake, her employer referred her to a clinician who recognized the signs of anorexia nervosa. Which of the following is unique about Cheryl's case? 16) _____
- A) A diagnosis of anorexia is rarely made before the condition becomes life-threatening.
 - B) Eating disorders rarely start during the mid-thirties.
 - C) Few women with anorexia exercise.
 - D) The likelihood of anorexia being so readily recognized and diagnosed is slim.

Answer: B

Diff: 2 Type: MC Page Ref: 247

Topic: Clinical Aspects of Eating Disorders

Skill: Applied

Objective:

- 17) Which of the following is NOT a risk factor for eating disorders in men? 17) _____
- A) homosexuality
 - B) painting
 - C) childhood obesity
 - D) wrestling

Answer: B

Diff: 1 Type: MC Page Ref: 248

Topic: Clinical Aspects of Eating Disorders

Skill: Factual

Objective:

- 18) Felicia has been diagnosed with bulimia nervosa, purging type. We should expect that she 18) _____
- A) is less than 85 percent of normal body weight but still considers herself "fat."
 - B) strongly denies that she has a serious disorder.
 - C) is unconcerned about becoming fat.
 - D) experiences electrolyte imbalances and mineral deficiencies.

Answer: D

Diff: 2 Type: MC Page Ref: 248

Topic: Establishing the Psychological Basis of Mental Disorder

Skill: Applied

Objective:

- 19) A common sign of bulimia nervosa, purging type is 19) _____
- A) intolerance to cold.
 - B) kidney failure.
 - C) damaged teeth and mouth ulcers.
 - D) osteoporosis.

Answer: C

Diff: 2 Type: MC Page Ref: 248

Topic: Medical Complications of Eating Disorders

Skill: Factual

Objective:

- 20) Ellen is underweight but not less than 85 percent of normal body weight. She often restricts her eating because she is intensely fearful of becoming fat. She binges and purges at least twice a week. According to the DSM-IV-TR she should be diagnosed 20) _____
- A) with no form of eating disorder since her symptoms do not fit anorexia or bulimia.
 - B) with anorexia nervosa, binge/purge subtype.
 - C) with Binge Eating Disorder.
 - D) with Eating Disorder Not Otherwise Specified.

Answer: D

Diff: 2 Type: MC Page Ref: 249

Topic: Other Forms of Eating Disorders

Skill: Applied

Objective:

- 21) Delilah is less than 85 percent of normal body weight. She restricts her eating and is intensely fearful of becoming fat. Despite her emaciated appearance, she appears to have lots of energy, has normal menstrual cycles, and dates regularly. According to the DSM-IV-TR she should be diagnosed 21) _____
- A) with anorexia nervosa, undifferentiated subtype.
 - B) with anorexia nervosa, restricting subtype.
 - C) with Eating Disorder Not Otherwise Specified.
 - D) with no form of eating disorder since her symptoms do not fit anorexia or bulimia.

Answer: C

Diff: 2 Type: MC Page Ref: 249

Topic: Other Forms of Eating Disorders

Skill: Applied

Objective:

- 22) Binge-eating disorder 22) _____
- A) cannot be diagnosed if a person is overweight.
 - B) is diagnosed when a person binges and then purges by using laxatives or self-induced vomiting.
 - C) is an extremely rare variant of bulimia nervosa.
 - D) involves binges comparable to those in bulimia but without any inappropriate "compensatory" behavior to limit weight gain.

Answer: D

Diff: 1 Type: MC Page Ref: 249

Topic: Other Forms of Eating Disorders

Skill: Factual

Objective:

- 23) Binge-eating disorder 23) _____
- A) is the eating disorder diagnosis most recently added to the DSM.
 - B) is more common in males than in females.
 - C) usually develops into anorexia, binge-eating/purging subtype.
 - D) has not yet been formally recognized as a distinct clinical syndrome.

Answer: D

Diff: 2 Type: MC Page Ref: 249

Topic: Other Forms of Eating Disorders

Skill: Conceptual

Objective:

- 24) What is unique about binge-eating disorder (BED) as compared to the eating disorders currently found in the DSM? 24) _____
- A) The gender difference in its prevalence is minimal.
 - B) Few of those with BED develop weight-related health problems.
 - C) It develops earlier in life than other eating disorders.
 - D) Those with BED are commonly of normal body weight.

Answer: A

Diff: 2 Type: MC Page Ref: 249

Topic: Other Forms of Eating Disorders

Skill: Conceptual

Objective:

- 25) Which statement about the diagnosis of eating disorders is accurate? 25) _____
- A) A person meeting the criteria for bulimia rarely, if ever, has been diagnosed with anorexia.
 - B) Although anorexia and bulimia are quite similar, women with eating disorders rarely have a comorbid psychological condition.
 - C) Given the large number of young women who indulge in dieting, the distinction between normal and disordered eating is blurred.
 - D) Although the symptoms of anorexia and bulimia do not overlap, women with eating disorders often have other diagnoseable psychiatric conditions.

Answer: C

Diff: 2 Type: MC Page Ref: 250

Topic: Other Forms of Eating Disorders

Skill: Conceptual

Objective:

- 26) Which of the following statements about the prevalence of eating disorders is true? 26) _____
- A) While the incidence of anorexia has been increasing, there is no evidence to suggest a change in the incidence of bulimia.
 - B) While there is no evidence to indicate that the incidence of anorexia has been changing, the incidence of bulimia has been declining.
 - C) The incidence of anorexia increased during the twentieth century, but the incidence of bulimia increased until the 1980s, then decreased and has been stable since the 1990s.
 - D) While the incidence of anorexia has been increasing, the incidence of bulimia has been declining.

Answer: C

Diff: 1 Type: MC Page Ref: 250

Topic: Prevalence of Eating Disorders

Skill: Factual

Objective:

- 27) Which of the following is likely to put whites at higher risk of developing an eating disorder than non-whites? 27) _____
- A) desire to please the family
 - B) living in an industrialized society
 - C) fear of stomach bloating
 - D) body dissatisfaction

Answer: D

Diff: 1 Type: MC Page Ref: 250

Topic: Eating Disorders Across Cultures

Skill: Factual

Objective:

- 28) Rates of eating disorders tend to be much lower in black women than in white women. However, one factor that can increase risk in black women is 28) _____
- A) their weight—very overweight black women have the same rates of eating disorders as whites do.
 - B) assimilation into white culture and middle class values.
 - C) whether or not they were recent immigrants.
 - D) their age—younger black women have higher rates of eating disorders than older.

Answer: B

Diff: 2 Type: MC Page Ref: 250

Topic: Eating Disorders Across Cultures

Skill: Factual

Objective:

- 29) Which of the following best describes the connection between eating disorder diagnoses? 29) _____
- A) It is very rare for someone who is diagnosed with one type of eating disorder to later be diagnosed with another type.
 - B) Most people with binge-eating disorder eventually develop anorexia nervosa.
 - C) Shifts from anorexia nervosa to bulimia nervosa are common, but only a small number of people with bulimia nervosa develop anorexia nervosa.
 - D) Most people with bulimia nervosa eventually develop binge-eating disorder.

Answer: C

Diff: 2 Type: MC Page Ref: 261

Topic: The long-term stability of eating disorders

Skill: Factual

Objective:

- 30) Which of the following characterizes most anorexia nervosa patients in Asia? 30) _____
- A) severe depression and anxiety
 - B) previously diagnosed with bulimia nervosa
 - C) fear of stomach bloating
 - D) excessive fear of being fat

Answer: C

Diff: 2 Type: MC Page Ref: 251

Topic: Eating Disorders Across Cultures

Skill: Factual

Objective:

- 31) What is the prognosis for anorexia nervosa? 31) _____
- A) The prognosis is extremely poor.
 - B) Most people improve fairly quickly and don't relapse.
 - C) Relapse rates are high but recovery can often happen in the long run.
 - D) Anorexia has an excellent recovery rate but the other disorders don't.

Answer: C

Diff: 2 Type: MC Page Ref: 251

Topic: Eating Disorders/Course and Outcome

Skill: Factual

Objective:

- 32) In studies of the long-term outcomes of women treated for eating disorders, which of the following predicted poor outcomes for those diagnosed with anorexia or bulimia? 32) _____
- A) substance abuse
 - B) presence of a personality disorder
 - C) depression
 - D) OCD

Answer: A

Diff: 2 Type: MC Page Ref: 251

Topic: Eating Disorders/Course and Outcome

Skill: Factual

Objective:

- 33) Which of the following statements about the role of genetics as a risk factor for eating disorders is true? 33) _____
- A) Although the findings to date are mixed, the evidence does indicate that a susceptibility to eating disorders may be inherited along with a diathesis for other psychological conditions.
 - B) The lack of adoption studies has made it impossible to determine the heritability of eating disorders.
 - C) While the gene underlying the restrictive type of anorexia nervosa has been identified, the role of genes in the development of other forms of eating disorders is not clear.
 - D) Due to the complex nature of eating disorders and the probability that multiple genes contribute to their development, a role for genes in such disorders has yet to be established.

Answer: A

Diff: 2 Type: MC Page Ref: 252

Topic: Risk and Causal Factors in Eating Disorders/Biological

Skill: Conceptual

Objective:

- 34) What neurotransmitter seems to be involved in both eating disorders and depression? 34) _____
- A) serotonin
 - B) norepinephrine
 - C) GABA
 - D) dopamine

Answer: A

Diff: 2 Type: MC Page Ref: 252

Topic: Risk and Causal Factors in Eating Disorders/Biological

Skill: Factual

Objective:

- 35) According to set-point theory 35) _____
- A) anorexics have successfully adjusted their bodies to a new lower set point.
 - B) behavioral means of altering body weight can never overcome the body's ability to compensate physiologically.
 - C) hunger serves to maintain the body at its established set point.
 - D) the body weight that is maintained in the absence of dieting is the one at which health is maximized.

Answer: C

Diff: 2 Type: MC Page Ref: 252

Topic: Risk and Causal Factors in Eating Disorders/Biological

Skill: Applied

Objective:

- 36) Set-point theory explains why 36) _____
A) the desire for fatty high calorie foods decreases over time when deprived of food.
B) losing those last few pounds is easier than losing the first few.
C) binge eating is likely after a period of caloric restriction.
D) serotonin levels change with fasting.
Answer: C
Diff: 2 Type: MC Page Ref: 252
Topic: Risk and Causal Factors in Eating Disorders/Biological
Skill: Applied
Objective:
- 37) Set-point theory about weight suggests that 37) _____
A) people with anorexia are biologically programmed to be underweight.
B) sociocultural factors play very little role in the development of unrealistic body image goals.
C) dieting can establish a new set-point which stabilizes the near-starvation seen in people with anorexia.
D) the hunger that occurs by being well below one's set-point can trigger binges.
Answer: D
Diff: 1 Type: MC Page Ref: 252
Topic: Risk and Causal Factors in Eating Disorders/Biological
Skill: Conceptual
Objective:
- 38) A dysfunction in which of the following neurotransmitters has been observed in both anorexics and bulimics? 38) _____
A) serotonin B) dopamine C) GABA D) epinephrine
Answer: A
Diff: 1 Type: MC Page Ref: 252
Topic: Risk and Causal Factors in Eating Disorders/Biological
Skill: Factual
Objective:
- 39) The influence of television on the attitudes towards eating in Fiji demonstrate that 39) _____
A) definitions of beauty are not changed over time.
B) there is no relationship between physical standards of beauty and desirable personality traits.
C) biological factors play a minimal role in the etiology of eating disorders.
D) environmental factors can alter societal attitudes such that the risk of developing eating disorders is increased.
Answer: D
Diff: 1 Type: MC Page Ref: 253-254
Topic: Risk and Causal Factors in Eating Disorders/Sociocultural
Skill: Factual
Objective:
- 40) Families of people with anorexia 40) _____
A) do not have any characteristic features. B) emphasize individuality.
C) exhibit tendencies towards perfectionism. D) tend to provide few rules and limits.
Answer: C
Diff: 2 Type: MC Page Ref: 254
Topic: Risk and Causal Factors in Eating Disorders/Family
Skill: Factual
Objective:
- 41) Which of the following is most commonly found in families of girls with anorexia? 41) _____
A) Parents who emphasize rules, control, and good physical appearance.
B) Parents who are unconventional, dramatic, and antisocial.
C) Children who reduce psychological tension in the family by dominating their parents.
D) Sibling rivalry that breaks out into physical and verbal aggression.

Answer: A

Diff: 2 Type: MC Page Ref: 254
Topic: Risk and Causal Factors in Eating Disorders/Family
Skill: Applied
Objective:

- 42) Which of the following is the strongest predictor of a person developing bulimic symptoms? 42) _____
- A) the amount of control families tried to have over the person
 - B) the amount of marital conflict between the parents
 - C) the amount of critical comments family members made about the person's appearance
 - D) the degree of overprotectiveness parents displayed

Answer: C

Diff: 2 Type: MC Page Ref: 254
Topic: Risk and Causal Factors in Eating Disorders/Sociocultural
Skill: Factual
Objective:

- 43) The most common quality of parents' interactions with their daughters who have eating disorders is 43) _____
- A) lack of direction and rules.
 - B) control.
 - C) neglect.
 - D) unconditional love and acceptance.

Answer: B

Diff: 2 Type: MC Page Ref: 254
Topic: Risk and Causal Factors in Eating Disorders/Family
Skill: Conceptual
Objective:

- 44) Internalizing the "thin ideal" is strongly associated with 44) _____
- A) body satisfaction.
 - B) attitudes about interpersonal relationships.
 - C) recovery from eating disorders.
 - D) negative affect.

Answer: D

Diff: 1 Type: MC Page Ref: 254
Topic: Risk and Causal Factors in Eating Disorders/Sociocultural
Skill: Factual
Objective:

- 45) A lack of body distortions amongst the Amish 45) _____
- A) suggests that there should be a low prevalence of eating disorders amongst these peoples.
 - B) indicates that the Amish do not value physical beauty.
 - C) suggests that the influence of the Western media is not as great as commonly perceived.
 - D) provides evidence against a role for sociocultural factors in the development of eating disorders.

Answer: A

Diff: 2 Type: MC Page Ref: 254
Topic: Risk and Causal Factors in Eating Disorders/Sociocultural
Skill: Conceptual
Objective:

- 46) When it comes to comparing one's actual body image with the ideal body, 46) _____
- A) young women are more likely to be dissatisfied than young men.
 - B) young women often falsely believe that men prefer larger women than they actually do.
 - C) most young women want a body that is more "curved" than the media-encouraged ideal.
 - D) young men are just as likely to see themselves as too fat as young women.

Answer: A

Diff: 2 Type: MC Page Ref: 255
Topic: Risk and Causal Factors in Eating Disorders/Individual
Skill: Factual
Objective:

- 47) Which statement best describes trends in actual and ideal weight in American young women? 47) _____
- A) While the weight of the average woman is increasing, the average weight of the ideal woman is decreasing.
 - B) Weight of the average woman doesn't seem to be affected by the average weight of the ideal woman.
 - C) While the weight of the average woman is increasing, the average weight of the ideal woman is increasing even faster.
 - D) While the weight of the average woman is decreasing, the average weight of the ideal woman is decreasing even faster.

Answer: A

Diff: 1 Type: MC Page Ref: 255

Topic: Risk and Causal Factors in Eating Disorders/Individual

Skill: Factual

Objective:

- 49) Which of the following appears to be an enduring personality trait of people who are susceptible to developing an eating disorder? 49) _____
- A) pessimism
 - B) individualism
 - C) neuroticism
 - D) perfectionism

Answer: D

Diff: 1 Type: MC Page Ref: 256-257

Topic: Risk and Causal Factors in Eating Disorders/Individual

Skill: Factual

Objective:

- 50) Which of the following statements best summarizes the relationship between sexual abuse and the development of eating disorders? 50) _____

- A) Early sexual abuse may lead to a denial of one's sexuality and a desire to maintain a child-like appearance, resulting in attempts to prevent the development of a more mature figure through dieting.
- B) While sexual abuse has been found to increase the risk of developing anorexia, no relationship has been observed between abuse and other eating disorders.
- C) There is no relationship between early sexual abuse and the development of eating disorders later in life.
- D) There appears to be a relationship, but it appears to be indirect.

Answer: D

Diff: 2 Type: MC Page Ref: 257

Topic: Risk and Causal Factors in Eating Disorders/Individual

Skill: Conceptual

Objective:

- 51) What is the most serious challenge in treating eating disorders? 51) _____
- A) overcoming the patient's ambivalence towards treatment
 - B) finding an effective pharmacological treatment
 - C) engaging the family in the treatment process
 - D) making a diagnosis before the disorder becomes life threatening

Answer: A

Diff: 2 Type: MC Page Ref: 257

Topic: Eating Disorders/Treatment of Anorexia

Skill: Conceptual

Objective:

- 52) After her dentist commented on the damage her practice of vomiting had caused to her teeth, Hilda realized that she had a problem. After seeing a psychiatrist, Hilda was diagnosed with anorexia, binge-eating/purging sub-type. Due to the severity of her condition, her doctor suggested that she be hospitalized. Hilda immediately entered an inpatient treatment program and embraced all aspects of the treatment regimen. What is unique about Hilda's case? 52) _____
- A) Psychiatrists rarely suggest hospitalization for this type of anorexia.
 - B) Dental problems are not seen in those with anorexia.
 - C) Hilda's lack of ambivalence about treatment.
 - D) The failure to use outpatient treatment before hospitalization.

Answer: C

Diff: 2 Type: MC Page Ref: 257
Topic: Eating Disorders/Treatment of Anorexia
Skill: Applied
Objective:

- 53) Which of the following best explains the lack of well controlled studies on the effectiveness of treatment for anorexia nervosa? 53) _____
- A) Few people with anorexia are willing to seek treatment and there is a high drop-out rate when they do.
 - B) Few people with anorexia achieve full remission.
 - C) The high mortality rate with anorexia results in sample sizes too small to yield valid conclusions.
 - D) Few people with anorexia that are in treatment are willing to participate in studies.

Answer: A

Diff: 2 Type: MC Page Ref: 257
Topic: Eating Disorders/Treatment of Anorexia
Skill: Factual
Objective:

- 54) Which statement about the treatment of eating disorders is most accurate? 54) _____
- A) There are very few options available in the treatment of eating disorders.
 - B) There are virtually no situations in which hospitalization is necessary to treat eating disorders.
 - C) Family support and the patient's commitment to change are important to lasting recovery.
 - D) Family involvement in treatment tends to undercut the chances of lasting recovery in the patient.

Answer: C

Diff: 1 Type: MC Page Ref: 258
Topic: Eating Disorders/Treatment of Anorexia
Skill: Factual
Objective:

- 55) In the treatment of eating disorders, medications 55) _____
- A) have been found to be more effective than most psychological interventions.
 - B) may be useful in treating depressive and psychotic symptoms.
 - C) are commonly used to stimulate appetite.
 - D) have proven to be especially helpful in treating patients with anorexia.

Answer: B

Diff: 2 Type: MC Page Ref: 258
Topic: Eating Disorders/Treatment of Anorexia
Skill: Factual
Objective:

- 56) Why is family therapy currently being investigated as a treatment for anorexia? 56) _____
- A) Family dynamics have been found to affect treatment outcome.
 - B) CBT and other forms of individual psychotherapy have been found to be ineffective.
 - C) The well-established role of the family in the development of eating disorders necessitates the involvement of the family in their treatment.
 - D) Family therapy has been found to be the most effective form of therapy for bulimia.

Answer: A

Diff: 2 Type: MC Page Ref: 258
Topic: Eating Disorders/Treatment of Anorexia
Skill: Conceptual
Objective:

- 57) Which of the following best explains why cognitive-behavioral therapy is a logical approach to the treatment of eating disorders? 57) _____
- A) Both thoughts and behaviors need to be altered to achieve a lasting outcome.
 - B) The role of learning in the development of eating disorders is well-established.
 - C) Medical interventions have proven ineffective.
 - D) It is the therapy of choice for most disorders.

Answer: A

Diff: 2 Type: MC Page Ref: 258
Topic: Eating Disorders/Treatment of Anorexia
Skill: Conceptual
Objective:

- 58) Family therapy for anorexia appears to be most effective when it is used to treat 58) _____
- A) adolescents.
 - B) adults.
 - C) those with comorbid depressive and/or anxiety symptoms.
 - D) men.

Answer: A

Diff: 1 Type: MC Page Ref: 258
Topic: Eating Disorders/Treatment of Anorexia
Skill: Factual
Objective:

- 59) Research suggests that _____ provides the best immediate and long-term outcomes in the treatment of bulimia nervosa. 59) _____
- A) cognitive-behavioral therapy
 - B) family therapy
 - C) anti-depressant medication
 - D) systematic desensitization

Answer: A

Diff: 1 Type: MC Page Ref: 259
Topic: Eating Disorders/Treatment of Bulimia
Skill: Factual
Objective:

- 60) All of the following are reasons for the effectiveness of antidepressants in the treatment of bulimia nervosa EXCEPT 60) _____
- A) lessened preoccupation with physical appearance.
 - B) improved mood.
 - C) decreased appetite.
 - D) decreased frequency of binges.

Answer: C

Diff: 1 Type: MC Page Ref: 259
Topic: Eating Disorders/Treatment of Bulimia
Skill: Factual
Objective:

- 61) Our current knowledge of the efficacy of treating eating disorders 61) _____
- A) suggests that cognitive-behavioral therapy is the treatment of choice.
 - B) is much more detailed for anorexia nervosa than for bulimia nervosa.
 - C) is quite thorough because there are many controlled studies comparing long-term outcomes.
 - D) suggests that hospitalization is most effective for long-term maintenance of treatment gains.

Answer: A

Diff: 1 Type: MC Page Ref: 258
Topic: Eating Disorders/Treatment of Bulimia
Skill: Factual
Objective:

- 62) Which of the following is LEAST likely to be addressed in the treatment of binge-eating disorder? 62) _____
- A) body dissatisfaction
 - B) idealization of low body weight
 - C) illogical food rules
 - D) misconceptions about overweight people

Answer: B

Diff: 2 Type: MC Page Ref: 260
Topic: Eating Disorders/Treatment of Binge-Eating Disorder
Skill: Applied
Objective:

- 63) In addition to altering the eating patterns of clients with Binge Eating Disorder, therapist using cognitive-behavioral therapy will also 63) _____
- A) provide factual information about eating and dieting.
 - B) teach the clients to be greater risk-takers.
 - C) educate the clients that fat people have certain character flaws.
 - D) help the client to emotionally separate from her family.

Answer: A

Diff: 2 Type: MC Page Ref: 260

Topic: Eating Disorders/Treatment of Binge-Eating Disorder

Skill: Conceptual

Objective:

- 64) Obesity 64) _____
- A) has been increasing in many countries, including the United States.
 - B) is culturally defined.
 - C) rates vary little across Western cultures.
 - D) is more common in men than in women.

Answer: A

Diff: 1 Type: MC Page Ref: 260

Topic: Obesity

Skill: Factual

Objective:

- 65) In which of the following countries is the prevalence of obesity highest? 65) _____
- A) Japan
 - B) United States
 - C) United Kingdom
 - D) China

Answer: B

Diff: 1 Type: MC Page Ref: 260

Topic: Obesity

Skill: Factual

Objective:

- 66) What is the relationship between obesity and social class? 66) _____
- A) There is none.
 - B) Obesity occurs much more frequently in lower SES adults but not children.
 - C) Obesity occurs much more frequently in lower SES adults and children.
 - D) Obesity occurs much more frequently in higher SES adults and children.

Answer: C

Diff: 1 Type: MC Page Ref: 260

Topic: Obesity

Skill: Factual

Objective:

- 67) All of the following are dangers associated with obesity EXCEPT 67) _____
- A) heart attack.
 - B) diabetes.
 - C) cancer.
 - D) high blood pressure.

Answer: C

Diff: 1 Type: MC Page Ref: 260

Topic: Obesity

Skill: Factual

Objective:

- 68) Which of the following statements about obesity and health is true? 68) _____
- A) The heavier the person, the greater the health risks.
 - B) Individuals who are obese, but active, are not at a higher risk of cardiovascular disease.
 - C) Obesity is only a threat to health in cultures where the obesity is due to the consumption of fatty foods and relative inactivity.
 - D) Only when obesity has a behavioral cause is it dangerous.

Answer: A

Diff: 1 Type: MC Page Ref: 260

Topic: Obesity

Skill: Factual

Objective:

- 69) Which of the following factors is associated with an increased risk for obesity? 69) _____
- A) living in an Asian culture
 - B) low parental education
 - C) high socioeconomic status
 - D) being well-cared-for as a child

Answer: B

Diff: 2 Type: MC Page Ref: 260

Topic: Obesity/Sociocultural Factors

Skill: Factual

Objective:

- 70) New research suggests that obesity is similar to 70) _____
- A) substance abuse and drug dependence.
 - B) other learned behaviors.
 - C) panic disorder.
 - D) hypochondriasis.

Answer: A

Diff: 2 Type: MC Page Ref: 272-273

Topic: Obesity

Skill: Applied

Objective:

- 71) Leptin 71) _____
- A) is a hormone that helps the body regain its set-point.
 - B) is a hormone that usually leads to decreased food intake.
 - C) is a hormone that is a promising new treatment for obesity.
 - D) is a hormone that is an appetite stimulator.

Answer: B

Diff: 2 Type: MC Page Ref: 261

Topic: Obesity/Biological Factors

Skill: Factual

Objective:

- 72) Ghrelin 72) _____
- A) is a hormone that is an appetite stimulator.
 - B) is a hormone that helps the body regain its set-point.
 - C) is a hormone that usually leads to decreased food intake.
 - D) is a hormone that is a promising new treatment for obesity.

Answer: A

Diff: 2 Type: MC Page Ref: 261

Topic: Obesity/Biological Factors

Skill: Factual

Objective:

- 73) Which of the following best explains the current trend in the prevalence of obesity? 73) _____
- A) Obesity is no longer a factor that decreases survival, thus genes for obesity are becoming more prevalent in the general population.
 - B) the adoption of unhealthy life styles
 - C) the popularity of dieting
 - D) the tendency to overfeed children; fat children are likely to be fat (obese) adults

Answer: B

Diff: 1 Type: MC Page Ref: 262

Topic: Obesity/Biological Factors

Skill: Factual

Objective:

- 74) Why are family attitudes about obesity important? 74) _____
A) because they reflect the genetic influences on obesity
B) because the number of fat cells stays the same from childhood
C) because they will cause people to be happier when obese
D) they aren't—peer influence is more important

Answer: B

Diff: 2 Type: MC Page Ref: 262

Topic: Obesity/Causal Factors

Skill: Conceptual

Objective:

- 75) If a person has a spouse or a friend who becomes obese, 75) _____
A) this typically has no impact.
B) this increases their risk of developing anorexia nervosa.
C) this increases their risk of developing bulimia nervosa.
D) this increases their risk of also becoming obese.

Answer: D

Diff: 2 Type: MC Page Ref: 275

Topic: Obesity/Family Influences

Skill: Factual

Objective:

- 76) Comfort food 76) _____
A) affects the brain in such a way as to make it unable to tell when the body is full.
B) does nothing physiologically, any effects are due to expectation.
C) may help reduce activation in the stress response system.
D) changes the hormonal balance of the body and makes people want to eat more.

Answer: C

Diff: 2 Type: MC Page Ref: 262

Topic: Obesity/Causal Factors

Skill: Factual

Objective:

- 77) What cyclical pathway can develop that eventually leads to obesity? 77) _____
A) A child binges because of depression and low self-esteem, purges and feels better, then feels safe to binge again.
B) A child eats because of feelings of depression and low self-esteem, gains weight, is rejected by peers, binges and continues to gain weight.
C) A child stops eating because of low self-esteem, becomes anorexic and then is successfully treated but still has negative feelings about her/himself.
D) A child eats normally and is of normal weight but is teased about their weight and begins to diet.

Answer: B

Diff: 2 Type: MC Page Ref: 263

Topic: Obesity/Causal Factors

Skill: Conceptual

Objective:

- 78) Which of the following is a medication currently approved by the FDA for use in the treatment of obesity? 78) _____
A) phentermine B) fenfluramine C) amphetamine D) sibutramine

Answer: D

Diff: 1 Type: MC Page Ref: 264

Topic: Treatment of Obesity

Skill: Factual

Objective:

- 79) Orlistat, which works by interfering with the absorption of fat 79) _____
A) works very well for obesity.
B) results have been uncertain.
C) does not work well for obesity.
D) works very well for extreme obesity but not regular obesity.

Answer: C

Diff: 1 Type: MC Page Ref: 264

Topic: Treatment of Obesity

Skill: Factual

Objective:

- 80) Sibutramine acts to reduce appetite by 80) _____
A) interfering with digestion.
B) increasing the activity of serotonin and norepinephrine.
C) blocking receptors for serotonin and norepinephrine.
D) decreasing the activity of serotonin and norepinephrine.

Answer: B

Diff: 1 Type: MC Page Ref: 264

Topic: Treatment of Obesity

Skill: Conceptual

Objective:

- 81) After bariatric surgery 81) _____
A) some patients do not lose any weight.
B) some patients regain their weight.
C) most patients do not survive.
D) patients stay normal weight the rest of their lives.

Answer: B

Diff: 1 Type: MC Page Ref: 264

Topic: Treatment of Obesity

Skill: Factual

Objective:

- 82) Gastric bypass surgery makes it 82) _____
A) impossible to regain weight once it is lost.
B) slightly more likely that people will lose weight.
C) possible to binge and not gain weight.
D) impossible to binge eat but still possible to regain weight.

Answer: D

Diff: 1 Type: MC Page Ref: 264

Topic: Treatment of Obesity

Skill: Factual

Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 83) The main characteristic of anorexia nervosa is a loss of appetite. 83) _____

Answer: True False

Diff: 2 Type: TF Page Ref: 243

Topic:

Skill:

Objective:

- 84) A woman who meets all of the criteria for anorexia nervosa except for disrupted menstrual periods is still diagnosed with anorexia nervosa. 84) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 243
Topic:
Skill:
Objective:
- 85) Some people with anorexia nervosa binge eat. 85) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 244
Topic:
Skill:
Objective:
- 86) Anorexia nervosa is one of the most lethal psychiatric condition there is. 86) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 245
Topic:
Skill:
Objective:
- 87) Denial of her condition is characteristic of the woman with bulimia nervosa. 87) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 245
Topic:
Skill:
Objective:
- 88) Bulimia is more common in males than anorexia. 88) _____
Answer: True False
Diff: 3 Type: TF Page Ref: 247
Topic:
Skill:
Objective:
- 89) Most people with binge-eating disorder are overweight or obese. 89) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 249
Topic:
Skill:
Objective:
- 90) There is a great deal of diagnostic crossover between eating disorders. 90) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 261
Topic:
Skill:
Objective:
- 91) Eating disorders are confined to industrialized Western countries. 91) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 249-250
Topic:
Skill:
Objective:

- 92) Research to date on the role of genes in eating disorders indicates that biological factors may play a greater role in the etiology of anorexia as compared to bulimia. 92) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 252
Topic:
Skill:
Objective:
- 93) Set-point theory provides an explanation for why the restricting type of anorexia frequently becomes the binge-eating/purging type. 93) _____
Answer: True False
Diff: 3 Type: TF Page Ref: 252
Topic:
Skill:
Objective:
- 94) Recovered bulimics and anorexics exhibit indications of low serotonin levels. 94) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 252
Topic:
Skill:
Objective:
- 95) Family factors play a role in anorexia nervosa but not bulimia nervosa. 95) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 254
Topic:
Skill:
Objective:
- 96) The best predictor of bulimic symptoms is the amount of negative comments from family about appearance and weight. 96) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 254
Topic:
Skill:
Objective:
- 97) As the average body weight of women has increased over time, so has the body weight of the "ideal". 97) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 254-255
Topic:
Skill:
Objective:
- 98) While perfectionism is associated with anorexia, there is no indication that perfectionism is common amongst bulimia nervosa patients. 98) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 256-257
Topic:
Skill:
Objective:

- 99) Eating disorders are very difficult to treat because people with eating disorders are often not certain they want to change. 99) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 257
Topic:
Skill:
Objective:
- 100) Cognitive behavioral therapy works better for anorexia nervosa than for bulimia nervosa. 100) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 258-259
Topic:
Skill:
Objective:
- 101) Obesity is a DSM-IV-TR diagnosis. 101) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 260
Topic:
Skill:
Objective:
- 102) Some researchers argue that obesity may be due to a “food addiction” similar to drug addiction. 102) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 272-273
Topic:
Skill:
Objective:
- 103) Obese people are resistant to the effects of leptin. 103) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 261
Topic:
Skill:
Objective:
- 104) Family attitudes about food can have a long-term impact on the weight of their children. 104) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 262
Topic:
Skill:
Objective:
- 105) Obesity may be a “socially contagious” disorder. 105) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 275
Topic:
Skill:
Objective:
- 106) Under stress, rats show the same kind of preference for "comfort food" as humans. 106) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 262
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

107) Why is the term "anorexia nervosa" a misnomer? 107) _____

Answer: The term "anorexia nervosa" literally means a lack of appetite. The individual with anorexia nervosa does not lack an appetite. The true problem with the anorexic is a fear of gaining weight which leads to not eating, as opposed to a true lack of desire for food.

Diff: 1 Type: SA Page Ref: 243

Topic:

Skill:

Objective:

108) What most clearly separates the anorexic from the bulimic? 108) _____

Answer: While the binge-eating/purging anorexic and the bulimic may share many features, the clear factor that distinguishes the two is the below normal weight that is a defining feature of anorexia.

Diff: 1 Type: SA Page Ref: 245

Topic:

Skill:

Objective:

109) What are the differences between binge eating disorder and bulimia nervosa? 109) _____

Answer: People with binge eating disorder have food binges like people with bulimia but don't do any compensatory behaviors. They don't restrict their diet between binges as much as people with bulimia. People with binge eating disorder tend to be older than people with bulimia, and are more likely to be overweight or obese.

Diff: 2 Type: SA Page Ref: 249

Topic:

Skill:

Objective:

110) What puts whites at higher risk for eating disorders as compared to non-whites? 110) _____

Answer: Research finds that whites show much more body dissatisfaction, dietary restraint, and a drive for thinness than their non-white counterparts. Clearly, these are all factors that set the stage for the development of abnormal eating patterns and, possibly, diagnoseable eating disorders.

Diff: 2 Type: SA Page Ref: 250

Topic:

Skill:

Objective:

111) How does the set point impact eating disorders? 111) _____

Answer: This is the tendency of the body to resist variation from a biologically determined set point. As someone loses weight, hunger rises and can trigger strong impulses to binge eat.

Diff: 2 Type: SA Page Ref: 252

Topic:

Skill:

Objective:

112) There is evidence of serotonergic abnormalities in anorexics and bulimics. Can it be concluded that a dysfunction in the serotonin system underlies these eating disorders? Why or why not? 112) _____

Answer: Many patients with eating disorders respond well to treatment with antidepressants that target serotonin. People with anorexia nervosa have low levels of a major metabolite of serotonin. People with bulimia nervosa have normal levels. After recovery, however, both groups have higher levels than control women do and than when they are ill. These findings suggest, but do not prove, a disruption in the serotonergic system.

Diff: 2 Type: SA Page Ref: 252-253

Topic:

Skill:

Objective:

113) Why is dieting a risk factor for the development of eating disorders? 113) _____

Answer: The desire to diet suggests that there is some body dissatisfaction, a clear risk factor for the development of an eating disorder. In addition, the practice of dieting increases the likelihood of overeating, as caloric restriction leads to hunger. When the dieter gives in to temptation, this is likely to lead to negative affect. Resumed dieting then continues this pattern, which may then evolve into any one of the recognized eating disorders. As research has demonstrated, going on a diet may actually make us eat more and, as a consequence, feel worse about ourselves and evolve into even more problematic eating patterns.

Diff: 2 Type: SA Page Ref: 255
Topic:
Skill:
Objective:

114) What medications are commonly used in the treatment of bulimia nervosa? What evidence is there that such medications are beneficial in treating this condition? 114) _____

Answer: Antidepressants are commonly used, alone or, ideally, in addition to CBT. Many patients with bulimia also suffer from mood disorders. In addition to the potential beneficial effects of antidepressants on mood, they have also been shown to decrease both the frequency of binges and the typical preoccupation with shape and weight that is characteristic of those with bulimia.

Diff: 2 Type: SA Page Ref: 259
Topic:
Skill:
Objective:

115) What are leptin and ghrelin and how do they influence appetite and weight? 115) _____

Answer: Leptin is a hormone that is produced by fat cells. It acts to reduce intake of food. An increase in body fat leads to an increase in leptin which leads in turn to a decrease in food intake. However, overweight people are resistant to the effects of leptin. Ghrelin is a hormone produced by the stomach. It is a powerful appetite stimulator. It rises before meals and decreases after eating. If there is a disturbance in its normal process, this can lead to overeating.

Diff: 2 Type: SA Page Ref: 261
Topic:
Skill:
Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

116) What factors put males at risk for developing eating disorders?

Answer: Homosexual males and those who were fat as children are at a higher risk for developing eating disorders. It is thought that homosexuality may be a risk factor as thinness may be perceived as attractive by this community. Children who are fat as children, especially those who are teased, are likely to be more self-conscious about their appearance and, as a result, more likely to engage in efforts to control their weight. This, both homosexuality and early obesity may, in effect, make males more like females with respect to the level of concern they feel about their physical appearance. Other groups that are at risk for developing eating disorders are those males who restrict their food intake for some other purpose, such as to improve their performance in a sport or to avoid developing some weight-related illness that they may be at risk for.

GRADING RUBRIC: 2 points introduction, 4 points factor 1, 4 points factor 2 = 10 total

Diff: 2 Type: ES Page Ref: 248
Topic:
Skill:
Objective:

117) Discuss the factors that complicate the diagnosis of eating disorders.

Answer: While it may be simple to determine that there is a disordered pattern to an individual's eating habits, the symptoms evident may not fit any of the established diagnostic categories. Thus, the DSM-IV-TR provides a "catch-all" category of "eating disorder not otherwise specified", a diagnosis given to as many as 1/3 of those who seek treatment for an eating disorder. Further complicating the diagnosis of eating disorders is the fact that the eating patterns of an individual with an eating disorder may change over time, such that the individual who once clearly had anorexia may now appear to have bulimia. The clinical features exhibited change over time, a facet of the eating disorders not accounted for by the current classification system.

GRADING RUBRIC: 8 points total, 4 points for each of two factors discussed.

Diff: 2 Type: ES Page Ref: 249

Topic:

Skill:

Objective:

118) Discuss the studies on rats and "comfort food".

Answer: Like many humans, rats under chronic stress selected high fat and sugar diets. They gained weight in their bellies and became calmer in the face of new, acute stress. People may also eat in response to aversive emotional states as well, and experience the same calming effect. This shows that learning is involved, as well as biochemical effects. Eating in response to emotional cues is reinforced because tension is reduced, leading to an increased likelihood of eating in response to those cues later on.

GRADING RUBRIC: 8 points total, 2 for rats' diet selection, 2 for the physical and emotional effects of the diet, 2 for the similarities in human reactions to emotional cues, 2 for discussion of how learning and biochemical effects reinforce eating in response to stress.

Diff: 2 Type: ES Page Ref: 262-263

Topic:

Skill:

Objective:

- 1) D
- 2) B
- 3) A
- 4) C
- 5) B
- 6) B
- 7) B
- 8) C
- 9) A
- 10) A
- 11) D
- 12) A
- 13) B
- 14) A
- 15) B
- 16) B
- 17) B
- 18) D
- 19) C
- 20) D
- 21) C
- 22) D
- 23) D
- 24) A
- 25) C
- 26) C
- 27) D
- 28) B
- 29) C
- 30) C

- 31) A
- 33) A
- 34) A
- 35) C
- 36) C
- 37) D
- 38) A
- 39) D
- 40) C
- 41) A
- 42) C
- 43) B
- 44) D
- 45) A
- 46) A
- 47) A
- 48) B
- 49) D
- 50) D
- 51) A
- 52) C
- 53) A
- 54) C
- 55) B
- 56) A
- 57) A
- 58) A
- 59) A
- 60) C
- 61) A

- 62) B
- 63) A
- 64) A
- 65) B
- 66) C
- 67) C
- 68) A
- 69) B
- 70) A
- 71) B
- 72) A
- 73) B
- 74) B
- 75) D
- 76) C
- 77) B
- 78) D
- 79) C
- 80) B
- 81) B
- 82) D
- 83) FALSE
- 84) FALSE
- 85) TRUE
- 86) TRUE
- 87) FALSE
- 88) FALSE
- 89) TRUE
- 90) TRUE
- 91) FALSE

- 92) TRUE
- 93) TRUE
- 94) FALSE
- 95) FALSE
- 96) TRUE
- 97) FALSE
- 98) FALSE
- 99) TRUE
- 100) FALSE
- 101) FALSE
- 102) TRUE
- 103) TRUE
- 104) TRUE
- 105) TRUE
- 106) TRUE
- 107) The term "anorexia nervosa" literally means a lack of appetite. The individual with anorexia nervosa does not lack an appetite. The true problem with the anorexic is a fear of gaining weight which leads to not eating, as opposed to a true lack of desire for food.
- 108) While the binge-eating/purging anorexic and the bulimic may share many features, the clear factor that distinguishes the two is the below normal weight that is a defining feature of anorexia.
- 109) People with binge eating disorder have food binges like people with bulimia but don't do any compensatory behaviors. They don't restrict their diet between binges as much as people with bulimia. People with binge eating disorder tend to be older than people with bulimia, and are more likely to be overweight or obese.
- 110) Research finds that whites show much more body dissatisfaction, dietary restraint, and a drive for thinness than their non-white counterparts. Clearly, these are all factors that set the stage for the development of abnormal eating patterns and, possibly, diagnoseable eating disorders.
- 111) This is the tendency of the body to resist variation from a biologically determined set point. As someone loses weight, hunger rises and can trigger strong impulses to binge eat.
- 112) Although altered serotonergic levels have been observed in individuals with eating disorders, causal conclusions can not be made. Changes in neurochemical function may be a cause and/or consequence of the psychological disorder. In order to conclude that altered serotonin function plays a causal role in eating disorders, changes in serotonergic function would need to be observed prior to the development of the eating disorder.
- 113) The desire to diet suggests that there is some body dissatisfaction, a clear risk factor for the development of an eating disorder. In addition, the practice of dieting increases the likelihood of overeating, as caloric restriction leads to hunger. When the dieter gives in to temptation, this is likely to lead to negative affect. Resumed dieting then continues this pattern, which may then evolve into any one of the recognized eating disorders. As research has demonstrated, going on a diet may actually make us eat more and, as a consequence, feel worse about ourselves and evolve into even more problematic eating patterns.

- 114) Antidepressants are commonly used, alone or, ideally, in addition to CBT. Many patients with bulimia also suffer from mood disorders. In addition to the potential beneficial effects of antidepressants on mood, they have also been shown to decrease both the frequency of binges and the typical preoccupation with shape and weight that is characteristic of those with bulimia.
- 115) Leptin is a hormone that is produced by fat cells. It acts to reduce intake of food. An increase in body fat leads to an increase in leptin which leads in turn to a decrease in food intake. However, overweight people are resistant to the effects of leptin. Ghrelin is a hormone produced by the stomach. It is a powerful appetite stimulator. It rises before meals and decreases after eating. If there is a disturbance in its normal process, this can lead to overeating.
- 116) Homosexual males and those who were fat as children are at a higher risk for developing eating disorders. It is thought that homosexuality may be a risk factor as thinness may be perceived as attractive by this community. Children who are fat as children, especially those who are teased, are likely to be more self-conscious about their appearance and, as a result, more likely to engage in efforts to control their weight. This, both homosexuality and early obesity may, in effect, make males more like females with respect to the level of concern they feel about their physical appearance. Other groups that are at risk for developing eating disorders are those males who restrict their food intake for some other purpose, such as to improve their performance in a sport or to avoid developing some weight-related illness that they may be at risk for.
GRADING RUBRIC: 2 points introduction, 4 points factor 1, 4 points factor 2 = 10 total
- 117) While it may be simple to determine that there is a disordered pattern to an individual's eating habits, the symptoms evident may not fit any of the established diagnostic categories. Thus, the DSM-IV-TR provides a "catch-all" category of "eating disorder not otherwise specified", a diagnosis given to as many as 1/3 of those who seek treatment for an eating disorder. Further complicating the diagnosis of eating disorders is the fact that the eating patterns of an individual with an eating disorder may change over time, such that the individual who once clearly had anorexia may now appear to have bulimia. The clinical features exhibited change over time, a facet of the eating disorders not accounted for by the current classification system.
GRADING RUBRIC: 8 points total, 4 points for each of two factors discussed.
- 118) Like many humans, rats under chronic stress selected high fat and sugar diets. They gained weight in their bellies and became calmer in the face of new, acute stress. People may also eat in response to aversive emotional states as well, and experience the same calming effect. This shows that learning is involved, as well as biochemical effects. Eating in response to emotional cues is reinforced because tension is reduced, leading to an increased likelihood of eating in response to those cues later on.
GRADING RUBRIC: 8 points total, 2 for rats' diet selection, 2 for the physical and emotional effects of the diet, 2 for the similarities in human reactions to emotional cues, 2 for discussion of how learning and biochemical effects reinforce eating in response to stress.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) There is a general agreement among researchers that personality 1) _____
A) is mainly learned.
B) is mainly genetic.
C) has an infinite number of possible trait dimensions.
D) can be characterized by five basic trait dimensions.

Answer: D

Diff: 2 Type: MC Page Ref: 269
Topic: Clinical Features of Personality Disorders
Skill: Factual
Objective:

- 2) According to the DSM-IV-TR, which of the following must be true for a personality disorder diagnosis? 2) _____
A) The patient must experience clinically significant distress.
B) Signs of psychosis must be present.
C) The person's behavior problems must cause them distress or impairment.
D) The patient's behavior must reflect a lack of impulse control.

Answer: C

Diff: 1 Type: MC Page Ref: 269
Topic: Clinical Features of Personality Disorders
Skill: Factual
Objective:

- 3) People find Adam difficult to be around. His behavior is unpredictable but most often is annoying to 3) _____
others. He doesn't seem to learn from his bad experiences, instead he keeps repeating the same mistakes
over and over. His family says Adam has been like this since at least junior high school. Adam most likely
has
A) an anxiety disorder. B) a personality disorder.
C) a mood disorder. D) a dissociative disorder.

Answer: B

Diff: 1 Type: MC Page Ref: 269
Topic: Clinical Features of Personality Disorders
Skill: Applied
Objective:

- 4) Individuals with personality disorders 4) _____
A) have a strong sense of self.
B) are unable to live up to societal expectations.
C) reject societal expectations.
D) comply with societal expectations.

Answer: B

Diff: 1 Type: MC Page Ref: 269-270
Topic: Clinical Features of Personality Disorders
Skill: Factual
Objective:

- 5) Unlike disorders like depression and PTSD, 5) _____
A) personality disorders are found on Axis III.
B) multiple causal events can be identified when a personality disorder has developed.
C) personality disorders develop gradually.
D) those with personality disorders experience considerable subjective distress.

Answer: C

Diff: 1 Type: MC Page Ref: 270
Topic: Clinical Features of Personality Disorders
Skill: Conceptual
Objective:

- 6) Which statement about personality disorders is accurate? 6) _____
- A) Even the milder cases of personality disorders produce severe impairments in social and occupational functioning.
 - B) Most of the personality disorders are extreme reactions to stressful life events.
 - C) The personality disorders are considered situation-specific problems in behaving.
 - D) The category is broad and encompasses behavioral problems that vary widely in form and severity.

Answer: D

Diff: 1 Type: MC Page Ref: 270
Topic: Clinical Features of Personality Disorders
Skill: Factual
Objective:

- 7) The behavioral patterns of individuals with personality disorders 7) _____
- A) are thought to be relatively consistent over time, with little adaptation to new kinds of experiences.
 - B) are remarkable in their tendency to shift dramatically from one kind of disorder to another.
 - C) tend to fluctuate over time.
 - D) tend to normalize with experience as an individual matures.

Answer: A

Diff: 2 Type: MC Page Ref: 270
Topic: Clinical Features of Personality Disorders
Skill: Conceptual
Objective:

- 8) Misdiagnoses are common when looking at potential personality disorders because 8) _____
- A) the diagnostic criteria are subjective.
 - B) it is usually not possible to determine when the problematic behavior began.
 - C) many of the personality disorders share common features.
 - D) most of those in treatment for personality disorders are heavily medicated.

Answer: C

Diff: 1 Type: MC Page Ref: 270
Topic: Difficulties Doing Research on Personality Disorders
Skill: Conceptual
Objective:

- 9) Since there are substantial problems with reliability and validity of the diagnoses of personality disorders, 9) _____
- A) they are rarely used in clinical practice.
 - B) they are considered by clinicians only as suggestions and do not have an impact on treatment decisions.
 - C) it is less likely that research on a disorder will be able to be replicated by other researchers.
 - D) very little research or search for treatments is done.

Answer: C

Diff: 2 Type: MC Page Ref: 271
Topic: Difficulties Doing Research on Personality Disorders
Skill: Conceptual
Objective:

- 10) Which of the following is a factor that complicates determining the causes of personality disorders? 10) _____
- A) the availability of only prospective data
 - B) the inability to gather information from the patients themselves, due to the prevalence of memory disorders amongst those with personality disorders
 - C) the wealth of biological data available
 - D) the high likelihood that an individual with one personality disorder may also have another

Answer: D

Diff: 2 Type: MC Page Ref: 271
Topic: Difficulties Doing Research on Personality Disorders
Skill: Conceptual
Objective:

- 11) The 5 factor model 11) _____
A) is a model that attempts to explain personality disorders by dividing them into 5 main categories.
B) is a 5 step model for the treatment of personality disorders.
C) is a model that explains the causes of personality disorders by describing the 5 most important factors that lead to their development.
D) is a model of normal personality that includes an expanded description of the 5 basic personality dimensions.
Answer: D
Diff: 2 Type: MC Page Ref: 271
Topic: Difficulties Doing Research on Personality Disorders
Skill: Conceptual
Objective:
- 12) The clusters used to divide personality disorders are 12) _____
A) based on research that shows disorders clearly fall into these different categories.
B) no longer used by anyone.
C) criticized because their validity is questionable.
D) evidence that there is little overlap between personality disorders.
Answer: C
Diff: 2 Type: MC Page Ref: 283
Topic: Clinical Features of Personality Disorders
Skill: Factual
Objective:
- 13) What do all of the Cluster A disorders have in common? 13) _____
A) social dysfunction B) clear link to schizophrenia
C) distrust of others D) lack of emotional expression
Answer: A
Diff: 1 Type: MC Page Ref: 272
Topic: Schizotypal Personality Disorder
Skill: Conceptual
Objective:
- 14) Which of the following is NOT a Cluster B personality disorder? 14) _____
A) depressive B) narcissistic C) histrionic D) borderline
Answer: A
Diff: 1 Type: MC Page Ref: 272
Topic: Categories of Personality Disorders
Skill: Factual
Objective:
- 15) Individuals who seem odd and eccentric to others may have personality disorders from 15) _____
A) Cluster A.
B) Cluster B.
C) Cluster C.
D) proposed diagnostic categories needing further study.
Answer: A
Diff: 1 Type: MC Page Ref: 272
Topic: Categories of Personality Disorders
Skill: Factual
Objective:
- 16) Helen is suspicious and doubts the loyalty of even her friends. She is unwilling to forgive perceived insults and never forgets a grudge. She is most likely to be diagnosed with _____ personality disorder. 16) _____
A) histrionic B) schizoid C) paranoid D) schizotypal

Answer: C

Diff: 1 Type: MC Page Ref: 272

Topic: Paranoid Personality Disorder

Skill: Applied

Objective:

- 17) The best single-word description for the person with paranoid personality disorder is 17) _____
A) impulsive. B) mistrustful. C) delusional. D) unemotional.

Answer: B

Diff: 1 Type: MC Page Ref: 272

Topic: Paranoid Personality Disorder

Skill: Conceptual

Objective:

- 18) Unlike the person with paranoid schizophrenia, the person with paranoid personality disorder 18) _____
A) has persistent loss of reality contact.
B) tends to confide in others and assume the loyalty of his or her friends.
C) becomes delusional in response to an actual betrayal or hurtful incident with another person.
D) are in contact with reality, although they may have transient psychotic symptoms.

Answer: D

Diff: 2 Type: MC Page Ref: 272

Topic: Paranoid Personality Disorder

Skill: Conceptual

Objective:

- 19) Which basic personality traits from the 5 factor model seem most important in the development of 19) _____
paranoid personality disorder?
A) excitement seeking and neuroticism B) antagonism and neuroticism
C) introversion and openness to feelings D) fantasy proneness and tough mindedness

Answer: B

Diff: 2 Type: MC Page Ref: 273

Topic: Paranoid Personality Disorder

Skill: Factual

Objective:

- 20) Sam shows little emotion and is loner. He has no social relationships, other than his family, and he seems 20) _____
to experience little pleasure, if any. What personality disorder might Sam have?
A) narcissistic B) borderline C) schizoid D) paranoid

Answer: C

Diff: 1 Type: MC Page Ref: 274

Topic: Schizoid Personality Disorder

Skill: Applied

Objective:

- 21) Greg has been diagnosed with schizoid personality disorder. Knowing this, which of the following jobs 21) _____
would he be most likely to enjoy?
A) elementary school teacher who works with children who have emotional problems
B) receptionist at a busy dentist's office
C) night-time security guard who works alone
D) insurance inspector who uncovers clues that criminal behavior has occurred

Answer: C

Diff: 2 Type: MC Page Ref: 274

Topic: Schizoid Personality Disorder

Skill: Applied

Objective:

- 22) The central problem of schizoid personality disorder is 22) _____
A) a marked disregard for the feelings of others.
B) an inability to form attachments to other people.
C) recurrent depression.
D) cognitive and perceptual distortions.

Answer: B

Diff: 1 Type: MC Page Ref: 274

Topic: Schizoid Personality Disorder

Skill: Factual

Objective:

- 23) Which basic personality traits from the 5 factor model seem most important in the development of schizoid personality disorder? 23) _____
A) low agreeableness and high antagonism
B) high introversion and low agreeableness
C) high introversion and low openness to feelings
D) low excitement seeking and high fantasy proneness

Answer: C

Diff: 2 Type: MC Page Ref: 274

Topic: Schizoid Personality Disorder

Skill: Factual

Objective:

- 24) Individuals with schizoid and paranoid personality disorders differ significantly in their 24) _____
A) level of emotionality. B) ability to function.
C) likelihood of recovery. D) display of psychotic symptoms.

Answer: A

Diff: 2 Type: MC Page Ref: 274

Topic: Schizoid Personality Disorder

Skill: Factual

Objective:

- 25) A cognitive explanation for schizoid personality disorder proposes that the individual with this disorder believes that 25) _____
A) no one can live up to their expectations. B) few people can be trusted.
C) they are basically alone. D) they are misunderstood.

Answer: C

Diff: 2 Type: MC Page Ref: 274

Topic: Schizoid Personality Disorder

Skill: Factual

Objective:

- 26) Tom tells you that he can make his roommate take out the trash by simply thinking about his roommate doing it. He agrees with you that this could sometimes just be a coincidence, but he seems to truly believe he can sometimes get people to do things just by thinking about it. You find him understandable when he talks, but sometimes hard to follow. His clothes are messy and don't match. Tom tells you not to tell anyone about his power, because he knows that other people don't like him because they are jealous and they would hurt him if they could. The best diagnosis for Tom is 26) _____
A) borderline personality disorder. B) schizotypal personality disorder.
C) paranoid personality disorder. D) schizoid personality disorder.

Answer: B

Diff: 2 Type: MC Page Ref: 274-275

Topic: Schizotypal Personality Disorder

Skill: Applied

Objective:

- 27) While the individual with _____ personality disorder appears cool and aloof, the individual with _____ personality disorder is best described as odd. 27) _____
A) schizoid; schizotypal B) schizoid; avoidant
C) schizotypal; avoidant D) avoidant; schizotypal

Answer: A

Diff: 2 Type: MC Page Ref: 274-275

Topic: Schizotypal Personality Disorder

Skill: Factual

Objective:

- 28) Which of the following personality disorders is most likely to be mistaken for schizophrenia? 28) _____
A) borderline B) schizotypal C) avoidant D) schizoid
B

Answer:

Diff: 1 Type: MC Page Ref: 275

Topic: Schizotypal Personality Disorder

Skill: Factual

Objective:

- 29) Visual, attentional, and memory deficits comparable to those seen in schizophrenia have been documented 29) _____
in _____ personality disorder.
A) paranoid B) schizoid C) borderline D) schizotypal

Answer: D

Diff: 1 Type: MC Page Ref: 275

Topic: Schizotypal Personality Disorder

Skill: Factual

Objective:

- 30) Schizophrenic disorders seem to be most strongly linked genetically to _____ personality disorder. 30) _____
A) schizoid B) avoidant C) schizotypal D) Both A and B.

Answer: C

Diff: 1 Type: MC Page Ref: 275

Topic: Schizotypal Personality Disorder

Skill: Factual

Objective:

- 31) Transient psychotic symptoms are seen in which of the following personality disorders? 31) _____
A) schizotypal and schizoid B) schizoid and antisocial
C) paranoid and schizotypal D) paranoid and schizoid

Answer: C

Diff: 2 Type: MC Page Ref: 275

Topic: Schizotypal Personality Disorder

Skill: Factual

Objective:

- 32) Lori is vain and self-centered. When she goes out, it is not at all uncommon for her to do things that ensure 32) _____
she is the center of attention. Her close friends describe her as a "drama queen." Assuming that her
behavior is sufficient to warrant an Axis II diagnosis, which of the following personality disorders is she
most likely to be diagnosed with?
A) antisocial B) histrionic C) narcissistic D) borderline

Answer: B

Diff: 2 Type: MC Page Ref: 275-276

Topic: Histrionic Personality Disorder

Skill: Applied

Objective:

- 33) Luisa is a lively and emotional graduate student. She dresses provocatively and behaves in a very seductive manner with her male professors. She has had a long string of short-lived, stormy romances. Luisa is most likely to have a diagnosis of _____
- A) passive-aggressive personality disorder. B) dependent personality disorder.
C) histrionic personality disorder. D) narcissistic personality disorder.
- Answer: C
Diff: 2 Type: MC Page Ref: 276
Topic: Histrionic Personality Disorder
Skill: Applied
Objective:
- 34) Like many individuals with personality disorders, individuals with histrionic personality disorder are rarely able to maintain relationships over time. Why? _____
- A) Their exaggerated sense of self-importance is generally off-putting.
B) Their self-reliance leads them to feel that they do not need anyone else.
C) Their extreme distrust makes lasting relationships impossible.
D) Their need for attention is likely to drive others away.
- Answer: D
Diff: 2 Type: MC Page Ref: 276
Topic: Histrionic Personality Disorder
Skill: Applied
Objective:
- 35) Histrionic personality disorder is most likely to be diagnosed in people who _____
- A) are emotionally unexpressive and prefer living alone.
B) are attention-seeking and overly emotional.
C) depend on others because they do not feel competent.
D) later develop schizophrenic symptoms.
- Answer: B
Diff: 1 Type: MC Page Ref: 276
Topic: Histrionic Personality Disorder
Skill: Conceptual
Objective:
- 36) Which of the following best accounts for why women are more likely to be diagnosed with histrionic personality disorder than men? _____
- A) The symptoms tend to be exaggerations of traits normally seen in women.
B) The primary feature of this disorder is emotionality and women are more emotional than men.
C) Women are more likely to develop this disorder.
D) Women are naturally more likely than men to engage in attention-seeking behaviors.
- Answer: A
Diff: 2 Type: MC Page Ref: 276
Topic: Histrionic Personality Disorder
Skill: Conceptual
Objective:
- 37) Which of the following is most typical of the interpersonal attitudes and behaviors of someone with histrionic personality disorder? _____
- A) excessive trust and dependence on others' opinions
B) vacillation between overidealization and bitter disappointment
C) cruel and callous exploitation of others for personal gain
D) repeated manipulation of others to gain attention
- Answer: D
Diff: 1 Type: MC Page Ref: 276
Topic: Histrionic Personality Disorder
Skill: Conceptual
Objective:

- 38) Which of the following personality disorders might be the female equivalent of antisocial personality disorder? 38) _____
 A) avoidant B) borderline C) narcissistic D) histrionic
 Answer: D
 Diff: 1 Type: MC Page Ref: 276
 Topic: Histrionic Personality Disorder
 Skill: Factual
 Objective:
- 39) Which basic personality traits from the 5 factor model seem most important in the development of histrionic personality disorder? 39) _____
 A) high conscientiousness and low assertiveness
 B) high extraversion and high neuroticism
 C) low openness to feelings and high fantasy proneness
 D) high neuroticism and low agreeableness
 Answer: B
 Diff: 2 Type: MC Page Ref: 277
 Topic: Histrionic Personality Disorder
 Skill: Factual
 Objective:
- 40) Which of the following core dysfunctional beliefs might explain the development of histrionic personality disorder? 40) _____
 A) "If I am not fun, they will abandon me."
 B) "I need a man to define me."
 C) "I am completely helpless."
 D) "I am the only one I can trust."
 Answer: A
 Diff: 2 Type: MC Page Ref: 277
 Topic: Histrionic Personality Disorder
 Skill: Conceptual
 Objective:
- 41) Hope believes that she is the "star" of her graduate class and that the other students dislike her because they are jealous of her superior intelligence. She believes that she is entitled to be exempted from an important exam because of her outstanding performance in class. Hope probably suffers from 41) _____
 A) histrionic personality disorder.
 B) schizoid personality disorder.
 C) dependent personality disorder.
 D) narcissistic personality disorder.
 Answer: D
 Diff: 2 Type: MC Page Ref: 277
 Topic: Narcissistic Personality Disorder
 Skill: Applied
 Objective:
- 42) Which of the following distinguishes narcissistic personality disorder from the other Cluster B disorders? 42) _____
 A) emotionality B) impulsivity C) grandiosity D) vanity
 Answer: C
 Diff: 2 Type: MC Page Ref: 277
 Topic: Narcissistic Personality Disorder
 Skill: Applied
 Objective:
- 43) Some people always think that everyone is looking at them and talking about them. This self-focused view of the world would be expected in someone with _____ personality disorder. 43) _____
 A) paranoid B) histrionic C) borderline D) narcissistic
 Answer: D
 Diff: 1 Type: MC Page Ref: 277
 Topic: Narcissistic Personality Disorder
 Skill: Conceptual
 Objective:

- 44) Why is it that people with narcissistic personality disorder are unlikely to seek treatment? 44) _____
A) They are hypersensitive to criticism.
B) They think they are nearly perfect and in no need of change.
C) They are suspicious that therapists will steal their ideas.
D) They are afraid they will become dependent on the therapist.

Answer: B

Diff: 2 Type: MC Page Ref: 278

Topic: Narcissistic Personality Disorder

Skill: Conceptual

Objective:

- 45) The histrionic seeks _____, while the narcissist needs _____. 45) _____
A) admiration; attention B) acceptance; admiration
C) acceptance; approval D) attention; admiration

Answer: D

Diff: 1 Type: MC Page Ref: 278

Topic: Narcissistic Personality Disorder

Skill: Factual

Objective:

- 46) A lack of parental indulgence of a child's overconfidence might play a causal role in _____ personality disorder. 46) _____
A) antisocial B) histrionic C) narcissistic D) borderline

Answer: C

Diff: 2 Type: MC Page Ref: 278

Topic: Narcissistic Personality Disorder

Skill: Conceptual

Objective:

- 47) At a young age, children are not able to understand that the world that others experience is different from their own. Children also tend to overestimate their own abilities. A failure to outgrow these youthful characteristics might explain the development of _____ personality disorder. 47) _____
A) antisocial B) narcissistic C) histrionic D) borderline

Answer: B

Diff: 2 Type: MC Page Ref: 278

Topic: Narcissistic Personality Disorder

Skill: Conceptual

Objective:

- 48) Both a lack of parental indulgence and parental overindulgence have been proposed as explanations for _____ personality disorder. 48) _____
A) antisocial B) histrionic C) narcissistic D) borderline

Answer: C

Diff: 1 Type: MC Page Ref: 278

Topic: Narcissistic Personality Disorder

Skill: Factual

Objective:

- 49) Which basic personality traits from the 5 factor model seem most important in the development of narcissistic personality disorder? 49) _____
A) low excitement seeking and high neuroticism
B) low agreeableness and high fantasy proneness
C) high extraversion and high agreeableness
D) low fantasy proneness and high impulsivity

Answer: B

Diff: 2 Type: MC Page Ref: 278

Topic: Narcissistic Personality Disorder

Skill: Factual

Objective:

- 50) Early criminal behavior is most characteristic of _____ 50) _____
- A) schizotypal personality disorder. B) borderline personality disorder.
C) schizoid personality disorder. D) antisocial personality disorder.

Answer: D

Diff: 1 Type: MC Page Ref: 278

Topic: Antisocial Personality Disorder

Skill: Factual

Objective:

- 51) _____ personality disorder is much more common in men than women and involves the exploitation of others without remorse. 51) _____
- A) Histrionic B) Paranoid C) Borderline D) Antisocial

Answer: D

Diff: 1 Type: MC Page Ref: 278

Topic: Antisocial Personality Disorder

Skill: Factual

Objective:

- 52) Which of the following is most typical of the interpersonal attitudes and behaviors of someone with antisocial personality disorder? 52) _____
- A) repeated manipulation of others to gain attention
B) vacillation between overidealization and bitter disappointment
C) excessive trust and dependence on others' opinions
D) cruel and callous exploitation of others for personal gain

Answer: D

Diff: 1 Type: MC Page Ref: 278

Topic: Antisocial Personality Disorder

Skill: Conceptual

Objective:

- 53) Symptoms of what Axis I diagnosis are present in individuals who later develop antisocial personality disorder? 53) _____
- A) attachment disorder B) conduct disorder
C) attention deficit disorder D) depression

Answer: B

Diff: 1 Type: MC Page Ref: 278

Topic: Antisocial Personality Disorder

Skill: Factual

Objective:

- 54) Antisocial personality disorder differs from the other Cluster B disorders in that _____ 54) _____
- A) symptoms are usually present before age 15.
B) it is seen equally on men and women.
C) a need for approval or attention is not displayed.
D) a lack of concern for the feelings of others is displayed.

Answer: C

Diff: 1 Type: MC Page Ref: 278

Topic: Antisocial Personality Disorder

Skill: Factual

Objective:

- 55) Henry was a charming middle-aged man who came to the attention of authorities on bigamy charges. He had a long history of courting and supposedly marrying elderly widows, then absconding with their money. His diagnosis is most likely _____
- A) antisocial personality disorder. B) narcissistic personality disorder.
C) histrionic personality disorder. D) borderline personality disorder.

Answer: A

Diff: 1 Type: MC Page Ref: 278

Topic: Antisocial Personality Disorder

Skill: Applied

Objective:

- 56) Impulsivity and extreme instability in interpersonal relationships, self-image, and mood best characterizes _____
- A) avoidant personality disorder. B) antisocial personality disorder.
C) borderline personality disorder. D) histrionic personality disorder.

Answer: C

Diff: 1 Type: MC Page Ref: 278-279

Topic: Borderline Personality Disorder

Skill: Factual

Objective:

- 57) Which of the following is most typical of the interpersonal attitudes and behaviors of someone with borderline personality disorder? _____
- A) cruel and callous exploitation of others for personal gain
B) repeated manipulation of others to gain attention
C) excessive trust and dependence on others' opinions
D) vacillation between overidealization and bitter disappointment

Answer: D

Diff: 1 Type: MC Page Ref: 278-279

Topic: Borderline Personality Disorder

Skill: Conceptual

Objective:

- 58) Loretta has a long history of first idealizing men and then feeling they have abandoned her. Feelings of emptiness change into reckless acts of sexual promiscuity, gambling, and suicide attempts. She feels that she has never had a sense of self. Loretta probably has _____ personality disorder. _____
- A) dependent B) borderline C) histrionic D) narcissistic

Answer: B

Diff: 1 Type: MC Page Ref: 278-279

Topic: Borderline Personality Disorder

Skill: Applied

Objective:

- 59) Self-mutilation, such as is seen in borderline personality disorder, is _____
- A) a form of suicidal behavior.
B) associated with an increase in anxiety and depression.
C) done to reduce anxiety and depression.
D) a form of self-punishment.

Answer: C

Diff: 1 Type: MC Page Ref: 279

Topic: Borderline Personality Disorder

Skill: Factual

Objective:

60) Glenna believed that Sam loved her and that she could not live without him. When he told her he did not want to see her again, she became violently angry and manipulated him into staying with her by threatening suicide. Which of the following personality disorder does Glenna's behavior suggest she might have? 60) _____

- A) dependent B) borderline C) histrionic D) narcissistic

Answer: B

Diff: 1 Type: MC Page Ref: 279

Topic: Borderline Personality Disorder

Skill: Applied

Objective:

61) Transient psychotic and dissociative experiences can occur in _____ personality disorder. 61) _____

- A) obsessive-compulsive B) antisocial
C) narcissistic D) borderline

Answer: D

Diff: 1 Type: MC Page Ref: 279

Topic: Borderline Personality Disorder

Skill: Factual

Objective:

62) Which basic personality traits from the 5 factor model seem most important in the development of borderline personality disorder? 62) _____

- A) high antagonism and low neuroticism
B) high impulsivity and affective instability
C) high agreeableness and low excitement seeking
D) high extraversion and low fantasy proneness

Answer: B

Diff: 2 Type: MC Page Ref: 279

Topic: Borderline Personality Disorder

Skill: Factual

Objective:

63) The key causal factor in borderline personality disorder seems to be 63) _____

- A) a negative attributional style.
B) an inability to empathize with other people.
C) failure to develop an articulated self-identity.
D) inconsistent or highly punitive discipline in childhood.

Answer: C

Diff: 1 Type: MC Page Ref: 280

Topic: Borderline Personality Disorder

Skill: Factual

Objective:

64) According to Paris' multidimensional theory of borderline personality disorder (BPD), people with high levels of impulsivity and affective instability 64) _____

- A) come to enjoy acting out.
B) come mainly from intact homes and are unlikely to develop BPD.
C) are likely to develop BPD if they are exposed to trauma.
D) are likely to develop BPD in response to even minor stressors.

Answer: C

Diff: 2 Type: MC Page Ref: 280

Topic: Borderline Personality Disorder

Skill: Factual

Objective:

- 65) The research on the association between borderline personality disorder and childhood sexual abuse 65) _____
A) suggests that some genetic component underlies both the disorder in the child and the parents' tendency to abuse.
B) shows child sexual abuse is the leading cause of borderline personality disorder.
C) are problematic—the abuse most likely is occurring with other factors that might be more important.
D) has shown that the reports of sexual abuse were mostly false reports.

Answer: C

Diff: 2 Type: MC Page Ref: 280

Topic: Borderline Personality Disorder

Skill: Factual

Objective:

- 66) The individual with avoidant personality disorder behaves most similarly to someone with _____ 66) _____
personality disorder.
A) schizotypal B) schizoid C) borderline D) antisocial

Answer: B

Diff: 2 Type: MC Page Ref: 281

Topic: Avoidant Personality Disorder

Skill: Conceptual

Objective:

- 67) The individual with avoidant personality disorder is unlikely to develop lasting relationships as a result of 67) _____
their
A) fear of rejection. B) callousness.
C) desire to control others. D) lack of interest.

Answer: A

Diff: 1 Type: MC Page Ref: 281

Topic: Avoidant Personality Disorder

Skill: Factual

Objective:

- 68) Stu has no friends except his brother. He would desperately love to date women but is certain no woman 68) _____
would be interested in him. He tried a dating service but was convinced that the secretary was trying to get
rid of him because he was such a poor candidate. The most likely diagnosis for Stu is
A) schizotypal personality disorder. B) paranoid personality disorder.
C) schizoid personality disorder. D) avoidant personality disorder.

Answer: D

Diff: 2 Type: MC Page Ref: 281

Topic: Avoidant Personality Disorder

Skill: Applied

Objective:

- 69) Helena has avoidant personality disorder. She is likely to 69) _____
A) have no interest in social relationships.
B) engage in a series of intense, unstable relationships.
C) avoid achievement situations where she might fail.
D) be hypersensitive to any sign of criticism or rejection.

Answer: D

Diff: 1 Type: MC Page Ref: 281

Topic: Avoidant Personality Disorder

Skill: Factual

Objective:

- 70) In contrast to schizoid individuals, those with avoidant personality disorder 70) _____
A) are emotional and dramatic.
B) are impulsive and self-destructive.
C) are exploitative rather than compliant.
D) are extremely upset by their lack of social relationships.

Answer: D

Diff: 1 Type: MC Page Ref: 281

Topic: Avoidant Personality Disorder

Skill: Conceptual

Objective:

- 71) Sharon says, "I would love to be in an intimate relationship. My life is terribly boring and lonely. But I am extremely shy and I would fall apart if any man criticized me in the slightest." This description best matches the symptoms of _____ personality disorder. 71) _____

A) avoidant B) dependent C) antisocial D) borderline

Answer: A

Diff: 1 Type: MC Page Ref: 281

Topic: Avoidant Personality Disorder

Skill: Applied

Objective:

- 72) Which basic personality traits from the 5 factor model seem most important in the development of avoidant personality disorder? 72) _____

A) high extraversion and low openness to feelings
B) high antagonism and low neuroticism
C) high introversion and high neuroticism
D) high agreeableness and high angry hostility

Answer: C

Diff: 2 Type: MC Page Ref: 282

Topic: Avoidant Personality Disorder

Skill: Factual

Objective:

- 73) Avoidant personality disorder is extremely similar to and hard to distinguish from 73) _____

A) paranoid personality disorder. B) schizoid personality disorder.
C) generalized social phobia. D) generalized anxiety disorder.

Answer: C

Diff: 2 Type: MC Page Ref: 282

Topic: Avoidant Personality Disorder

Skill: Conceptual

Objective:

- 74) Emily calls her husband every day at work to ask him what she should make for dinner. She spends her days at her mothers, because Emily worries that something will go wrong in her own home that she won't be able to handle. Even though she paints and draws well, Emily has never tried to take a class or use her talent, because she says she knows she really isn't good enough. Emily's most likely diagnosis is 74) _____

A) dependent personality disorder. B) paranoid personality disorder.
C) schizoid personality disorder. D) borderline personality disorder.

Answer: A

Diff: 2 Type: MC Page Ref: 282

Topic: Dependent Personality Disorder

Skill: Applied

Objective:

- 75) Involvement in an abusive relationship (as the one who is abused) would be most expected of the individual with _____ personality disorder. 75) _____

A) borderline B) antisocial C) dependent D) schizotypal

Answer: C

Diff: 1 Type: MC Page Ref: 282

Topic: Dependent Personality Disorder

Skill: Factual

Objective:

- 76) Hattie has a dependent personality disorder. This means that she 76) _____
A) prefers being alone rather than being with people who might criticize her.
B) has difficulty in initiating relationships.
C) has acute discomfort when she is alone.
D) experiences little distress in her life.

Answer: C

Diff: 1 Type: MC Page Ref: 282

Topic: Dependent Personality Disorder

Skill: Applied

Objective:

- 77) People who lack self-confidence despite good skills, who panic at the possibility of being separated from their spouse, and remain in abusive relationships have many of the symptoms of _____ personality disorder. 77) _____
A) dependent B) histrionic C) avoidant D) narcissistic

Answer: A

Diff: 1 Type: MC Page Ref: 282

Topic: Dependent Personality Disorder

Skill: Conceptual

Objective:

- 78) The fear of abandonment is seen in both borderline and dependent personality disorder. A key difference is their reaction to it: 78) _____
A) The person with borderline personality disorder gets into new relationships and the person with dependent personality disorder is afraid to seek out new relationships.
B) The person with borderline personality disorder gets angry and the person with dependent personality disorder becomes submissive.
C) The person with borderline personality disorder gets depressed and the person with dependent personality disorder gets angry.
D) The person with borderline personality disorder goes to other people for a replacement and the person with dependent personality disorder stays alone and sad.

Answer: B

Diff: 2 Type: MC Page Ref: 283

Topic: Dependent Personality Disorder

Skill: Conceptual

Objective:

- 79) Which basic personality traits from the 5 factor model seem most important in the development of dependent personality disorder? 79) _____
A) high neuroticism and high agreeableness
B) high introversion and low conscientiousness
C) high excitement seeking and low openness to feelings
D) high fantasy proneness and low neuroticism

Answer: A

Diff: 2 Type: MC Page Ref: 283

Topic: Dependent Personality Disorder

Skill: Factual

Objective:

- 80) What core belief might explain the behavior of the individual with dependent personality disorder? 80) _____
A) "I am helpless."
B) "Others exist to benefit me."
C) "I don't know who I am without you."
D) "Unless I make people laugh, they will not like me."

Answer: A

Diff: 1 Type: MC Page Ref: 283

Topic: Dependent Personality Disorder

Skill: Factual

Objective:

- 81) John has a great need for order and perfectionism. He can't leave the house until every hair is in place and he has been known to iron the same shirt over and over to ensure that he is wrinkle-free. What personality disorder does John's behavior suggest? 81) _____

A) avoidant B) narcissistic
C) obsessive-compulsive D) dependent

Answer: C

Diff: 1 Type: MC Page Ref: 283

Topic: Obsessive-Compulsive Personality Disorder

Skill: Applied

Objective:

- 82) The individual with _____ personality disorder is likely to be described as rigid and cold. 82) _____

A) histrionic B) obsessive-compulsive
C) schizotypal D) borderline

Answer: B

Diff: 1 Type: MC Page Ref: 284

Topic: Obsessive-Compulsive Personality Disorder

Skill: Factual

Objective:

- 83) Harold is perfectionistic and extremely concerned with maintaining a set routine. He probably suffers from _____ personality disorder. 83) _____

A) obsessive-compulsive B) schizoid
C) dependent D) avoidant

Answer: A

Diff: 1 Type: MC Page Ref: 284

Topic: Obsessive-Compulsive Personality Disorder

Skill: Applied

Objective:

- 84) What is the main difference between Obsessive Compulsive Disorder (OCD) and Obsessive Compulsive Personality Disorder (OCPD)? 84) _____

A) People with OCPD don't have true obsessions or compulsions like people with OCD have.
B) People with OCD can do a compulsion once and feel better, people with OCPD never feel better no matter how many times they do them.
C) People with OCPD are less conscientious about their rituals than people with OCD.
D) People with OCD are more perfectionistic than people with OCPD.

Answer: D

Diff: 1 Type: MC Page Ref: 284

Topic: Obsessive-Compulsive Personality Disorder

Skill: Conceptual

Objective:

- 85) Which basic personality traits from the 5 factor model seem most important in the development of obsessive compulsive personality disorder? 85) _____

A) high excitement seeking and low openness to feelings
B) high fantasy proneness and high agreeableness
C) high extraversion and high openness to feelings
D) high conscientiousness and low compliance

Answer: D

Diff: 2 Type: MC Page Ref: 284
Topic: Obsessive-Compulsive Personality Disorder
Skill: Factual
Objective:

- 86) Which of the following best explains why it is such a challenge to treat personality disorders? 86) _____
- A) By definition they are enduring patterns of thought and behavior.
 - B) Comorbid diagnoses are the norm, not the exception.
 - C) The diagnostic criteria for these disorders suffers from subjectivity.
 - D) They develop early in life.

Answer: A

Diff: 1 Type: MC Page Ref: 285
Topic: Personality Disorders/Treatments and Outcomes
Skill: Conceptual
Objective:

- 87) Which of the following statements is NOT true of treating personality disorders? 87) _____
- A) People with both an Axis I and an Axis II diagnosis are easier to treat than someone with just an Axis II disorder because they have more distress.
 - B) People with personality disorders have trouble establishing good therapeutic relationships with their therapist.
 - C) Treatment for individuals with dependent personality disorder ought to be altered so that excessive dependency is not fostered.
 - D) Individuals with personality disorders from Clusters A and B are more difficult to treat because of their interpersonal difficulties and reluctance to enter therapy.

Answer: A

Diff: 2 Type: MC Page Ref: 285
Topic: Personality Disorders/Treatments and Outcomes
Skill: Conceptual
Objective:

- 88) Cognitive therapy for personality disorders focuses on 88) _____
- A) the way other people respond when the client acts inappropriately.
 - B) the external sources of stress that cause psychological breakdown.
 - C) underlying dysfunctional schemas in the client's mind.
 - D) changing the client's understanding of their early childhood.

Answer: C

Diff: 2 Type: MC Page Ref: 285
Topic: Personality Disorders/Treatments and Outcomes
Skill: Conceptual
Objective:

- 89) Why is the use of medication for borderline personality disorder controversial? 89) _____
- A) because of the possibility of severe side effects
 - B) because research shows it clearly doesn't help
 - C) because it is unethical to alter someone's personality through chemical means
 - D) because it is frequently associated with suicidal behavior

Answer: D

Diff: 2 Type: MC Page Ref: 286
Topic: Personality Disorders/Treatments and Outcomes
Skill: Factual
Objective:

- 90) Donna has borderline personality disorder. She is in therapy, but progress is slow. One problem is that some days she thinks her therapist is the most wonderful person in the world. On other days, she thinks he is worthless and untrustworthy. This type of thinking is called _____
- A) dialectical.
 - B) splitting.
 - C) psychopathological.
 - D) entitlement.
- Answer: B
Diff: 2 Type: MC Page Ref: 286
Topic: Personality Disorders/Treatments and Outcomes
Skill: Applied
Objective:
- 91) Dialectical behavior therapy is _____
- A) an old, long-term therapy for borderline personality disorder that has been found to be ineffective.
 - B) a long-term therapy for borderline personality disorder that focuses on personality change.
 - C) a promising, problem focused treatment for borderline personality disorder.
 - D) is a short-term therapy for borderline personality disorder that involves medication and brief hospitalization.
- Answer: C
Diff: 2 Type: MC Page Ref: 286
Topic: Personality Disorders/Treatments and Outcomes
Skill: Factual
Objective:
- 92) Schizotypal personality disorder is _____
- A) one of the least successful to treatment.
 - B) only successfully cured using dialectical behavior therapy.
 - C) very successfully treated.
 - D) easily treatable with medication, but not with other therapies.
- Answer: A
Diff: 2 Type: MC Page Ref: 286
Topic: Personality Disorders/Treatments and Outcomes
Skill: Conceptual
Objective:
- 93) Which of the following is NOT part of the clinical picture in antisocial personality and psychopathy? _____
- A) being able to talk about ethics but not being guided by them
 - B) careful planning of future activities that will help their families.
 - C) using charm to make a strong first impression
 - D) violent behavior for which there is no feeling of remorse
- Answer: B
Diff: 1 Type: MC Page Ref: 287
Topic: Antisocial Personality and Psychopathy/The Clinical Picture
Skill: Conceptual
Objective:
- 94) Antisocial personality disorder differs from psychopathy in that antisocial personality disorder _____
- A) focuses more on personality characteristics.
 - B) is a less severe and more treatable form of the disorder.
 - C) is an older diagnosis.
 - D) focuses more on observable behaviors.
- Answer: D
Diff: 2 Type: MC Page Ref: 287
Topic: Antisocial Personality and Psychopathy/The Clinical Picture
Skill: Factual
Objective:

- 95) Which of the following is true about the connection between psychopathy and antisocial personality disorder? 95) _____
- A) Psychopathy is another name for antisocial personality disorder.
 - B) Psychopathy is a less severe form of antisocial personality disorder.
 - C) Psychopathy is a more easily treated form of antisocial personality disorder.
 - D) Many people who have antisocial personality disorder do not have psychopathy.
- Answer: D
Diff: 2 Type: MC Page Ref: 287-288
Topic: Antisocial Personality and Psychopathy/The Clinical Picture
Skill: Conceptual
Objective:
- 96) The presence of psychopathy 96) _____
- A) is the single best predictor of future violence and crime recidivism.
 - B) is the single best predictor that treatment will be successful.
 - C) means a person is less likely to be violent and to repeat crimes.
 - D) means that a person also has antisocial personality disorder.
- Answer: A
Diff: 2 Type: MC Page Ref: 288
Topic: Antisocial Personality and Psychopathy/The Clinical Picture
Skill: Factual
Objective:
- 97) An employee evaluation: "He takes what he wants rather than earns it. He hates routine and boredom more than anything else. Thrill-seeking and impulsive actions have gotten him fired at this job. It will get him fired at many others." What kind of disorder does the employee illustrate? 97) _____
- A) psychopathy
 - B) substance abuse
 - C) borderline personality disorder
 - D) histrionic personality disorder
- Answer: A
Diff: 1 Type: MC Page Ref: 288
Topic: Antisocial Personality and Psychopathy/The Clinical Picture
Skill: Applied
Objective:
- 98) In research studies, in addition to failing to learn to avoid punishment, psychopaths 98) _____
- A) showed larger than normal fear potential startle responses.
 - B) did not cognitively understand the connection between a behavior and its consequence.
 - C) did not show normal fear potential startle responses.
 - D) felt a great deal of anticipatory anxiety about punishment, leading to impulsive behaviors.
- Answer: C
Diff: 2 Type: MC Page Ref: 291
Topic: Antisocial Personality and Psychopathy/Causal Factors
Skill: Factual
Objective:
- 99) Carl has psychopathy. You would expect him to 99) _____
- A) be very interested in rewards and to continue his behavior even when the rewards don't come as often as they did.
 - B) be equally interested in rewards and punishments and do his best to get the first and avoid the second.
 - C) be very concerned about possible punishment and to try to avoid it as much as possible.
 - D) be very interested in rewards and to change his behavior quickly if rewards don't come as often as they did.
- Answer: A
Diff: 2 Type: MC Page Ref: 292
Topic: Antisocial Personality and Psychopathy/Causal Factors
Skill: Applied
Objective:

- 100) Who is most likely to develop antisocial personality disorder? 100) _____
A) a child with attention deficit/hyperactivity disorder
B) a child with oppositional defiant disorder
C) a child with conduct disorder
D) a child with conduct disorder and A or B

Answer: A

Diff: 1 Type: MC Page Ref: 294

Topic: Antisocial Personality and Psychopathy/Causal Factors

Skill: Applied

Objective:

- 101) Which type of child is most likely to show the personality traits of a psychopath as an adult? 101) _____
A) one who has high fear and high callousness
B) one who has trouble regulating emotions and high levels of emotional reactivity, including aggression
C) one who has high depression, high anxiety and is quick to anger
D) one who has fearlessness, low anxiety and high callousness

Answer: D

Diff: 2 Type: MC Page Ref: 294

Topic: Antisocial Personality and Psychopathy/Causal Factors

Skill: Applied

Objective:

- 102) Treatment of people with antisocial personality disorder and/or psychopathy 102) _____
A) can actually cause rates of reoffending to increase rather than decrease.
B) is usually successful if it is based on cognitive behavioral techniques.
C) is often successful if the group treatment format is used.
D) can dramatically reduce the amount of reoffending.

Answer: A

Diff: 2 Type: MC Page Ref: 311

Topic: Treatments and Outcomes in Psychopathic and Antisocial Personality

Skill: Factual

Objective:

- 103) Which of the following seems to have the most impact in decreasing the amount of criminal activities of 103) _____
people with psychopathy and antisocial personality disorder?
A) cognitive behavioral treatment B) growing older
C) nothing has any impact D) medication

Answer: B

Diff: 2 Type: MC Page Ref: 296

Topic: Antisocial Personality and Psychopathy/Treatment and Outcome

Skill: Factual

Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 104) People with personality disorders cause as much trouble for others as for themselves. 104) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 269

Topic:

Skill:

Objective:

- 105) The diagnosis of personality disorders is extremely reliable and valid. 105) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 270

Topic:

Skill:

Objective:

- 106) It is rare for someone to have more than one personality disorder. 106) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 271
Topic:
Skill:
Objective:
- 107) The 5 factor model helps assess how people score on 5 basic personality dimensions. 107) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 271
Topic:
Skill:
Objective:
- 108) The DSM-IV-TR divides personality disorders into 5 clusters. 108) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 272
Topic:
Skill:
Objective:
- 109) Paranoid personality disorder is a mild form of paranoid schizophrenia. 109) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 272
Topic:
Skill:
Objective:
- 110) The individual with schizoid personality disorder is likely to appear cold and aloof. 110) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 274
Topic:
Skill:
Objective:
- 111) People with schizotypal personality disorder show odd thinking and behaviors. 111) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 274
Topic:
Skill:
Objective:
- 112) Not all forms of schizotypal personality disorder may be genetically linked to schizophrenia. 112) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 289-290
Topic:
Skill:
Objective:
- 113) There is some evidence of a genetic link between histrionic personality disorder and antisocial personality disorder. 113) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 276
Topic:
Skill:
Objective:

- 114) A disregard for the feelings of others is the primary feature of narcissistic disorder. 114) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 277
Topic:
Skill:
Objective:
- 115) Underneath their seemingly high self-esteem, most psychologists believe that people with narcissistic personality disorder have a fragile and unstable sense of self. 115) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 277
Topic:
Skill:
Objective:
- 116) Grandiosity is characteristic of the individual with histrionic personality disorder. 116) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 277
Topic:
Skill:
Objective:
- 117) The one best word to describe borderline personality disorder is instability. 117) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 278
Topic:
Skill:
Objective:
- 118) Borderline personality disorder is clearly caused by childhood sexual abuse. 118) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 280
Topic:
Skill:
Objective:
- 119) The individual with schizoid personality disorder avoids relationships due to fear of rejection. 119) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 281
Topic:
Skill:
Objective:
- 120) An inability to make decisions is characteristic of the individual with dependent personality disorder. 120) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 282
Topic:
Skill:
Objective:
- 121) A person with dependent personality disorder typically reacts to abandonment with anger. 121) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 283
Topic:
Skill:
Objective:

- 122) Obsessive-compulsive personality disorder is characterized by a need for control and order. 122) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 283
Topic:
Skill:
Objective:
- 123) People with obsessive compulsive personality disorder have obsessions or compulsions. 123) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 283-284
Topic:
Skill:
Objective:
- 124) Personality disorders have different rates in different countries and cultures, depending on which personality traits tend to be tolerated. 124) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 284
Topic:
Skill:
Objective:
- 125) Personality disorders are easily treated. 125) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 285
Topic:
Skill:
Objective:
- 126) Anti-depressants, mood stabilizers, and antipsychotics are all used in the treatment of borderline personality disorder. 126) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 286
Topic:
Skill:
Objective:
- 127) Psychopathy is another name for antisocial personality disorder. 127) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 287
Topic:
Skill:
Objective:
- 128) Psychopathy focuses on personality traits, antisocial personality disorder on behaviors. 128) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 287
Topic:
Skill:
Objective:
- 129) People with psychopathy can be charming and likeable. 129) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 289
Topic:
Skill:
Objective:

- 130) People with psychopathy show poor conditioning of fear. 130) _____
 Answer: True False
 Diff: 2 Type: TF Page Ref: 291-292
 Topic:
 Skill:
 Objective:
- 131) People with psychopathy quickly learn to avoid punishment. 131) _____
 Answer: True False
 Diff: 2 Type: TF Page Ref: 291-292
 Topic:
 Skill:
 Objective:
- 132) Children with conduct disorder and oppositional defiant disorder are at lower risk of developing antisocial personality disorder than those with conduct disorder alone. 132) _____
 Answer: True False
 Diff: 2 Type: TF Page Ref: 294
 Topic:
 Skill:
 Objective:
- 133) People with antisocial personality disorder rarely come for treatment on their own. 133) _____
 Answer: True False
 Diff: 2 Type: TF Page Ref: 296
 Topic:
 Skill:
 Objective:
- 134) Therapy for antisocial personality disorder and/or psychopathy is often successful in reducing the amount of reoffending. 134) _____
 Answer: True False
 Diff: 2 Type: TF Page Ref: 311
 Topic:
 Skill:
 Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

- 135) Briefly describe the general characteristics of a personality disorder. 135) _____
 Answer: This is a disorder in which personality traits and behavior patterns are maladaptive, inflexible, and not readily adaptive to new situations. They do not stem from reactions to stress, but involve the gradual development of behavior patterns. They usually significantly impair social or occupational functioning and in some cases cause a good deal of subjective emotional distress.
 Diff: 1 Type: SA Page Ref: 269
 Topic:
 Skill:
 Objective:
- 136) What complicates the diagnosis of personality disorders? 136) _____
 Answer: Personality disorders are often not diagnosed or may be misdiagnosed. Personality disorders may never be diagnosed or treated due to their basic nature - personality disorders define the personality of the individual with the disorder and it is difficult to determine when a problematic personality becomes a disordered personality. Misdiagnosis is common as the diagnostic criteria are not precise and the criteria for the disorders is not exclusive. While clinicians are likely to agree that an individual has a personality disorder, there may not be agreement as to which disorder the individual has.

Diff: 1 Type: SA Page Ref: 270-271

Topic:

Skill:

Objective:

137) What does the 5 factor model tell us about personality disorders? 137) _____

Answer: The 5 factor model assesses how people score on 5 basic personality traits and the 6 facets of each. People with personality disorders show extremes on different patterns of these traits.

Diff: 2 Type: SA Page Ref: 271

Topic:

Skill:

Objective:

138) Compare and contrast paranoid personality disorder and schizophrenia. 138) _____

Answer: While both disorders are characterized by paranoid delusions, the individual with paranoid personality disorder does not exhibit the overall cognitive impairment that is seen in schizophrenia. The paranoid personality is characterized by paranoia in the absence of the hallucinations and break with reality that is characteristic of schizophrenia.

Diff: 2 Type: SA Page Ref: 272

Topic:

Skill:

Objective:

139) Which of the personality disorders appears to be most related to schizophrenia? What evidence is there of this relationship? 139) _____

Answer: While all of the cluster A personality disorders are characterized by different features of schizophrenia, schizotypal personality appears to be the most strongly related to schizophrenia. This disorder is characterized by abnormalities in behavior that are often seen in those with schizophrenia and there is evidence that those with schizotypal personality disorder are at greater risk of developing schizophrenia.

Diff: 2 Type: SA Page Ref: 274-275

Topic:

Skill:

Objective:

140) Why is histrionic personality disorder more prevalent in women? 140) _____

Answer: While histrionic personality disorder is more commonly diagnosed in women, it may or may not be more prevalent in this gender. Many of the behaviors that characterize this disorder can be described as "gender-related traits" that are more commonly seen in women, thus the diagnosis is more likely to be given to women. This includes traits such as vanity, overdramatization, and concern with physical appearance.

Diff: 2 Type: SA Page Ref: 276

Topic:

Skill:

Objective:

141) Why does the person with a narcissistic personality disorder have many "friends" but few intimate relationships? 141) _____

Answer: People with narcissistic personality disorder overestimate their own accomplishments and underestimate others'. They need friends to gain admiration and seem important, but they eventually see others as stupid or unworthy and reject them. Relationships do not last long because others become tired of the narcissistic person's lack of consideration.

Diff: 1 Type: SA Page Ref: 277

Topic:

Skill:

Objective:

142) What are examples of dangerous behavior seen in borderline personality disorder? 142) _____

Answer: Borderline personality disorder includes erratic and impulsive behaviors that can be self-destructive. These include reckless driving, binges of gambling, drinking, and sex, as well as self-mutilation and suicidal behavior. Self-mutilation is one of the most discriminating signs of borderline and is sometimes associated with relief from anxiety and other negative emotions. Suicidal behavior is also common and, while suicide attempts may be motivated a desire to manipulate, it is estimated that as many as 8 percent may complete a suicide.

Diff: 1 Type: SA Page Ref: 279
Topic:
Skill:
Objective:

143) Compare and contrast avoidant and schizoid personality disorders. 143) _____

Answer: While both disorders are characterized by a lack of social contact, the motivation behind the exhibited social isolation differs. Avoidant individuals are too frightened to initiate relationships. Although alone, the avoidant personality very much wants to be with others but is afraid of rejection. Schizoid individuals are alone because they have no desire to be with others and are emotionally uninvolved.

Diff: 2 Type: SA Page Ref: 281
Topic:
Skill:
Objective:

144) What are the two dimensions of psychopathy and the relationship to antisocial personality disorder? 144) _____

Answer: 1. Affective and interpersonal traits - lack of remorse, empathy.
2. Behavior - deviant lifestyle, irresponsibility. The 2nd is more related to antisocial personality disorder.

Diff: 2 Type: SA Page Ref: 288
Topic:
Skill:
Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

145) Describe and differentiate between the Cluster A personality disorders.

Answer: The Cluster A personality disorders are all alike in that they are characterized by odd behavior. This cluster includes the paranoid, schizoid, and schizotypal personality disorders. All disorders share some common features with schizophrenia, but it is only thought that schizotypal personality disorder is related to schizophrenia. The paranoid personality is characterized by extreme suspicion and distrust. This is the individual who can't forgive even the smallest perceived slight. The paranoid personality is always looking for someone to do him or her wrong, but they are not psychotic. Despite the prevalent paranoia, the paranoid personality is firmly in touch with reality. The schizoid personality shows some of the negative symptoms of schizophrenia, social withdrawal and flat affect. This is the loner, who prefers to be alone and seems to take pleasure in nothing. The schizotypal personality is best described as odd and eccentric. They may show some bizarre thinking, but are generally in touch with reality.

GRADING RUBRIC: 12 points total, 3 for general description of cluster A disorders and 3 for each of the 3 disorders.

Diff: 2 Type: ES Page Ref: 272-275
Topic:
Skill:
Objective:

146) Compare and contrast histrionic and narcissistic personality disorder.

Answer: Both disorders are characterized by a need for attention, but the motivation underlying this need differ. The histrionic personality desires attention in order to feel valued and may use manipulative means to get the attention they crave. The narcissistic personality appears to believe that they have great value, but seeks admiration to confer this belief. While the histrionic desires any attention and will do whatever is needed to get it, the narcissist desires admiration and praise. Both disorders are characterized by vanity and a lack of concern for the emotions of others. These are personality types that are needy, but in different ways. Histrionic personality disorder is a more common diagnosis for women, while narcissism is more commonly seen in men.
GRADING RUBRIC: 8 points, 2 points for each of 2 similarities and 2 points for each of 2 differences.

Diff: 2 Type: ES Page Ref: 275-278

Topic:

Skill:

Objective:

147) Discuss the two theories about the possible causes of narcissistic personality disorder.

Answer: 1. Children go through a phase of grandiosity and lack of empathy. If parents mirror some of this grandiosity, children develop normal self-confidence and self-worth. Narcissistic personality disorder develops if parents are neglectful, devaluing or unempathic to the child. The child then keeps searching for affirmation of an idealized and grandiose sense of self.
2. Narcissistic personality disorder comes from unrealistic parental overevaluation. Parents overindulge their child and teach the child that he/she can get whatever he/she wants without effort or caring about others.
GRADING RUBRIC: 10 points, 5 points for each theory.

Diff: 2 Type: ES Page Ref: 278

Topic:

Skill:

Objective:

148) What are the research findings on psychopathy and learning?

Answer: Psychopaths show deficient avoidance learning. They have a lower than normal fear potential startle response. They do not condition easily to fear. They have a deficient behavior inhibition system—the neural system underlying anxiety. This causes them to show the above mentioned differences. Their behavioral activation system is normal or overreactive, so they tend to focus on rewards. If caught, they focus on avoiding punishment. Their dominant response set for rewards seems to interfere with their ability to use punishment as a cue to change behavior.
GRADING RUBRIC: 8 points total, one for each finding.

Diff: 2 Type: ES Page Ref: 291-293

Topic:

Skill:

Objective:

149) What are the two dimensions of childhood temperament related to antisocial personality disorder and psychopathy, and what is the relationship?

Answer: 1. Difficulty regulated emotions plus high levels of emotional reactivity, including aggressive behaviors when responding to stress and negative emotions like anger. This increases the risk of ASPD and the antisocial dimension of psychopathy.
2. Few problems with regulating emotions, fearlessness, low anxiety and callous-unemotional traits. These children show poor development of conscience and their aggressive behavior is more premeditated than reactive. This is correlated with the interpersonal dimension of psychopathy.
GRADING RUBRIC: 10 points, 4 for each dimension and 2 for their relationship with the disorders.

Diff: 2 Type: ES Page Ref: 294

Topic:

Skill:

Objective:

- 1) D
- 2) C
- 3) B
- 4) B
- 5) C
- 6) D
- 7) A
- 8) C
- 9) C
- 10) D
- 11) D
- 12) C
- 13) A
- 14) A
- 15) A
- 16) C
- 17) B
- 18) D
- 19) B
- 20) C
- 21) C
- 22) B
- 23) C
- 24) A
- 25) C
- 26) B
- 27) A
- 28) B
- 29) D
- 30) C

- 31) C
- 32) B
- 33) C
- 34) D
- 35) B
- 36) A
- 37) D
- 38) D
- 39) B
- 40) A
- 41) D
- 42) C
- 43) D
- 44) B
- 45) D
- 46) C
- 47) B
- 48) C
- 49) B
- 50) D
- 51) D
- 52) D
- 53) B
- 54) C
- 55) A
- 56) C
- 57) D
- 58) B
- 59) C
- 60) B

- 61) D
- 62) B
- 63) C
- 64) C
- 65) C
- 66) B
- 67) A
- 68) D
- 69) D
- 70) D
- 71) A
- 72) C
- 73) C
- 74) A
- 75) C
- 76) C
- 77) A
- 78) B
- 79) A
- 80) A
- 81) C
- 82) B
- 83) A
- 84) D
- 85) D
- 86) A
- 87) A
- 88) C
- 89) D
- 90) B

- 91) C
- 92) A
- 93) B
- 94) D
- 95) D
- 96) A
- 97) A
- 98) C
- 99) A
- 100) A
- 101) D
- 102) A
- 103) B
- 104) TRUE
- 105) FALSE
- 106) FALSE
- 107) TRUE
- 108) FALSE
- 109) FALSE
- 110) TRUE
- 111) TRUE
- 112) TRUE
- 113) TRUE
- 114) FALSE
- 115) TRUE
- 116) FALSE
- 117) TRUE
- 118) FALSE
- 119) FALSE
- 120) TRUE

- 121) FALSE
- 122) TRUE
- 123) FALSE
- 124) TRUE
- 125) FALSE
- 126) TRUE
- 127) FALSE
- 128) TRUE
- 129) TRUE
- 130) TRUE
- 131) FALSE
- 132) FALSE
- 133) TRUE
- 134) FALSE
- 135) This is a disorder in which personality traits and behavior patterns are maladaptive, inflexible, and not readily adaptive to new situations. They do not stem from reactions to stress, but involve the gradual development of behavior patterns. They usually significantly impair social or occupational functioning and in some cases cause a good deal of subjective emotional distress.
- 136) Personality disorders are often not diagnosed or may be misdiagnosed. Personality disorders may never be diagnosed or treated due to their basic nature - personality disorders define the personality of the individual with the disorder and it is difficult to determine when a problematic personality becomes a disordered personality. Misdiagnosis is common as the diagnostic criteria are not precise and the criteria for the disorders is not exclusive. While clinicians are likely to agree that an individual has a personality disorder, there may not be agreement as to which disorder the individual has.
- 137) The 5 factor model assesses how people score on 5 basic personality traits and the 6 facets of each. People with personality disorders show extremes on different patterns of these traits.
- 138) While both disorders are characterized by paranoid delusions, the individual with paranoid personality disorder does not exhibit the overall cognitive impairment that is seen in schizophrenia. The paranoid personality is characterized by paranoia in the absence of the hallucinations and break with reality that is characteristic of schizophrenia.
- 139) While all of the cluster A personality disorders are characterized by different features of schizophrenia, schizotypal personality appears to be the most strongly related to schizophrenia. This disorder is characterized by abnormalities in behavior that are often seen in those with schizophrenia and there is evidence that those with schizotypal personality disorder are at greater risk of developing schizophrenia.
- 140) While histrionic personality disorder is more commonly diagnosed in women, it may or may not be more prevalent in this gender. Many of the behaviors that characterize this disorder can be described as "gender-related traits" that are more commonly seen in women, thus the diagnosis is more likely to be given to women. This includes traits such as vanity, overdramatization, and concern with physical appearance.
- 141) People with narcissistic personality disorder overestimate their own accomplishments and underestimate others'. They need friends to gain admiration and seem important, but they eventually see others as stupid or unworthy and reject them. Relationships do not last long because others become tired of the narcissistic person's lack of consideration.

- 142) Borderline personality disorder includes erratic and impulsive behaviors that can be self-destructive. These include reckless driving, binges of gambling, drinking, and sex, as well as self-mutilation and suicidal behavior. Self-mutilation is one of the most discriminating signs of borderline and is sometimes associated with relief from anxiety and other negative emotions. Suicidal behavior is also common and, while suicide attempts may be motivated a desire to manipulate, it is estimated that as many as 8 percent may complete a suicide.
- 143) While both disorders are characterized by a lack of social contact, the motivation behind the exhibited social isolation differs. Avoidant individuals are too frightened to initiate relationships. Although alone, the avoidant personality very much wants to be with others but is afraid of rejection. Schizoid individuals are alone because they have no desire to be with others and are emotionally uninvolved.
- 144) 1. Affective and interpersonal traits - lack of remorse, empathy.
2. Behavior - deviant lifestyle, irresponsibility. The 2nd is more related to antisocial personality disorder.
- 145) The Cluster A personality disorders are all alike in that they are characterized by odd behavior. This cluster includes the paranoid, schizoid, and schizotypal personality disorders. All disorders share some common features with schizophrenia, but it is only thought that schizotypal personality disorder is related to schizophrenia. The paranoid personality is characterized by extreme suspicion and distrust. This is the individual who can't forgive even the smallest perceived slight. The paranoid personality is always looking for someone to do him or her wrong, but they are not psychotic. Despite the prevalent paranoia, the paranoid personality is firmly in touch with reality. The schizoid personality shows some of the negative symptoms of schizophrenia, social withdrawal and flat affect. This is the loner, who prefers to be alone and seems to take pleasure in nothing. The schizotypal personality is best described as odd and eccentric. They may show some bizarre thinking, but are generally in touch with reality.
GRADING RUBRIC: 12 points total, 3 for general description of cluster A disorders and 3 for each of the 3 disorders.
- 146) Both disorders are characterized by a need for attention, but the motivation underlying this need differ. The histrionic personality desires attention in order to feel valued and may use manipulative means to get the attention they crave. The narcissistic personality appears to believe that they have great value, but seeks admiration to confer this belief. While the histrionic desires any attention and will do whatever is needed to get it, the narcissist desires admiration and praise. Both disorders are characterized by vanity and a lack of concern for the emotions of others. These are personality types that are needy, but in different ways. Histrionic personality disorder is a more common diagnosis for women, while narcissism is more commonly seen in men.
GRADING RUBRIC: 8 points, 2 points for each of 2 similarities and 2 points for each of 2 differences.
- 147) 1. Children go through a phase of grandiosity and lack of empathy. If parents mirror some of this grandiosity, children develop normal self-confidence and self-worth. Narcissistic personality disorder develops if parents are neglectful, devaluing or unempathic to the child. The child then keeps searching for affirmation of an idealized and grandiose sense of self.
2. Narcissistic personality disorder comes from unrealistic parental overevaluation. Parents overindulge their child and teach the child that he/she can get whatever he/she wants without effort or caring about others.
GRADING RUBRIC: 10 points, 5 points for each theory.
- 148) Psychopaths show deficient avoidance learning. They have a lower than normal fear potential startle response. They do not condition easily to fear. They have a deficient behavior inhibition system—the neural system underlying anxiety. This causes them to show the above mentioned differences. Their behavioral activation system is normal or overreactive, so they tend to focus on rewards. If caught, they focus on avoiding punishment. Their dominant response set for rewards seems to interfere with their ability to use punishment as a cue to change behavior.
GRADING RUBRIC: 8 points total, one for each finding.
- 149) 1. Difficulty regulated emotions plus high levels of emotional reactivity, including aggressive behaviors when responding to stress and negative emotions like anger. This increases the risk of ASPD and the antisocial dimension of psychopathy.
2. Few problems with regulating emotions, fearlessness, low anxiety and callous-unemotional traits. These children show poor development of conscience and their aggressive behavior is more premeditated than reactive. This is correlated with the interpersonal dimension of psychopathy.
GRADING RUBRIC: 10 points, 4 for each dimension and 2 for their relationship with the disorders.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Why does it make sense to view addiction as a mental disorder? 1) _____
- A) Substance abuse frequently develops in an attempt to self-medicate negative mood states.
 - B) The symptoms are behavioral.
 - C) The most effective treatments are psychological.
 - D) Neurochemical imbalances underlie the problematic behaviors observed.

Answer: B

Diff: 1 Type: MC Page Ref: 301

Topic: Substance-Related Disorders

Skill: Conceptual

Objective:

- 2) Unlike psychoactive substance abuse, psychoactive substance dependence usually involves 2) _____
- A) pathological use of the substance.
 - B) the use of substances that laws prohibit one from buying or using.
 - C) continued use despite social and occupational problems.
 - D) physiological symptoms such as tolerance and withdrawal.

Answer: D

Diff: 1 Type: MC Page Ref: 301

Topic: Substance-Related Disorders

Skill: Factual

Objective:

- 3) Henry used to become intoxicated after six drinks. Now he needs 10 or 12 to get the same effect. This is an example of 3) _____
- A) withdrawal symptoms.
 - B) tolerance.
 - C) a psychoactive substance abuse disorder.
 - D) an organic impairment.

Answer: B

Diff: 1 Type: MC Page Ref: 301

Topic: Substance-Related Disorders

Skill: Applied

Objective:

- 4) The occurrence of withdrawal symptoms 4) _____
- A) signals that the body has adjusted to the presence of the drug.
 - B) indicates that substance abuse has developed.
 - C) is seen when use of any psychoactive substance is terminated.
 - D) is necessary for a diagnosis of substance dependence.

Answer: A

Diff: 2 Type: MC Page Ref: 301

Topic: Substance-Related Disorders

Skill: Conceptual

Objective:

- 5) Which of the following is a consequence of organic impairment resulting from long-term substance use, as opposed to being a consequence of drug toxicity? 5) _____
- A) amphetamine delusional disorder
 - B) alcoholic intoxication
 - C) alcohol abuse dementia
 - D) cannabis delirium

Answer: C

Diff: 2 Type: MC Page Ref: 301

Topic: Substance-Related Disorders

Skill: Factual

Objective:

- 6) Judd has been drinking heavily for a number of years. When he is not drinking he experiences profuse sweating and shakes. This indicates that Judd 6) _____
A) has developed a tolerance for alcohol.
B) cannot be diagnosed with substance dependence.
C) has withdrawal symptoms when he abstains from alcohol.
D) has an organic impairment.

Answer: C

Diff: 1 Type: MC Page Ref: 301

Topic: Substance-Related Disorders

Skill: Applied

Objective:

- 7) Which of the following is NOT a diagnosis found in the DSM? 7) _____
A) substance dependence B) alcoholic intoxication
C) alcoholism D) substance abuse

Answer: C

Diff: 1 Type: MC Page Ref: 301

Topic: Alcohol Abuse and Dependence

Skill: Factual

Objective:

- 8) Which of the following statements about alcohol problems is accurate? 8) _____
A) Alcohol abuse is a "pure" disorder, with less than 5 percent of alcohol abusers having a coexisting mental disorder.
B) The average life span of an alcoholic is 12 years shorter than the average citizen.
C) The lifetime prevalence for alcoholism in the United States is about 30 percent.
D) Although alcohol impairs motor behavior it does not lower performance on complex cognitive tasks.

Answer: B

Diff: 1 Type: MC Page Ref: 302

Topic: Alcohol Abuse and Dependence

Skill: Factual

Objective:

- 9) Which of the following statements is true about alcohol use? 9) _____
A) Alcoholism is strongly associated with accidental death, but not with violent acts.
B) Alcoholism is extremely serious but rarely fatal.
C) Alcoholism is more common in women than in men.
D) Alcoholism increases the risk of suicide.

Answer: D

Diff: 1 Type: MC Page Ref: 302

Topic: Alcohol Abuse and Dependence

Skill: Factual

Objective:

- 10) Which mental disorder is most commonly comorbid with alcoholism? 10) _____
A) obsessive compulsive disorder B) dissociative amnesia
C) major depressive disorder D) panic disorder

Answer: C

Diff: 1 Type: MC Page Ref: 302

Topic: Alcohol Abuse and Dependence

Skill: Factual

Objective:

- 11) Observed changes in drinking patterns suggest that in the future 11) _____
A) the proportion of blacks that are problem drinkers will increase.
B) the ratio of male to female problem drinkers will increase.
C) the proportion of blacks that are problem drinkers will decrease.
D) the ratio of male to female problem drinkers will decrease.

Answer: D

Diff: 1 Type: MC Page Ref: 302

Topic: Alcohol Abuse and Dependence

Skill: Conceptual

Objective:

- 12) Of the following, who is most likely to be an alcoholic? 12) _____
- A) a thirty-year-old college-educated man
 - B) a twenty-five-year-old divorced man who completed one year of junior college
 - C) a forty-two-year-old married woman who is a high-school drop out
 - D) a fifty-seven-year-old woman with a doctorate in anthropology

Answer: B

Diff: 2 Type: MC Page Ref: 302

Topic: Alcohol Abuse and Dependence

Skill: Applied

Objective:

- 13) Which of the following is NOT a misconception about alcohol? 13) _____
- A) Mixing different types of alcohol makes people more drunk than the same amount of a single type.
 - B) Drinking coffee counteracts the effects of alcohol.
 - C) Alcohol is a stimulant.
 - D) Alcohol can interfere with sleep.

Answer: D

Diff: 2 Type: MC Page Ref: 303

Topic: Alcohol Abuse and Dependence/Clinical Picture

Skill: Factual

Objective:

- 14) Alcohol's effects on _____ explain its ability to impair judgment. 14) _____
- A) endogenous opioids
 - B) epinephrine
 - C) glutamate
 - D) dopamine

Answer: C

Diff: 2 Type: MC Page Ref: 304

Topic: Alcohol Abuse and Dependence/Clinical Picture

Skill: Factual

Objective:

- 15) At low levels, alcohol's effect on the brain is _____; at higher levels, alcohol's effect is _____. 15) _____
- A) to activate the brain's "pleasure centers;" depress brain functioning
 - B) to inhibit glutamate (an excitatory neurotransmitter); release opium-like endorphins
 - C) too minimal to have an impact; massive and excitatory
 - D) depressive; excitatory

Answer: A

Diff: 1 Type: MC Page Ref: 304

Topic: Alcohol Abuse and Dependence/Clinical Picture

Skill: Factual

Objective:

- 16) Alcoholic blackouts 16) _____
- A) cause hangovers.
 - B) can occur with just moderate drinking.
 - C) only happen when alcohol dependence has developed.
 - D) are seen only with heavy drinking.

Answer: B

Diff: 1 Type: MC Page Ref: 304

Topic: Alcohol Abuse and Dependence/Clinical Picture

Skill: Factual

Objective:

- 17) What evidence is there that the legal definition of alcohol intoxication (a blood alcohol content of 0.08) should be changed? 17) _____
- A) Few people show any impairment at this blood alcohol level.
 - B) Judgment becomes impaired long before this blood alcohol level is reached.
 - C) Most alcohol-related accidents occur at much higher blood alcohol levels.
 - D) Most alcohol-related accidents occurs at much lower blood alcohol levels.

Answer: B

Diff: 1 Type: MC Page Ref: 304
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Factual
Objective:

- 18) The typical course of alcohol-related problems 18) _____
- A) is very varied and often includes multiple periods of abstinence.
 - B) is a continuous and gradual decline.
 - C) is a gradual decline followed by increasing physical problems.
 - D) is a rapid decline followed by abstinence.

Answer: A

Diff: 2 Type: MC Page Ref: 304
Topic: Alcohol Abuse and Dependence
Skill: Factual
Objective:

- 19) Passing out from a high blood level of alcohol 19) _____
- A) means a person has not yet developed tolerance.
 - B) means that a persons blackouts have worsened and increased over time.
 - C) may be the result of an allergic reaction to alcohol.
 - D) may actually be a safety device.

Answer: D

Diff: 2 Type: MC Page Ref: 304
Topic: Alcohol Abuse and Dependence
Skill: Factual
Objective:

- 20) Which of the following best explains why women tend to not "hold their booze" as well as men? 20) _____
- A) Women metabolize alcohol less quickly than men.
 - B) Women tend to eat less.
 - C) Women usually drink more quickly than men.
 - D) Women tend to drink mixed drinks, while men prefer beer.

Answer: A

Diff: 1 Type: MC Page Ref: 305
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Applied
Objective:

- 21) Cirrhosis of the liver 21) _____
- A) is caused by overworking the liver trying to assimilate large amounts of alcohol.
 - B) is due to an allergic type reaction of the body to alcohol.
 - C) is debilitating but rarely fatal.
 - D) is a rare complication of alcoholism.

Answer: A

Diff: 1 Type: MC Page Ref: 305
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Factual
Objective:

- 22) Heavy drinking during pregnancy, especially the early part, often causes 22) _____
- A) Down syndrome in the child.
 - B) premature birth and higher rates of still-births.
 - C) aggressiveness and withdrawal in the child.
 - D) incomplete fusion of the spinal canal in the child.

Answer: C

Diff: 1 Type: MC Page Ref: 306
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Factual
Objective:

- 23) Malnutrition 23) _____
- A) may occur in alcoholics as alcohol interferes with the body's ability to use nutrients.
 - B) does not occur in alcoholics as alcohol provides both calories and nutrients.
 - C) is rare amongst alcoholics as alcohol is most commonly consumed with food.
 - D) only occurs when alcoholics are destitute and not able to afford to purchase food.

Answer: A

Diff: 1 Type: MC Page Ref: 307
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Factual
Objective:

- 24) Bertha has been drinking to excess for many years. She is malnourished. This is because 24) _____
- A) alcoholism causes people to lose their appetites.
 - B) alcohol has few calories.
 - C) alcoholism impairs her ability to choose healthy foods.
 - D) alcohol impairs the body's ability to utilize nutrients.

Answer: D

Diff: 2 Type: MC Page Ref: 307
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Applied
Objective:

- 25) Alcoholic psychosis may occur due to 25) _____
- A) low thiamine levels.
 - B) decreased GABA levels.
 - C) impaired serotonergic functioning.
 - D) high opioid levels.

Answer: A

Diff: 2 Type: MC Page Ref: 307
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Factual
Objective:

- 26) Alcohol withdrawal delirium 26) _____
- A) typically lasts from 3 to 6 days.
 - B) occurs when alcohol and other drugs are used simultaneously.
 - C) most commonly occurs in alcoholics who suffer from a mood or personality disorder.
 - D) is characterized by dissociative and amnesic symptoms.

Answer: A

Diff: 2 Type: MC Page Ref: 307
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Factual
Objective:

- 27) Your text describes two commonly recognized psychotic reactions to alcohol. They are 27) _____
- A) alcoholic tolerance and alcoholic withdrawal.
 - B) what used to be called "delirium tremens" and "Korsakoff's psychosis."
 - C) alcohol intoxication and alcohol amnesic disorder.
 - D) what used to be called "alcohol dependence" and "alcohol withdrawal."

Answer: B

Diff: 1 Type: MC Page Ref: 307
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Factual
Objective:

- 28) Korsakoff's psychosis is now known as _____
- A) alcohol amnestic disorder. B) alcoholic withdrawal.
C) alcohol withdrawal delirium. D) delirium tremens.

Answer: A

Diff: 1 Type: MC Page Ref: 307
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Factual
Objective:

- 29) When John stopped drinking after his last week-long binge, he became very ill. He was disoriented, hallucinating, and paranoid. John seems to be experiencing _____
- A) a severe hangover. B) alcohol-induced psychosis.
C) alcohol amnestic disorder. D) alcohol withdrawal delirium.

Answer: D

Diff: 1 Type: MC Page Ref: 307
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Applied
Objective:

- 30) Betty was admitted to the hospital in a state of withdrawal from alcohol. She was diagnosed with alcohol withdrawal delirium (formerly known as delirium tremens). She most likely showed which of the following behaviors? _____
- A) prolonged sleep followed by convulsions and heart failure
B) delusions of grandeur and an inability to get to sleep
C) severe memory deficit and the tendency to falsify reporting events (confabulation)
D) disorientation for time and place and vivid hallucinations

Answer: D

Diff: 1 Type: MC Page Ref: 307
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Applied
Objective:

- 31) The central feature of alcohol amnestic disorder is _____
- A) the presence of hallucinations.
B) a memory defect for recent events.
C) acute fear and extreme suggestibility.
D) a deep sleep, following which the individual has no memory of past events.

Answer: B

Diff: 1 Type: MC Page Ref: 307
Topic: Alcohol Abuse and Dependence/Clinical Picture
Skill: Factual
Objective:

- 32) All drugs which people become dependent upon _____
- A) provide the user with renewed energy.
B) are socially acceptable.
C) produce withdrawal symptoms when use is ceased.
D) act on pleasure pathways in the brain.

Answer: D

Diff: 1 Type: MC Page Ref: 308
Topic: Biological Factors in Substance Abuse and Dependence
Skill: Factual
Objective:

- 33) What is the role of the mesocorticolimbic dopamine pathway (MCLP)? 33) _____
- A) It is the area of the brain that is destroyed by alcohol and leads to amnesic disorder.
 - B) It is the area of the brain that is activated by drugs and which produces euphoria.
 - C) It explains why genetic vulnerable individuals have altered brain wave patterns.
 - D) It metabolizes all psychoactive drugs.

Answer: B

Diff: 1 Type: MC Page Ref: 308

Topic: Biological Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 34) Studies of the genetics of alcoholism 34) _____
- A) have identified the gene that causes alcoholism.
 - B) have not provided support for the notion that a susceptibility to alcoholism can be inherited.
 - C) are not able to determine if the tendency of alcoholism to "run in families" is a result of environmental or biological factors.
 - D) suggest that an inherited altered sensitivity to alcohol might create a vulnerability to alcohol abuse.

Answer: D

Diff: 2 Type: MC Page Ref: 309

Topic: Biological Factors in Substance Abuse and Dependence

Skill: Conceptual

Objective:

- 35) James has two alcoholic parents. Research suggests that his risk for alcoholism is 35) _____
- A) nearly 100 percent.
 - B) no greater than if he had one alcoholic parent.
 - C) about 10 percent higher than if he had no alcoholic parents.
 - D) greater than if he had one alcoholic parent.

Answer: D

Diff: 1 Type: MC Page Ref: 309

Topic: Biological Factors in Substance Abuse and Dependence

Skill: Applied

Objective:

- 36) Men who are at high risk for becoming alcoholics 36) _____
- A) experience more pleasure when they ingest alcohol than nonalcoholic men.
 - B) tend to be more impulsive than the general population.
 - C) experience less stress reduction after alcohol consumption than nonalcoholic men.
 - D) respond less dramatically to alcohol related-cues than nonalcoholic men.

Answer: C

Diff: 1 Type: MC Page Ref: 309

Topic: Biological Factors in Substance Abuse and Dependence

Skill: Conceptual

Objective:

- 37) Rates of alcoholism among Asian populations are _____ than among European peoples. This fact may be related to _____. 37) _____
- A) higher; genetic differences in the sensitivity of the MCLP
 - B) lower; religious differences in the acceptability of alcohol
 - C) higher; genetic differences in the ability to metabolize alcohol
 - D) lower; a mutant enzyme that leads to hypersensitive reactions to alcohol

Answer: D

Diff: 2 Type: MC Page Ref: 309

Topic: Biological Factors in Substance Abuse and Dependence

Skill: Conceptual

Objective:

- 38) The "alcohol flush reaction" 38) _____
A) results from an inability to metabolize alcohol.
B) might explain the reduced rate of alcoholism seen amongst Native American peoples.
C) is seen during alcohol withdrawal.
D) produces a spike in blood pressure and body temperature.

Answer: A

Diff: 1 Type: MC Page Ref: 309

Topic: Biological Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 39) Most children of parents with alcohol problems 39) _____
A) also have alcohol problems.
B) only have alcohol problems if they are raised by their biological parents.
C) have alcohol problems whether they are raised by their biological parents or by adoptive parents.
D) do not develop alcohol problems whether they are raised by their biological parents or by adoptive parents.

Answer: D

Diff: 2 Type: MC Page Ref: 324

Topic: Biological Factors in Alcohol/Genetics

Skill: Factual

Objective:

- 40) Which of the following men has an alcohol-risk personality? 40) _____
A) Sean, who is impulsive, risk-taking, and poor at planning.
B) Brian, who is organized, detail-oriented, and ambitious.
C) Art, who is frequently depressed and has a low level of self-esteem.
D) Tim, who is shy, anxious, and withdrawn.

Answer: A

Diff: 1 Type: MC Page Ref: 310

Topic: Biological Factors in Substance Abuse and Dependence

Skill: Applied

Objective:

- 41) Which of the following is a common personality characteristic of those who later abuse alcohol? 41) _____
A) high tolerance for frustration
B) strong need for praise and admiration
C) over-certainty of ability to fulfill expected gender roles
D) overly sensitive to the feelings of others

Answer: B

Diff: 2 Type: MC Page Ref: 310

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 42) Which parenting skill or parental behavior is most associated with adolescent substance use? 42) _____
A) restricting children from any form of experimentation with alcohol and other drugs
B) restricting the expression of positive emotions
C) lack of monitoring the adolescent's activities
D) overindulging children by giving them too many gifts and privileges

Answer: C

Diff: 1 Type: MC Page Ref: 310

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 43) Persons at high risk for developing alcohol-related problems tend to be more _____ than those at low risk. 43) _____
A) impulsive B) submissive C) dependent D) vain

Answer: A

Diff: 1 Type: MC Page Ref: 310

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 44) Which statement about alcohol abuse disorders and other psychological disorders is accurate? 44) _____
- A) Since alcohol has a negative effect on neurotransmitters, it is extremely rare for people with schizophrenia to become alcohol or drug dependent.
 - B) The personality disorder most often associated with alcohol abuse is obsessive-compulsive personality disorder.
 - C) Since alcohol has an anti-anxiety effect, most of the people who are alcohol dependent and have another disorder suffer from generalized anxiety disorder.
 - D) The personality disorder most often associated with alcohol abuse is antisocial personality disorder.

Answer: D

Diff: 1 Type: MC Page Ref: 310

Topic: Biological Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 45) The individual with which of the following Axis I diagnoses is most likely to also abuse alcohol? 45) _____
- A) somatization disorder
 - B) borderline personality disorder
 - C) depression
 - D) dissociative identity disorder

Answer: C

Diff: 1 Type: MC Page Ref: 310

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 46) Rosa comes to you for treatment of her alcohol abuse. You suspect that she might have some other Axis I disorder as well. Why is it important for you to evaluate her Axis I status? 46) _____
- A) The other disorder should be treated first.
 - B) The co-occurrence of another mental disorder has a very significant, negative effect on likely treatment outcome.
 - C) Her genetic liability may be much stronger if the alcohol abuse is the only Axis I disorder.
 - D) Treating another Axis I disorder, when present along with alcohol abuse, usually clears up the excessive drinking as well.

Answer: B

Diff: 1 Type: MC Page Ref: 310

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Applied

Objective:

- 47) Many people with substance abuse problems 47) _____
- A) actually appear to have less stress in their lives compared to those without abuse problems.
 - B) have a lower incidence of personality disorders than people without abuse problems.
 - C) have histories with high levels of traumatic experiences.
 - D) have high rates of eating disorders.

Answer: C

Diff: 2 Type: MC Page Ref: 325

Topic: Psychosocial Causal Factors in Alcohol Abuse

Skill: Applied

Objective:

- 48) According to the tension-reduction explanation for alcoholism 48) _____
- A) alcohol's ability to alleviate tension should be enhanced in those with a genetic susceptibility to alcoholism.
 - B) all those who experience stress-reduction following alcohol consumption are at an increased risk for alcoholism.
 - C) alcoholics drink more as they are under greater stress.
 - D) alcoholics do not get "high" when they drink, they merely experience a decrease in negative mood states.

Answer: B

Diff: 1 Type: MC Page Ref: 311

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Conceptual

Objective:

- 49) The tension-reduction model of alcoholism 49) _____
- A) proposes that alcoholism is an incurable disease.
 - B) provides an explanation for the role that personality traits play in the development of alcohol abuse.
 - C) does not explain why some excessive drinkers are able to maintain control over their drinking while others are not.
 - D) suggests that alcoholism is environmentally determined.

Answer: C

Diff: 2 Type: MC Page Ref: 311

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Conceptual

Objective:

- 50) The reciprocal influence model of alcohol use suggests that 50) _____
- A) alcoholics are especially intolerant of stress, and thus susceptible to the tension-reducing properties of alcohol.
 - B) the final common pathway of alcohol use is motivation.
 - C) expectancies of social benefit can influence adolescents to begin or to continue drinking.
 - D) marital partners may enable one another to continue drinking.

Answer: C

Diff: 1 Type: MC Page Ref: 311

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 51) The reciprocal influence model is best described as a _____ explanation for teen drinking. 51) _____
- A) psychodynamic
 - B) behavioral
 - C) cognitive
 - D) sociocultural

Answer: C

Diff: 1 Type: MC Page Ref: 311

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 52) The reciprocal influence model suggests that 52) _____
- A) teens will start drinking early no matter what.
 - B) even with different expectancies, teens still drink.
 - C) it would be hard to interrupt the cycle because most teens expectancies about drinking are accurate.
 - D) it may be possible to interrupt the cycle by changing expectancies about drinking.

Answer: D

Diff: 2 Type: MC Page Ref: 311

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Conceptual

Objective:

- 53) Problematic drinking behavior commonly develops during 53) _____
A) old age.
B) crisis periods in a marriage or other intimate personal relationship.
C) a period of great success in an individual's life.
D) the transition to middle age.

Answer: B

Diff: 1 Type: MC Page Ref: 311

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 54) A moderating variable is 54) _____
A) something that influences the connection between two other variables.
B) something that causes alcoholics not to have as strong a reaction to alcohol as earlier.
C) something that causes some alcoholics not to have as much impairment as others.
D) something that makes a person more or less likely to inherit a disorder such as alcoholism.

Answer: A

Diff: 2 Type: MC Page Ref: 311

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 55) An example of a moderating influence would be 55) _____
A) a wife enabling her husband to continue drinking by making excuses for him.
B) a gene that reduces the chances of a person becoming an alcoholic.
C) the impact of therapy on the divorce and suicide rates of alcoholics.
D) the effect of time on outcome expectancy about alcohol.

Answer: D

Diff: 2 Type: MC Page Ref: 311

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Applied

Objective:

- 56) Bill is an alcoholic. His wife, Marge, has a lot of ready excuses she uses to explain to his boss, their friends and their children to explain his frequent absences. This is an example of 56) _____
A) how marriages of alcoholics often last a long time.
B) how marriage can increase the risk of alcoholism.
C) why treatment needs to include identifying factors that may encourage drinking.
D) why most alcoholics rate their marriages as successful.

Answer: C

Diff: 2 Type: MC Page Ref: 311

Topic: Psychosocial Factors in Substance Abuse and Dependence

Skill: Applied

Objective:

- 57) The incidence of alcoholism amongst Muslims and Mormons is low because 57) _____
A) these religions prohibit alcohol consumption.
B) members of both groups are likely to have inherited an inability to metabolize alcohol properly.
C) individuals who practice these religions are likely to live in areas where alcohol is not readily available.
D) strong family and community bonds protect these populations from all psychological disorders.

Answer: A

Diff: 1 Type: MC Page Ref: 312

Topic: Sociocultural Factors in Substance Abuse and Dependence

Skill: Factual

Objective:

- 58) Which of the following countries has the highest per capita rate of alcohol consumption? 58) _____
A) Argentina B) United States C) Germany D) France
Answer: D
Diff: 1 Type: MC Page Ref: 312
Topic: Sociocultural Factors in Substance Abuse and Dependence
Skill: Factual
Objective:
- 59) Which of the following is the most significant barrier to getting an alcoholic into treatment? 59) _____
A) the detoxification process B) finding a suitable treatment program
C) overcoming denial D) the availability of alcohol
Answer: C
Diff: 1 Type: MC Page Ref: 312-313
Topic: Alcohol Abuse Disorders/Treatment
Skill: Conceptual
Objective:
- 60) Why might opiate antagonists be used in the treatment of alcoholism? 60) _____
A) to prevent alcohol from acting on the brain's reward system
B) to minimize withdrawal
C) to make alcohol aversive
D) to minimize cravings
Answer: D
Diff: 1 Type: MC Page Ref: 313
Topic: Alcohol Abuse Disorders/Treatment
Skill: Factual
Objective:
- 61) What complicates the use of Antabuse in the treatment of alcoholism? 61) _____
A) There is a risk of dependence.
B) Exposure to all alcohol must be avoided.
C) It has to be administered intravenously.
D) While it lessens cravings, it does nothing to improve negative mood states.
Answer: B
Diff: 1 Type: MC Page Ref: 313
Topic: Alcohol Abuse Disorders/Treatment
Skill: Factual
Objective:
- 62) Randy has been dependent on alcohol for at least ten years. Drinking has ruined his marriage, his occupational standing and his health. If a friend told Randy that he needed to enter treatment, and Randy responded the way most alcohol dependent people do, he would probably say 62) _____
A) "Alcohol is my enemy but I don't think I am strong enough to combat it."
B) "Who do you think you are attacking? You are the one with the problem."
C) "I have an addictive personality and without help, I will never overcome my addiction."
D) "You have a very good point; I need to do some serious thinking about getting treatment."
Answer: B
Diff: 2 Type: MC Page Ref: 313
Topic: Alcohol Abuse Disorders/Treatment
Skill: Applied
Objective:
- 63) Adam and Beth are both being treated for alcohol dependence by being given medications. Adam's medication makes him vomit if he drinks after taking it. Beth's medication reduces her craving for alcohol. Most likely Adam is taking _____; Beth is taking _____. 63) _____
A) methadone; Naltrexone B) methadone; Antabuse
C) Antabuse; Naltrexone D) Naltrexone; methadone

Answer: C

Diff: 2 Type: MC Page Ref: 313

Topic: Alcohol Abuse Disorders/Treatment

Skill: Applied

Objective:

- 64) The first stage in the treatment of any form of substance dependence is 64) _____
- A) treating physical withdrawal symptoms.
 - B) the administration of antidepressants.
 - C) group psychotherapy.
 - D) the use of Antabuse.

Answer: A

Diff: 1 Type: MC Page Ref: 313

Topic: Alcohol Abuse Disorders/Treatment

Skill: Applied

Objective:

- 65) Aversive conditioning for alcoholics 65) _____
- A) includes family members to try to help the alcoholic understand the harm his/her behaviors have done.
 - B) involves pairing alcohol with something unpleasant like electric shock.
 - C) punishes the alcoholic for drinking by making him/her sick after drinking.
 - D) uses educational and life skills training to help the alcoholic understand the negative aspects of drinking.

Answer: B

Diff: 2 Type: MC Page Ref: 314

Topic: Alcohol Abuse Disorders/Treatment

Skill: Conceptual

Objective:

- 66) Controlled drinking □ teaching alcoholics to drink in moderation □ 66) _____
- A) seems to work for some people with less severe alcoholism.
 - B) seems to work well for all types of alcoholics.
 - C) has been generally accepted as a useful treatment.
 - D) works better than complete abstinence.

Answer: A

Diff: 2 Type: MC Page Ref: 315

Topic: Alcohol Abuse Disorders/Treatment

Skill: Factual

Objective:

- 67) "I am a person who has an affliction—I cannot drink like social drinkers. Spiritual change may help me in recovering from my addiction, but I will be an alcoholic for life." The person who said this would feel most comfortable in _____. 67) _____
- A) aversive conditioning treatment
 - B) a replacement program
 - C) relapse prevention
 - D) Alcoholics Anonymous

Answer: D

Diff: 1 Type: MC Page Ref: 315

Topic: Alcohol Abuse Disorders/Treatment

Skill: Applied

Objective:

- 68) In contrast to other treatment programs, Alcoholics Anonymous 68) _____
- A) offers both group and one-on-one support.
 - B) is successful, but only with severe alcoholics who have "hit bottom."
 - C) has a low drop-out rate.
 - D) uses primarily psychodynamic interventions, although advocates of AA would disagree.

Answer: A

Diff: 1 Type: MC Page Ref: 315

Topic: Alcohol Abuse Disorders/Treatment

Skill: Factual

Objective:

- 69) Which statement about Project MATCH is accurate? 69) _____
- A) It proved that treatment based on Alcoholics Anonymous is superior to other forms of treatment.
 - B) It showed that matching a client's personality to a form of treatment makes no difference.
 - C) It showed that treatments only work when they are carefully matched with the personality profiles of the clients in them.
 - D) It proved that therapists must establish warm relationships with their clients in order for therapy to be effective.

Answer: B

Diff: 2 Type: MC Page Ref: 316

Topic: Alcohol Abuse Disorders/Treatment

Skill: Factual

Objective:

- 70) Which type of treatment for alcoholism has been found to be most effective? 70) _____
- A) inpatient treatment
 - B) none
 - C) 12 step programs
 - D) outpatient treatment

Answer: B

Diff: 2 Type: MC Page Ref: 317

Topic: Alcohol Abuse Disorders/Treatment

Skill: Factual

Objective:

- 71) In what type of treatment are clients taught to recognize situations that are likely to trigger drinking? 71) _____
- A) Motivational Enhancement Therapy
 - B) Relapse Prevention Therapy
 - C) Abstinence Violation Prevention
 - D) Alcoholics Anonymous

Answer: B

Diff: 1 Type: MC Page Ref: 317

Topic: Alcohol Abuse Disorders/Treatment

Skill: Applied

Objective:

- 72) Which of the following is a narcotic? 72) _____
- A) heroin
 - B) marijuana
 - C) alcohol
 - D) tobacco

Answer: A

Diff: 1 Type: MC Page Ref: 317

Topic: Drug Abuse and Dependence

Skill: Factual

Objective:

- 73) Why are estimates of the prevalence of drug dependence likely to be inaccurate? 73) _____
- A) Treatment is often not available when it is sought.
 - B) Many people recover without assistance.
 - C) Many people who think they have a problem don't.
 - D) Twelve-step programs have become the treatment of choice.

Answer: B

Diff: 2 Type: MC Page Ref: 317

Topic: Drug Abuse and Dependence

Skill: Conceptual

Objective:

- 74) Drug abuse and dependence are most common in what age group and in what type of community? 74) _____
A) adolescence and young adulthood; economically depressed communities
B) adolescence and young adulthood; affluent suburban communities
C) middle age; affluent suburban communities
D) childhood; rural communities

Answer: A

Diff: 1 Type: MC Page Ref: 317

Topic: Drug Abuse and Dependence

Skill: Factual

Objective:

- 75) Who has the highest self-reported quit rate among smokers? 75) _____
A) people who were hospitalized for cancer or lung problems
B) people who used nicotine replacement such as gum
C) people who underwent cognitive behavior treatment
D) young adults who have just started smoking

Answer: A

Diff: 1 Type: MC Page Ref: 319

Topic: Drug Abuse and Dependence

Skill: Factual

Objective:

- 76) Opium and heroin 76) _____
A) have always been 2 of the most abused illegal drugs.
B) induce euphoria but do not reduce pain.
C) control pain only if they are used to cause unconsciousness.
D) were originally used by physicians as pain relievers.

Answer: D

Diff: 1 Type: MC Page Ref: 319

Topic: Drug Abuse and Dependence/Opium and its Derivatives

Skill: Factual

Objective:

- 77) In 2000, which of the following accounted for 16% of all drug-related emergency room admissions? 77) _____
A) cocaine B) heroin C) barbiturates D) ecstasy

Answer: B

Diff: 1 Type: MC Page Ref: 319

Topic: Drug Abuse and Dependence/Opium and its Derivatives

Skill: Factual

Objective:

- 78) Opium and its derivatives 78) _____
A) cause amnesia with long-term use.
B) cause withdrawal symptoms within approximately 8 hours of the last dose.
C) typically take several months to produce physiological cravings.
D) always cause near fatal withdrawal symptoms.

Answer: B

Diff: 1 Type: MC Page Ref: 321

Topic: Drug Abuse and Dependence/Opium and its Derivatives

Skill: Factual

Objective:

- 79) The personality trait most likely related to substance abuse is 79) _____
A) fantasy proneness
B) agreeableness
C) sensation seeking
D) anxiety

Answer: C

Diff: 2 Type: MC Page Ref: 336
Topic: Causal factors in opiate abuse and dependence
Skill: Factual
Objective:

- 80) Which of the following makes treatment of dependence on heroin especially challenging? 80) _____
- A) the high probability that the user is also dependent on other drugs
 - B) the likely involvement of the user in a drug-using subculture
 - C) the lack of a means of minimizing cravings
 - D) the severity of the withdrawal

Answer: B

Diff: 2 Type: MC Page Ref: 322
Topic: Drug Abuse and Dependence/Opium and its Derivatives
Skill: Conceptual
Objective:

- 81) The main reason addicts gave for using heroin was 81) _____
- A) depression.
 - B) pleasure.
 - C) mental illness.
 - D) pain reduction.

Answer: B

Diff: 2 Type: MC Page Ref: 322
Topic: Drug Abuse and Dependence/Opium and its Derivatives
Skill: Factual
Objective:

- 82) Endorphins 82) _____
- A) are opium-like substances created synthetically to replace heroin.
 - B) are opium-like substances produced by the body.
 - C) are overproduced in the brains of addicts.
 - D) have been found to play a role in ending drug use.

Answer: B

Diff: 2 Type: MC Page Ref: 322
Topic: Drug Abuse and Dependence/Opium and its Derivatives
Skill: Factual
Objective:

- 83) The use of methadone in the treatment of heroin dependence is comparable to 83) _____
- A) using naltrexone to treat alcoholism.
 - B) using antidepressants as an aid to smoking cessation.
 - C) using Antabuse to treat alcoholism.
 - D) using a nicotine patch to aid in smoking cessation.

Answer: D

Diff: 2 Type: MC Page Ref: 322
Topic: Drug Abuse and Dependence/Opium and its Derivatives
Skill: Conceptual
Objective:

- 84) Tina has been using cocaine for many months. She decides to stop. She can expect 84) _____
- A) to have depression, fatigue, disturbed sleep and increased dreaming.
 - B) to have no withdrawal symptoms.
 - C) to have increased heart rate, memory problems and possibly death.
 - D) to have a strong psychological need for the drug but no withdrawal symptoms.

Answer: A

Diff: 2 Type: MC Page Ref: 323
Topic: Drug Abuse and Dependence/Cocaine and Amphetamines
Skill: Applied
Objective:

- 85) "Crack" is a form of _____
A) cocaine. B) ecstasy.
C) amphetamine. D) methamphetamine.
Answer: A
Diff: 1 Type: MC Page Ref: 323
Topic: Drug Abuse and Dependence/Cocaine and Amphetamines
Skill: Factual
Objective:
- 86) Which statement about crack cocaine use is accurate? _____
A) Because crack cocaine is associated with passivity and depression, chronic users are less likely to die a violent death than other addicted populations.
B) Chronic users develop sexual dysfunctions and a disinterest in sex.
C) Because crack cocaine is inexpensive, users do not have the life problems seen in other addicted populations.
D) Fetal crack syndrome is as distinct and damaging as fetal alcohol syndrome.
Answer: B
Diff: 1 Type: MC Page Ref: 323
Topic: Drug Abuse and Dependence/Cocaine and Amphetamines
Skill: Factual
Objective:
- 87) Children of mothers who use crack _____
A) main risk is of being mistreated by their mothers.
B) are at higher risk for anxiety disorders and ADHD.
C) are likely to have fetal crack syndrome.
D) usually have no physical or mental problems.
Answer: A
Diff: 2 Type: MC Page Ref: 323
Topic: Drug Abuse and Dependence/Cocaine and Amphetamines
Skill: Factual
Objective:
- 88) Benzedrine is a(n) _____
A) amphetamine. B) appetite stimulant.
C) cough suppressant. D) narcotic.
Answer: A
Diff: 1 Type: MC Page Ref: 324
Topic: Drug Abuse and Dependence/Cocaine and Amphetamines
Skill: Factual
Objective:
- 89) Today physicians occasionally prescribe amphetamines for all of the following EXCEPT _____
A) treating hyperactivity in children. B) treating narcolepsy.
C) weight loss. D) staying awake, such as to drive or study.
Answer: D
Diff: 1 Type: MC Page Ref: 324
Topic: Drug Abuse and Dependence/Cocaine and Amphetamines
Skill: Factual
Objective:
- 90) Amphetamine psychosis resembles _____
A) borderline personality disorder. B) paranoid schizophrenia.
C) Korsakoff's syndrome. D) acute hypertension.
Answer: B
Diff: 1 Type: MC Page Ref: 325
Topic: Drug Abuse and Dependence/Cocaine and Amphetamines
Skill: Factual
Objective:

- 91) The drug that can create a state most like psychosis is _____
 A) heroin. B) amphetamine. C) marijuana. D) LSD.
 Answer: B
 Diff: 1 Type: MC Page Ref: 325
 Topic: Drug Abuse and Dependence/LSD and Related Drugs
 Skill: Conceptual
 Objective:
- 92) Methamphetamine _____
 A) is a replacement drug used to help people stop their addiction to heroin.
 B) is a sedative drug that used to be used for surgery.
 C) is much safer and less addicting than most amphetamines.
 D) is much more addictive, easy to make and more dangerous than most amphetamines.
 Answer: D
 Diff: 2 Type: MC Page Ref: 340
 Topic: Methamphetamine
 Skill: Factual
 Objective:
- 93) Which of the following has legitimate medical uses, but is associated with both physiological and psychological dependence and lethal overdoses? _____
 A) amphetamine B) LSD C) barbiturates D) heroin
 Answer: C
 Diff: 1 Type: MC Page Ref: 325
 Topic: Drug Abuse and Dependence/Barbiturates (Sedatives)
 Skill: Factual
 Objective:
- 94) Which of the following is most likely to be used to produce sleep? _____
 A) morphine B) barbiturates C) cocaine D) codeine
 Answer: B
 Diff: 1 Type: MC Page Ref: 325
 Topic: Drug Abuse and Dependence/Barbiturates (Sedatives)
 Skill: Factual
 Objective:
- 95) Impaired memory and concentration, sluggishness, lack of motor coordination, and brain damage are side-effects associated with excessive use of _____
 A) stimulants. B) antidepressants.
 C) sedatives. D) antihistamines.
 Answer: C
 Diff: 1 Type: MC Page Ref: 325
 Topic: Drug Abuse and Dependence/Barbiturates (Sedatives)
 Skill: Factual
 Objective:
- 96) Which of the following people is most likely to be dependent on barbiturates? _____
 A) an anxious young adult who takes the drugs to feel more confident
 B) middle-aged and older persons who cannot get to sleep without them
 C) a teenaged boy who is often impulsive and aggressive
 D) an undereducated member of a minority group who has antisocial personality disorder
 Answer: B
 Diff: 2 Type: MC Page Ref: 325
 Topic: Drug Abuse and Dependence/Barbiturates (Sedatives)
 Skill: Applied
 Objective:

- 97) Barbituate withdrawal 97) _____
 A) causes psychological distress but no withdrawal symptoms.
 B) is similar to withdrawal from cocaine and opium.
 C) lasts for a short time but is very painful.
 D) are more dangerous and long-lasting than most drugs.
 Answer: D
 Diff: 2 Type: MC Page Ref: 325
 Topic: Drug Abuse and Dependence/Barbiturates (Sedatives)
 Skill: Factual
 Objective:
- 98) Both alcohol and barbiturate withdrawal 98) _____
 A) can be minimized by administering another drug.
 B) are purely psychological.
 C) usually last several months.
 D) are far less serious than opiate withdrawal.
 Answer: A
 Diff: 2 Type: MC Page Ref: 325
 Topic: Drug Abuse and Dependence/Barbiturates (Sedatives)
 Skill: Factual
 Objective:
- 99) Which of the following is both a stimulant and a hallucinogen? 99) _____
 A) amphetamine B) valium C) cocaine D) Ecstasy
 Answer: D
 Diff: 1 Type: MC Page Ref: 326
 Topic: Drug Abuse and Dependence/Ecstasy
 Skill: Factual
 Objective:
- 100) Which of the following drug is MDMA structurally similar to? 100) _____
 A) cocaine B) methamphetamine
 C) caffeine D) LSD
 Answer: B
 Diff: 1 Type: MC Page Ref: 326
 Topic: Drug Abuse and Dependence/Ecstasy
 Skill: Factual
 Objective:
- 101) An involuntary reoccurrence of perceptual distortions can occur weeks or months after taking a particular drug. The phenomenon is called _____; the drug is called _____. 101) _____
 A) amphetamine psychosis; amphetamine B) a blackout; alcohol
 C) a rush; LSD D) a flashback; LSD
 Answer: D
 Diff: 2 Type: MC Page Ref: 326
 Topic: Drug Abuse and Dependence/LSD and Related Drugs
 Skill: Factual
 Objective:
- 102) What do marijuana and heroin have in common? 102) _____
 A) both are synthetic B) both are typically mainlined
 C) both are illegal D) both are depressants
 Answer: C
 Diff: 1 Type: MC Page Ref: 327
 Topic: Drug Abuse and Dependence/Marijuana
 Skill: Factual
 Objective:

- 103) Brendan has been using marijuana daily for more than six years. If he stops using the drug we can expect 103) _____
A) a period of extreme depression and lethargy, but no physiological symptoms.
B) slowed reaction times, increased heart rate, and memory dysfunction.
C) a potentially lethal withdrawal phase.
D) a strong psychological need for it when he is tense, but no withdrawal symptoms.

Answer: D

Diff: 2 Type: MC Page Ref: 328

Topic: Drug Abuse and Dependence/Marijuana

Skill: Applied

Objective:

- 104) One of the effects of nicotine that may increase its potential for dependency is 104) _____
A) it has anti-anxiety properties.
B) it helps people focus and concentrate.
C) it improves mood.
D) it temporarily reduces fatigue.

Answer: A

Diff: 2 Type: MC Page Ref: 345

Topic: Stimulants: Caffeine and Nicotine

Skill: Factual

Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 105) A diagnosis of substance abuse means a person has physiological needs for a substance. 105) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 301

Topic:

Skill:

Objective:

- 106) The criteria for making a diagnosis of "alcoholism" can be found in the DSM. 106) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 301

Topic:

Skill:

Objective:

- 107) Alcohol abuse is often associated with personality disorders. 107) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 302

Topic:

Skill:

Objective:

- 108) Most problem drinkers are men. 108) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 302

Topic:

Skill:

Objective:

- 109) Impaired judgment is only evident when blood alcohol level is greater than .08. 109) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 304

Topic:

Skill:

Objective:

- 110) Heavy drinking can interfere with the body's ability to utilize nutrients. 110) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 307
Topic:
Skill:
Objective:
- 111) Alcohol withdrawal delirium was once called "Korsakoff's psychosis." 111) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 307
Topic:
Skill:
Objective:
- 112) Alcohol amnesic disorder is thought to develop due to a thiamine deficiency. 112) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 307
Topic:
Skill:
Objective:
- 113) Alcoholism is a genetic disorder. 113) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 309
Topic:
Skill:
Objective:
- 114) There may be an alcoholic personality type that increases risk of developing alcoholism. 114) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 310
Topic:
Skill:
Objective:
- 115) Expectations regarding the effects of alcohol have been shown to play a role in both the initiation and maintenance of teen drinking. 115) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 311
Topic:
Skill:
Objective:
- 116) Excessive use of alcohol is one of the most frequent causes of divorce in the United States. 116) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 311
Topic:
Skill:
Objective:
- 117) Antabuse can be used to make alcohol consumption aversive. 117) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 313
Topic:
Skill:
Objective:

- 118) The individual who is treated with naltrexone must avoid any exposure to alcohol. 118) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 313
Topic:
Skill:
Objective:
- 119) Behavioral and cognitive-behavioral approaches to alcoholism treatment focus solely on decreasing the use of alcohol. 119) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 314-315
Topic:
Skill:
Objective:
- 120) Project MATCH demonstrated the importance of matching client characteristics with the type of treatment provided. 120) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 316
Topic:
Skill:
Objective:
- 121) Dependence does not develop of caffeine. 121) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 317
Topic:
Skill:
Objective:
- 122) Withdrawal from heroin is always dangerous. 122) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 321
Topic:
Skill:
Objective:
- 123) The overproduction of endorphins causes a craving for narcotics. 123) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 322
Topic:
Skill:
Objective:
- 124) Cocaine is a synthetic stimulant. 124) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 323
Topic:
Skill:
Objective:
- 125) Children born to mothers who use crack often have fetal crack syndrome. 125) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 323
Topic:
Skill:
Objective:

126) Amphetamines are still used in medicine despite their dangers and likelihood of addiction. 126) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 324
Topic:
Skill:
Objective:

127) People rarely become addicted to methamphetamine and if they do, are easily able to stop. 127) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 340
Topic:
Skill:
Objective:

128) Ecstasy is both a stimulant and a hallucinogen. 128) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 326
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

129) Name and describe the two factors that are seen when a person has a physiological need for a psychoactive substance. 129) _____
Answer: Tolerance: the need for increased amounts of the substance to gain the desired effect.
Withdrawal: physical symptoms such as sweating or tremors that occur when a person abstains from the substance.

Diff: 1 Type: SA Page Ref: 301
Topic:
Skill:
Objective:

130) What is alcohol's effect on the brain at low doses? What is its effect at high doses? 130) _____
Answer: At low doses alcohol activates the brain's "pleasure center" which releases endorphins and produces a sense of well-being. At higher doses, alcohol depresses the excitatory neurotransmitter, glutamate, which slows brain activity. The effect is it impairs learning, judgment, and self-control. At higher levels still coordination, speech, and vision are impaired. Eventually a person passes out. If they do not, at concentrations above 0.55 percent, alcohol poisoning is fatal.

Diff: 2 Type: SA Page Ref: 304
Topic:
Skill:
Objective:

131) Nutritional deficiencies are common in alcoholics. Provide two different reasons for this. 131) _____
Answer: Alcohol is high in calories, but has no real nutritional value. Thus, the alcoholic may not eat properly. Alcohol also compromises the body's ability to use ingested nutrients, so even if food high in nutritional value is ingested the nutrients will not be fully available to the body.

Diff: 2 Type: SA Page Ref: 305
Topic:
Skill:
Objective:

- 132) What causes alcohol amnestic disorder? 132) _____
Answer: Alcohol amnestic disorder, also known as Korsakoff's syndrome, is a result of a lack of vitamin B (thiamine).
Diff: 2 Type: SA Page Ref: 307
Topic:
Skill:
Objective:
- 133) How do substances such as alcohol and cocaine have an overpowering hold on people, sometimes after only a few uses? 133) _____
Answer: 1. Ability to activate areas of pleasure in the brain.
2. People's biological make-up, such as genes, and their environmental influences make them more susceptible.
Diff: 2 Type: SA Page Ref: 307
Topic:
Skill:
Objective:
- 134) What factors might be inherited that put one at greater risk for developing alcoholism? 134) _____
Answer: It has been demonstrated that personality variables such as impulsiveness and emotional instability might be associated with a greater likelihood of developing alcoholism. Physiological differences in responses to alcohol have also been seen in prealcoholic men with a family history of alcoholism. It may be that those who are vulnerable to alcoholism derive more pleasure from alcohol use and/or may have a larger conditioned response to alcohol-related cues.
Diff: 2 Type: SA Page Ref: 308-309
Topic:
Skill:
Objective:
- 135) Why does the tension reduction hypothesis fail to explain the development of alcohol dependence? 135) _____
Answer: If the sole explanation for the development of alcoholism could be accounted for by the ability of alcohol to alleviate stress, the incidence of alcoholism would be much higher than it is.
Diff: 2 Type: SA Page Ref: 311
Topic:
Skill:
Objective:
- 136) What evidence is there that cultural attitudes play a role in the development of alcohol abuse? 136) _____
Answer: Cultural factors can either decrease or increase the likelihood of alcohol abuse. Muslims and Mormons prohibit alcohol use and Orthodox Jews limit its use to religious rituals. All three groups have very low rates of alcoholism. In Europe, where half the alcohol in the world is consumed, alcohol abuse is a big problem. France has the highest per capita alcohol consumption and death rate from cirrhosis.
Diff: 1 Type: SA Page Ref: 312
Topic:
Skill:
Objective:
- 137) Name and describe the effects of two medications used in the treatment of alcohol dependence. 137) _____
Answer: Disulfiram (Antabuse): this drug deters drinking because it causes violent vomiting if a person drinks after having it in the system.
Naltrexone: this opiate antagonist helps reduce the craving for alcohol and lowers the incentive to drink. Medications can also be given to ease the detoxification process, reducing withdrawal symptoms.

Diff: 2 Type: SA Page Ref: 313
Topic:
Skill:
Objective:

- 138) Discuss the physical and mental health problems in our society that are caused by nicotine and caffeine. 138) _____

Answer: Ease of abuse and addiction, difficulty to quit and deal with withdrawal, health problems and side effects.

Diff: 2 Type: SA Page Ref: 344
Topic:
Skill:
Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

- 139) Identify and describe the disorders that an "addict" might be diagnosed with according to the DSM-IV-TR.

Answer: While the DSM-IV-TR does not include diagnoses of addict or alcoholic, there are two types of disorders which an "addict" might be diagnosed with based on their substance use. Substance abuse involves pathological use of a substance resulting in potentially hazardous behavior, or in continued use despite a persistent social, psychological, occupational, or health problem. Substance dependence is a more serious problem with substance use and may be characterized by evidence of physiological dependence. When physiological dependence has developed tolerance and/or withdrawal are seen. Other features of substance dependence include taking larger amounts of the substance than intended, having an inability to cut down use, spending more time on drug-related activities and less on important social and occupational activities, and continued use despite knowledge of physical or psychological problems caused by the drug.

GRADING RUBRIC: 2 points for identifying the disorders, 2 points for noting that dependence is more serious, 2 points for identifying that physiological dependence is seen in substance dependence, 2 points for indicating that addict is not in the DSM = 8 total.

Diff: 1 Type: ES Page Ref: 301
Topic:
Skill:
Objective:

- 140) What do all abused substances have in common? What are some inherited factors that might lead to an increased vulnerability to substance abuse?

Answer: It would be expected that abused substances would share some common effects on the brain and there is evidence of this. It appears that drugs such as alcohol, cocaine, and opium all act on a system in the brain that is involved in pleasure. Thus, these drugs act on a system in the brain that normally serves to reward behaviors that are beneficial. While psychoactive drugs may have similar effects in the brain of everyone, there is evidence that those with a genetic predisposition for substance abuse may show an altered response to drugs. Males who are genetically predisposed to develop alcoholism, for example, appear to feel greater stress reduction than others when they drink alcohol and show other physiological differences in how they respond to alcohol. It is believed that these differences can explain the observed role of genes in the development of substance use disorders. Altered drug responsiveness, as well as personality traits, may be inherited and result in a greater risk of substance abuse and dependence.

GRADING RUBRIC: 10 points total - 4 points for explanation of reward system involvement, 3 points for each of two inherited factors that increase vulnerability.

Diff: 2 Type: ES Page Ref: 307-309
Topic:
Skill:
Objective:

141) Describe two psychosocial causal factors in the development of alcohol abuse and dependence.

Answer: Two of: 1. Failures in parental guidance - alcoholic parents model the behavior, provide limited guidance and training.
2. Psychological vulnerability - emotionally immature, expecting a lot of the world, needing lots of praise, low frustration tolerance, impulsivity and feeling inadequate to fulfill expected gender roles seem to describe an alcoholic personality. These people have higher risk of developing alcoholism. Also the presence of antisocial personality disorder increases risk.
3. Stress and tension reduction can reinforce drinking behavior.
4. Expectations of social success - the reciprocal influence model - can increase risk.
5. Relationship problems can increase drinking.

GRADING RUBRIC: 10 points, 5 for each causal factor.

Diff: 2

Type: ES

Page Ref: 309-310

Topic:

Skill:

Objective:

- 1) B
- 2) D
- 3) B
- 4) A
- 5) C
- 6) C
- 7) C
- 8) B
- 9) D
- 10) C
- 11) D
- 12) B
- 13) D
- 14) C
- 15) A
- 16) B
- 17) B
- 18) A
- 19) D
- 20) A
- 21) A
- 22) C
- 23) A
- 24) D
- 25) A
- 26) A
- 27) B
- 28) A
- 29) D
- 30) D

- 31) B
- 32) D
- 33) B
- 34) D
- 35) D
- 36) C
- 37) D
- 38) A
- 39) D
- 40) A
- 41) B
- 42) C
- 43) A
- 44) D
- 45) C
- 46) B
- 47) C
- 48) B
- 49) C
- 50) C
- 51) C
- 52) D
- 53) B
- 54) A
- 55) D
- 56) C
- 57) A
- 58) D
- 59) C
- 60) D

- 61) B
- 62) B
- 63) C
- 64) A
- 65) B
- 66) A
- 67) D
- 68) A
- 69) B
- 70) B
- 71) B
- 72) A
- 73) B
- 74) A
- 75) A
- 76) D
- 77) B
- 78) B
- 79) C
- 80) B
- 81) B
- 82) B
- 83) D
- 84) A
- 85) A
- 86) B
- 87) A
- 88) A
- 89) D
- 90) B

- 91) B
- 92) D
- 93) C
- 94) B
- 95) C
- 96) B
- 97) D
- 98) A
- 99) D
- 100) B
- 101) D
- 102) C
- 103) D
- 104) A
- 105) FALSE
- 106) FALSE
- 107) TRUE
- 108) TRUE
- 109) FALSE
- 110) TRUE
- 111) FALSE
- 112) TRUE
- 113) FALSE
- 114) TRUE
- 115) TRUE
- 116) TRUE
- 117) TRUE
- 118) FALSE
- 119) FALSE
- 120) FALSE

- 121) FALSE
- 122) FALSE
- 123) FALSE
- 124) FALSE
- 125) FALSE
- 126) TRUE
- 127) FALSE
- 128) TRUE
- 129) Tolerance: the need for increased amounts of the substance to gain the desired effect. Withdrawal: physical symptoms such as sweating or tremors that occur when a person abstains from the substance.
- 130) At low doses alcohol activates the brain's "pleasure center" which releases endorphins and produces a sense of well-being. At higher doses, alcohol depresses the excitatory neurotransmitter, glutamate, which slows brain activity. The effect is it impair learning, judgment, and self-control. At higher levels still coordination, speech, and vision are impaired. Eventually a person passes out. If they do not, at concentrations above 0.55 percent, alcohol poisoning is fatal.
- 131) Alcohol is high in calories, but has no real nutritional value. Thus, the alcoholic may not eat properly. Alcohol also compromises the body's ability to use ingested nutrients, so even if food high in nutritional value is ingested the nutrients will not be fully available to the body.
- 132) Alcohol amnesic disorder, also knowns Korsakoff's syndrome, is a result of a lack of vitamin b (thiamine).
- 133) 1. Ability to activate areas of pleasure in the brain.
2. People's biological make-up, such as genes, and their environmental influences make them more susceptible.
- 134) It has been demonstrated that personality variables such as impulsiveness and emotional instability might be associated with a greater likelihood of developing alcoholism. Physiological differences in responses to alcohol have also been seen in prealcoholic men with a family history of alcoholism. It may be that those who are vulnerable to alcoholism derive more pleasure from alcohol use and/or may have a larger conditioned response to alcohol-related cues.
- 135) If the sole explanation for the development of alcoholism could be accounted for by the ability of alcohol to alleviate stress, the incidence of alcoholism would be much higher than it is.
- 136) Cultural factors can either decrease or increase the likelihood of alcohol abuse. Muslims and Mormons prohibit alcohol use and Orthodox Jew limit its use to religious rituals. All three groups have very low rates of alcoholism. In Europe, where half the alcohol in the world is consumed, alcohol abuse is a big problem. France has the highest per capita alcohol consumption and death rate from cirrhosis.
- 137) Disulfiram (Antabuse): this drug deters drinking because it causes violent vomiting if a person drinks after having it in the system.
Naltrexone: this opiate antagonist helps reduce the craving for alcohol and lowers the incentive to drink. Medications can also be given to ease the detoxification process, reducing withdrawal symptoms.
- 138) Ease of abuse and addiction, difficulty to quit and deal with withdrawal, health problems and side effects.
- 139) While the DSM-IV-TR does not include diagnoses of addict or alcoholic, there are two types of disorders which an "addict" might be diagnosed with based on their substance use. Substance abuse involves pathological use of a substance resulting in potentially hazardous behavior, or in continued use despite a persistent social, psychological, occupational, or health problem. Substance dependence is a more serious problem with substance use and may be characterized by evidence of physiological dependence. When physiological dependence has developed tolerance and/or withdrawal are seen. Other features of substance

dependence include taking larger amounts of the substance than intended, having an inability to cut down use, spending more time on drug-related activities and less on important social and occupational activities, and continued use despite knowledge of physical or psychological problems caused by the drug.

GRADING RUBRIC: 2 points for identifying the disorders, 2 points for noting that dependence is more serious, 2 points for identifying that physiological dependence is seen in substance dependence, 2 points for indicating that addict is not in the DSM = 8 total.

- 140) It would be expected that abused substances would share some common effects on the brain and there is evidence of this. It appears that drugs such as alcohol, cocaine, and opium all act on a system in the brain that is involved in pleasure. Thus, these drugs act on a system in the brain that normally serves to reward behaviors that are beneficial. While psychoactive drugs may have similar effects in the brain of everyone, there is evidence that those with a genetic predisposition for substance abuse may show an altered response to drugs. Males who are genetically predisposed to develop alcoholism, for example, appear to feel greater stress reduction than others when they drink alcohol and show other physiological differences in how they respond to alcohol. It is believed that these differences can explain the observed role of genes in the development of substance use disorders. Altered drug responsiveness, as well as personality traits, may be inherited and result in a greater risk of substance abuse and dependence.

GRADING RUBRIC: 10 points total - 4 points for explanation of reward system involvement, 3 points for each of two inherited factors that increase vulnerability.

- 141) Two of:
1. Failures in parental guidance - alcoholic parents model the behavior, provide limited guidance and training.
 2. Psychological vulnerability - emotionally immature, expecting a lot of the world, needing lots of praise, low frustration tolerance, impulsivity and feeling inadequate to fulfill expected gender roles seem to describe an alcoholic personality. These people have higher risk of developing alcoholism. Also the presence of antisocial personality disorder increases risk.
 3. Stress and tension reduction can reinforce drinking behavior.
 4. Expectations of social success - the reciprocal influence model - can increase risk.
 5. Relationship problems can increase drinking.

GRADING RUBRIC: 10 points, 5 for each causal factor.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Sexual variants illustrate a theme in abnormal psychology better than any other category of disorder. 1) _____
Which theme?
A) the importance of stressors as the cause of disorder
B) the difficulty in defining the boundaries of normal and abnormal
C) the role of neurotransmitters in controlling thought and behavior
D) the impact of disorder on one's occupational and social adjustment

Answer: B

Diff: 1 Type: MC Page Ref: 332
Topic: Sexual Variants, Abuse, and Dysfunction
Skill: Conceptual
Objective:

- 2) Research about sexuality is 2) _____
A) abundant, although it is plagued by methodological problems.
B) surprisingly limited due to taboos and political controversies surrounding sexual topics.
C) one of the earliest areas of research in psychology.
D) limited because there are relatively few forms of abnormal sexual behavior.

Answer: B

Diff: 1 Type: MC Page Ref: 332
Topic: Sexual Variants, Abuse, and Dysfunction
Skill: Factual
Objective:

- 3) Which of the following is cross-culturally universal? 3) _____
A) acceptance of homosexuality
B) a distaste for extramarital sex
C) males value physical appearance more than females
D) attitudes towards premarital sex

Answer: C

Diff: 1 Type: MC Page Ref: 332
Topic: Sociocultural Influences on Sexual Practices and Standards
Skill: Factual
Objective:

- 4) Which of the following statements is true? 4) _____
A) Monogamy is a dated concept.
B) Over time, all cultures develop more liberal attitudes towards sex.
C) Sexual practices and standards are constantly evolving.
D) There is little that is considered "taboo" in modern society.

Answer: C

Diff: 1 Type: MC Page Ref: 332
Topic: Sociocultural Influences on Sexual Practices and Standards
Skill: Conceptual
Objective:

- 5) Which of the following is true? 5) _____
A) People tend to believe their current sexual standards are correct and to be intolerant of nonconformists.
B) People tend to be envious of sexual nonconformists.
C) Attitudes about what is sexually "normal" are extremely consistent across cultures.
D) Attitudes about what is sexually "normal" have stayed surprisingly the same over time.

Answer: A

Diff: 1 Type: MC Page Ref: 332
Topic: Sociocultural Influences on Sexual Practices and Standards
Skill: Factual
Objective:

- 6) When it comes to cross-cultural similarities and differences concerning sexual behavior, which of the following statements is accurate? 6) _____
- A) In most cultures, people are highly tolerant of sexual nonconformity.
 - B) Taboos on sex between close relatives are found in all known cultures.
 - C) Only in Western societies do men place greater emphasis on a partner's attractiveness.
 - D) In a specific culture, sexual attitudes and practices tend to be quite stable over hundreds of years.

Answer: B

Diff: 1 Type: MC Page Ref: 333
Topic: Sociocultural Influences on Sexual Practices and Standards
Skill: Factual
Objective:

- 7) Freud 7) _____
- A) viewed homosexuality as a disease that could be easily treated.
 - B) thought homosexuality developed as a result of early sexual trauma.
 - C) believed that homosexuals were really heterosexuals who were traumatized by their own sexual desires.
 - D) was much more accepting of homosexuality than his contemporaries.

Answer: D

Diff: 1 Type: MC Page Ref: 333
Topic: Sociocultural Influences on Sexual Practices and Standards
Skill: Factual
Objective:

- 8) Among psychoanalysts, homosexuality was first seen as _____, but later was seen as _____. 8) _____
- A) a form of criminal behavior; defense against heterosexual urges
 - B) a result of highly pathological parent-child relationships; a conscious effort to gain attention
 - C) a severe form of psychological disability; a normal variant of sexual behavior
 - D) a variation of sexual function; a pathological escape from heterosexuality

Answer: D

Diff: 1 Type: MC Page Ref: 333
Topic: Sociocultural Influences on Sexual Practices and Standards
Skill: Conceptual
Objective:

- 9) One of the reasons the Kinsey report is noteworthy in that it 9) _____
- A) established that homosexuals were psychologically normal.
 - B) led to the immediate removal of homosexuality from the DSM.
 - C) revealed that homosexuality was much more common than expected.
 - D) redefined sexuality.

Answer: C

Diff: 1 Type: MC Page Ref: 334
Topic: Sociocultural Influences on Sexual Practices and Standards
Skill: Factual
Objective:

- 10) The decision by APA to remove homosexuality from the DSM 10) _____
- A) was based on research about the lack of treatment.
 - B) was based on a vote by mental health professionals.
 - C) was based on research and science.
 - D) was later challenged and overturned.

Answer: B

Diff: 1 Type: MC Page Ref: 334

Topic: Sociocultural Influences on Sexual Practices and Standards

Skill: Factual

Objective:

- 11) The current most influential model of the cause of sexual orientation is 11) _____
- A) that homosexual people were exposed to early hormonal influences that were more typical of the opposite gender.
 - B) that homosexual people were reinforced for cross-gender behaviors.
 - C) that homosexual people learned their behaviors through classical conditioning.
 - D) that homosexual people had domineering mothers and absent or withdrawn fathers.

Answer: A

Diff: 1 Type: MC Page Ref: 335

Topic: Sociocultural Influences on Sexual Practices and Standards

Skill: Factual

Objective:

- 12) What is a paraphilia? 12) _____
- A) An impairment in either the desire for sexual gratification or a dysfunction in achieving it.
 - B) An abnormal level of sexual desire and behavior, whether homosexual or heterosexual.
 - C) A recurrent and distressing pattern of excluding all sexual behaviors except for masturbation.
 - D) Persistent sexual behavior patterns in which unusual objects or situations are required for sexual satisfaction.

Answer: D

Diff: 1 Type: MC Page Ref: 335

Topic: Sexual and Gender Variants/The Paraphilias

Skill: Factual

Objective:

- 13) To be diagnosed with a paraphilia, a person 13) _____
- A) must have distress or impairment.
 - B) may not have to have distress or impairment.
 - C) must cause harm to another person.
 - D) must have acted on the sexual fantasies.

Answer: D

Diff: 1 Type: MC Page Ref: 335

Topic: Sexual and Gender Variants/The Paraphilias

Skill: Factual

Objective:

- 14) Julia has a shoe fetish—she is not able to enjoy sex unless her partner is wearing her shoes. She needs to be touching the shoes in order to achieve sexual gratification. She becomes aroused by the sight of her own shoes. What is unique about Julia's case of shoe fetishism? 14) _____
- A) Partners are usually not involved.
 - B) Female fetishists are rare.
 - C) Sexual dysfunction usually is seen in the fetishist.
 - D) Most fetishes involve animate objects.

Answer: B

Diff: 1 Type: MC Page Ref: 336

Topic: Sexual and Gender Variants/The Paraphilias

Skill: Applied

Objective:

- 15) Autogynephilia is _____
- A) inability for males to be aroused by anything except inanimate objects.
 - B) sexual arousal in a male by the thought or fantasy of being a woman.
 - C) sexual arousal in a male exclusively through masturbation.
 - D) sexual arousal in a male by the thought of having their sex organs removed.

Answer: B

Diff: 1 Type: MC Page Ref: 337

Topic: Sexual and Gender Variants/The Paraphilias

Skill: Factual

Objective:

- 16) People with transvestic fetishism _____
- A) include males and females, although more males than females.
 - B) wish to be the opposite gender.
 - C) frequently cause harm to others.
 - D) are usually married.

Answer: D

Diff: 1 Type: MC Page Ref: 337

Topic: Sexual and Gender Variants/The Paraphilias

Skill: Factual

Objective:

- 17) Gary finds himself sexually aroused by dressing in women's clothing. He sometimes steals the clothes from women and from stores. He has a wife and is happy in his marriage. Gary's most likely diagnosis is _____
- A) gender identity disorder.
 - B) transvestic fetishism.
 - C) exhibitionism.
 - D) fetishism.

Answer: B

Diff: 1 Type: MC Page Ref: 337

Topic: Sexual and Gender Variants/The Paraphilias

Skill: Applied

Objective:

- 18) Based on a large survey, which of the following is a common difference found between men who had cross-dressed and those who had not? _____
- A) Men who had cross-dressed had higher rates of sexual abuse occurring before age 10.
 - B) Men who had cross-dressed had fathers who also cross-dressed.
 - C) Men who had cross-dressed had higher rates of psychopathology.
 - D) Men who had cross-dressed had less interest in pornography.

Answer: A

Diff: 2 Type: MC Page Ref: 355

Topic: Sexual and Gender Variants/ The Paraphilias

Skill: Factual

- 19) The most common theory about voyeurs is _____
- A) they become classically conditioned to respond in a stronger way to the female body than most males.
 - B) they were exposed to excess male hormones during prenatal development.
 - C) with the advent of more sexually explicit movies and magazines, voyeurism is quickly becoming extinct.
 - D) they have difficulty related to women and find peeping satisfies needs in a way that feels safe and powerful.

Answer: D

Diff: 2 Type: MC Page Ref: 338

Topic: Sexual and Gender Variants/The Paraphilias

Skill: Conceptual

Objective:

- 20) What is the most common sexual offense reported to the police? 20) _____
 A) frotteurism B) pedophilia C) exhibitionism D) voyeurism
 Answer: C
 Diff: 1 Type: MC Page Ref: 339
 Topic: Sexual and Gender Variants/The Paraphilias
 Skill: Factual
 Objective:
- 21) Exhibitionists 21) _____
 A) rarely have other paraphilias in addition to exhibitionism.
 B) are highly aroused by the shock their victim shows.
 C) don't really care about the victim's response, the act of exposing themselves is what is arousing.
 D) report very few other psychological problems.
 Answer: B
 Diff: 2 Type: MC Page Ref: 357
 Topic: Sexual and Gender Variants/ The Paraphilias
 Objective:
- 22) Serial killers tend to be 22) _____
 A) sexual sadists. B) pedophiles. C) voyeurs. D) masochists.
 Answer: A
 Diff: 1 Type: MC Page Ref: 339
 Topic: Sexual and Gender Variants/The Paraphilias
 Skill: Factual
 Objective:
- 23) Most sadists are 23) _____
 A) heterosexual men. B) homosexual women.
 C) homosexual men. D) heterosexual women.
 Answer: A
 Diff: 1 Type: MC Page Ref: 339
 Topic: Sexual and Gender Variants/The Paraphilias
 Skill: Factual
 Objective:
- 24) The _____ enjoys inflicting pain, while the _____ desires pain and degradation. 24) _____
 A) voyeur; sadist B) masochist; sadist
 C) sadist; voyeur D) sadist; masochist
 Answer: D
 Diff: 1 Type: MC Page Ref: 339-340
 Topic: Sexual and Gender Variants/The Paraphilias
 Skill: Factual
 Objective:
- 25) Which of the following disorders is associated with engaging in autoerotic asphyxia? 25) _____
 A) transvestic fetishism B) frotteurism
 C) scatologia D) masochism
 Answer: D
 Diff: 1 Type: MC Page Ref: 340
 Topic: Sexual and Gender Variants/The Paraphilias
 Skill: Factual
 Objective:
- 26) Which of the following statements is NOT true about paraphilias? 26) _____
 A) Almost all people with paraphilias wish to change their sexual preferences.
 B) Many people with paraphilias have more than one.
 C) Almost all people with paraphilias are male.
 D) Paraphilias typically begin around the time of puberty or adolescence.

Answer: A

Diff: 1 Type: MC Page Ref: 341
Topic: Sexual and Gender Variants/The Paraphilias
Skill: Factual
Objective:

- 27) Money and others have suggested that men are more vulnerable to paraphilias because 27) _____
- A) developing an attachment to an inanimate object is just a reflection of the male tendency to objectify women.
 - B) men are more easily aroused than women.
 - C) sexual arousal in men is more visually based than the sexual arousal of women.
 - D) lasting maternal conflicts leave men unable to develop healthy sexual relationships with women.
- C

Answer:

Diff: 1 Type: MC Page Ref: 341
Topic: Causal Factors and Treatments for Paraphilias
Skill: Factual
Objective:

- 28) Cross-gender identification is characteristic of 28) _____
- A) frotteurism.
 - B) gender identity disorder.
 - C) exhibitionism.
 - D) transvestic fetishism.

Answer: B

Diff: 1 Type: MC Page Ref: 341
Topic: Gender Identity Disorder
Skill: Factual
Objective:

- 29) One's sense of maleness or femaleness is called 29) _____
- A) gender orientation.
 - B) gender role.
 - C) gender identity.
 - D) gender preference.

Answer: C

Diff: 1 Type: MC Page Ref: 341
Topic: Gender Identity Disorder
Skill: Factual
Objective:

- 30) Martin has always felt he was really a girl. He dressed in girl's clothing as a child and still wants to be a girl. He is sure a mistake was made and that he is inhabiting the wrong sexed body. Martin's symptoms suggest a diagnosis of 30) _____
- A) gender dysphoria.
 - B) gender identity disorder.
 - C) homosexuality.
 - D) transvestic fetishism.

Answer: B

Diff: 2 Type: MC Page Ref: 341
Topic: Gender Identity Disorder
Skill: Applied
Objective:

- 31) According to DSM-IV-TR, the two components of gender identity disorder are cross-gender identification and _____ 31) _____
- A) gender dysphoria
 - B) a history of childhood gender identity disorder
 - C) gender role disorder
 - D) transvestic fetishism

Answer: A

Diff: 1 Type: MC Page Ref: 341

Topic: Gender Identity Disorder

Skill: Factual

Objective:

- 32) Patricia, age 10, refuses to wear dresses and insists on being called Pat. She knows she is a girl, but she says boys have it better. She prefers playing with boys and only plays the games they play. She says she wants to be a football player and a mother when she grows up. Pat has 32) _____
- A) no disorder. B) transsexualism.
C) transvestism. D) gender identity disorder.

Answer: A

Diff: 2 Type: MC Page Ref: 342

Topic: Gender Identity Disorder

Skill: Applied

Objective:

- 33) Most boys with gender identity disorder 33) _____
- A) are readily accepted by their peers.
B) become transvestites in adulthood.
C) become homosexual adults who no longer wish to change their gender.
D) become transsexual adults.

Answer: C

Diff: 1 Type: MC Page Ref: 342

Topic: Gender Identity Disorder

Skill: Factual

Objective:

- 34) Most transsexuals 34) _____
- A) are autogynephilic.
B) derive their sexual gratification from cross-dressing in public.
C) are exclusively heterosexual.
D) had gender identity disorder as children.

Answer: D

Diff: 1 Type: MC Page Ref: 342

Topic: Gender Identity Disorder

Skill: Factual

Objective:

- 35) Sam was a child with gender identity disorder. Now he is 26 and he wants to become a woman. Adults with gender identity disorder are often referred to as a 35) _____
- A) transsexual. B) person with autogynephilia.
C) lesbian. D) transvestite.

Answer: A

Diff: 2 Type: MC Page Ref: 342

Topic: Gender Identity Disorder

Skill: Applied

Objective:

- 36) Most female transsexuals 36) _____
- A) have a paraphilia in which they are attracted to themselves as a man.
B) want to be homosexual men.
C) have always felt that they should be male.
D) did not have gender identity disorder as children.

Answer: C

Diff: 1 Type: MC Page Ref: 342

Topic: Gender Identity Disorder

Skill: Factual

Objective:

- 37) A man who is aroused by the thought of himself as a woman has the paraphilia known as _____
A) autogynephilia. B) transsexualism. C) protophilia. D) transvestism.
Answer: A
Diff: 2 Type: MC Page Ref: 343
Topic: Gender Identity Disorder
Skill: Factual
Objective:
- 38) Autogynephilic transsexuals differ from homosexual transsexuals in that _____
A) rarely do they have a history of tranvestic fetishism.
B) they are usually female-to-male transsexuals.
C) they are not especially feminine.
D) they are likely to be homosexual.
Answer: C
Diff: 2 Type: MC Page Ref: 343
Topic: Gender Identity Disorder
Skill: Applied
Objective:
- 39) The only treatment that has been shown to be effective in treating gender dysphoria is _____
A) surgical sex reassignment. B) medication to alter hormone production.
C) aversion therapy. D) long-term psychodynamic therapy.
Answer: A
Diff: 1 Type: MC Page Ref: 343
Topic: Gender Identity Disorder
Skill: Factual
Objective:
- 40) An important determinant of satisfactory outcome from sex reassignment surgery appears to be _____
A) the length of time that individuals live as the gender they wish to become prior to the surgery.
B) whether an individual is a homosexual or autogynephilic transsexual.
C) whether the operation involves a male-to-female or a female-to-male change.
D) the extent to which an individual was psychologically well adjusted before the surgery.
Answer: D
Diff: 1 Type: MC Page Ref: 343
Topic: Gender Identity Disorder
Skill: Factual
Objective:
- 41) Which of the following is an argument against the use of surgical sex reassignment surgery for gender identity disorder? _____
A) Most of those who have such surgeries are not happy with the outcome.
B) Surgery should not be used to treat a psychological disorder.
C) Cognitive-behavioral therapy has been found to be effective for most in alleviating gender dysphoria.
D) Gender identity disorder is not a lifelong disorder and later regret is likely.
Answer: B
Diff: 1 Type: MC Page Ref: 343
Topic: Gender Identity Disorder
Skill: Factual
Objective:
- 42) Which statement below about the prevalence of childhood sexual abuse is accurate? _____
A) Because definitions vary widely, estimates of prevalence vary widely, too.
B) Because of increased media attention, the prevalence has dropped dramatically in recent years.
C) Estimated prevalence rates range from 25 percent to 75 percent.
D) The prevalence of sexual abuse is probably lower than is commonly thought.

Answer: A

Diff: 1 Type: MC Page Ref: 344

Topic: Sexual Abuse/Childhood Sexual Abuse

Skill: Factual

Objective:

- 43) Concern about childhood sexual abuse has increased in the past decade due to 43) _____
- A) the recognition that such abuse may lead to other problems later in life.
 - B) evidence that it is increasing in frequency.
 - C) changes in laws requiring that any suspicion of abuse must be reported to the authorities.
 - D) improved techniques for determining the accuracy of recovered memories.

Answer: A

Diff: 1 Type: MC Page Ref: 344

Topic: Sexual Abuse/Childhood Sexual Abuse

Skill: Factual

Objective:

- 44) Which of the following statements about sexual abuse is TRUE? 44) _____
- A) Most children dissociate during the actual sex act.
 - B) Many children show no symptoms.
 - C) The most common short-term consequences are aggression and other acting-out behaviors.
 - D) It usually does not have lasting consequences.

Answer: B

Diff: 2 Type: MC Page Ref: 344

Topic: Sexual Abuse/Childhood Sexual Abuse

Skill: Factual

Objective:

- 45) Angela is 10 and has been a victim of sexual abuse. The short-term effects 45) _____
- A) will almost certainly produce severe changes in thought, feeling, and behavior.
 - B) generally involve a compensatory sense of control.
 - C) may include fears and sexual inappropriateness, but there is no single response syndrome.
 - D) will include dissociative symptoms.

Answer: C

Diff: 2 Type: MC Page Ref: 344

Topic: Sexual Abuse/Childhood Sexual Abuse

Skill: Applied

Objective:

- 46) The McMartin Preschool case demonstrates how 46) _____
- A) psychotherapy can reveal repressed memories of abuse.
 - B) interviewing style can alter the nature of a child's testimony.
 - C) children will not misreport experiences of sexual abuse because they are such traumatic events.
 - D) public prefers to deny the reality of childhood sexual abuse.

Answer: B

Diff: 2 Type: MC Page Ref: 344-345

Topic: Sexual Abuse/Childhood Sexual Abuse

Skill: Conceptual

Objective:

- 47) One of the most controversial issues in psychology today concerns 47) _____
- A) whether there are any serious long-term consequences of rape and molestation in adult women.
 - B) the validity of recovered (formerly repressed) memories of abuse.
 - C) the validity of women's reports of rape.
 - D) whether there are any serious consequences of childhood sexual abuse.

Answer: B

Diff: 1 Type: MC Page Ref: 346

Topic: Sexual Abuse/Childhood Sexual Abuse

Skill: Conceptual

Objective:

- 48) Research on memory finds that _____
 A) memory is highly accurate.
 B) false memories can be experimentally induced.
 C) children are no more likely than adults to provide inaccurate testimony.
 D) false "recovered memories" only develop under hypnosis.
 Answer: B
 Diff: 2 Type: MC Page Ref: 346
 Topic: Sexual Abuse/Childhood Sexual Abuse
 Skill: Factual
 Objective:
- 49) Pedophilia is defined by _____
 A) the age of the preferred partner.
 B) the bodily maturity of the preferred partner.
 C) the behaviors exhibited.
 D) the legal system; pedophilia is not a diagnostic category on the DSM-IV-TR.
 Answer: B
 Diff: 2 Type: MC Page Ref: 346
 Topic: Sexual Abuse/Pedophilia
 Skill: Factual
 Objective:
- 50) Pedophilia frequently involves _____
 A) sadistic acts. B) fondling. C) adolescents. D) masochism.
 Answer: B
 Diff: 1 Type: MC Page Ref: 346
 Topic: Sexual Abuse/Pedophilia
 Skill: Factual
 Objective:
- 51) It is quite rare for pedophilia to _____
 A) involve sexual penetration or violence.
 B) involve a female pedophile.
 C) include manipulation of the child's genitals.
 D) occur in children between 8 and 11.
 Answer: B
 Diff: 1 Type: MC Page Ref: 346
 Topic: Sexual Abuse/Pedophilia
 Skill: Factual
 Objective:
- 52) Terrance is a pedophile. If his sexual responsiveness is similar to that found in studies of pedophiles, he _____
 will respond to erotic pictures of
 A) male children, but not female adults.
 B) male and female children, but not female adults.
 C) children as well as adults.
 D) female children, but not female adults.
 Answer: C
 Diff: 1 Type: MC Page Ref: 346
 Topic: Sexual Abuse/Pedophilia
 Skill: Applied
 Objective:
- 53) _____ often desire mastery or dominance over their partners, believe that their partners will benefit _____
 from sexual contact, and some tend to idealize their partners for their simplicity and innocence.
 A) Masochists B) Pedophiles C) Voyeurs D) Fetishists

Answer: B

Diff: 2 Type: MC Page Ref: 346

Topic: Sexual Abuse/Pedophilia

Skill: Factual

Objective:

- 54) Which of the following people best illustrates the most common type of pedophile? 54) _____
- A) Ben, who has low self-esteem and fantasizes about being dominated by others in sexual relationships.
 - B) Frank, who is interpersonally unskilled and feels in control when dominating a child.
 - C) Norman, who is gay and but who cannot respond sexually to adult men or women.
 - D) Werner, who is sadistic and enjoys causing pain.

Answer: B

Diff: 1 Type: MC Page Ref: 346

Topic: Sexual Abuse/Pedophilia

Skill: Applied

Objective:

- 55) Studies of neurobiological influences on pedophilia suggest 55) _____
- A) pedophilia is a learned disorder, with hardly any biological component.
 - B) pedophilia is a genetically inherited disorder.
 - C) events that have an early impact on neurodevelopment may cause a vulnerability to pedophilia.
 - D) events that have an impact on the brain that occur in late adolescence/early adulthood may cause a vulnerability to pedophilia.

Answer: C

Diff: 2 Type: MC Page Ref: 366-67

Topic: Sexual Abuse/Pedophilia

Skill: Factual

Objective:

- 56) Incest 56) _____
- A) is an accepted practice in many cultures.
 - B) was once used to protect the royal blood in Egypt.
 - C) commonly occurs in most animal species.
 - D) has only occurred when the parties involved are blood relatives.

Answer: B

Diff: 2 Type: MC Page Ref: 347

Topic: Sexual Abuse/Incest

Skill: Factual

Objective:

- 57) The most common form of incest is between 57) _____
- A) mother and son.
 - B) brother and brother.
 - C) brother and sister.
 - D) father and daughter.

Answer: C

Diff: 2 Type: MC Page Ref: 347

Topic: Sexual Abuse/Incest

Skill: Factual

Objective:

- 58) Which of the following is most likely to be a victim of incest? 58) _____
- A) a stepson
 - B) a daughter
 - C) a stepdaughter
 - D) a son

Answer: C

Diff: 1 Type: MC Page Ref: 347

Topic: Sexual Abuse/Incest

Skill: Factual

Objective:

- 59) Incest offenders differ from extrafamilial child molesters in that the incest offenders 59) _____
- A) don't show arousal to pictures of children.
 - B) typically choose girls as victims.
 - C) typically have more victims.
 - D) are more introverted.

Answer: B

Diff: 2 Type: MC Page Ref: 347

Topic: Sexual Abuse/Incest

Skill: Factual

Objective:

- 60) Statutory rape 60) _____
- A) has only occurred when the rape victim has said "no."
 - B) is sexual activity with a person who is legally defined to be under the age of consent.
 - C) describes sexual activity that occurs under actual or threatened forcible coercion.
 - D) is sexual activity with a person who is under the age of 18.

Answer: B

Diff: 2 Type: MC Page Ref: 347

Topic: Sexual Abuse/Rape

Skill: Factual

Objective:

- 61) What do rape and incest have in common? 61) _____
- A) Both are motivated primarily by aggression.
 - B) There is much debate as to how they are defined.
 - C) Both involve sex with an unwilling partner.
 - D) The accuracy of prevalence estimates is questioned.

Answer: D

Diff: 2 Type: MC Page Ref: 348

Topic: Sexual Abuse/Rape

Skill: Conceptual

Objective:

- 62) Studies of sex offenders 62) _____
- A) find that few rapists are violent.
 - B) support the feminist view of rape.
 - C) suggest that all rapists have both aggressive and sexual motives.
 - D) find that rapists tend to have both Axis I and Axis II disorders.

Answer: C

Diff: 2 Type: MC Page Ref: 348

Topic: Sexual Abuse/Rape

Skill: Conceptual

Objective:

- 63) "Rape trauma syndrome" 63) _____
- A) is more severe when a woman knows her attacker.
 - B) is now called acute stress syndrome.
 - C) only occurs when the rapist is unknown to the victim.
 - D) is now recognized as post-traumatic stress disorder.

Answer: D

Diff: 1 Type: MC Page Ref: 348

Topic: Sexual Abuse/Rape

Skill: Factual

Objective:

- 64) Most rapes 64) _____
A) occur near where the rapist lives. B) occur during the day.
C) involve more than one offender. D) occur on impulse.

Answer: A

Diff: 1 Type: MC Page Ref: 349

Topic: Sexual Abuse/Rape

Skill: Factual

Objective:

- 65) Males who have been raped 65) _____
A) there is no information about males.
B) show less long-term psychological distress than women.
C) show different long-term psychological symptoms than women.
D) show similar long-term psychological distress as women do.
D

Answer:

Diff: 1 Type: MC Page Ref: 349

Topic: Sexual Abuse/Rape

Skill: Factual

Objective:

- 66) "Victim-precipitated rape" 66) _____
A) involves no true victim.
B) is a concept consistent with the view of rape as a sexually motivated act.
C) does not have any lasting psychological impact.
D) is what we commonly refer to as "date rape."

Answer: B

Diff: 2 Type: MC Page Ref: 349

Topic: Sexual Abuse/Rape

Skill: Conceptual

Objective:

- 67) Rape shield laws 67) _____
A) limit the amount of information about the defendant's past crimes that can be used in court.
B) limit the amount of information that can be used in court about the mental health status of the defendant.
C) are no longer used.
D) limit the amount of information about a victim's past sexual history that can be used in court.

Answer: D

Diff: 2 Type: MC Page Ref: 348

Topic: Sexual Abuse/Rape

Skill: Factual

Objective:

- 68) "Victim-precipitated" rape is 68) _____
A) less common today than in previous decades.
B) a concept often used by defense attorneys.
C) an experimentally established phenomenon.
D) more common today than in previous decades.

Answer: B

Diff: 1 Type: MC Page Ref: 348

Topic: Sexual Abuse/Rape

Skill: Conceptual

Objective:

- 69) Ted is a rapist. If he is typical of most convicted rapists, he _____
A) is under 25 and has a prior criminal record.
B) was a close friend or lover of the rape victim.
C) is well-educated, charming, and middle-class.
D) has never committed a crime before.

Answer: A

Diff: 1 Type: MC Page Ref: 349

Topic: Sexual Abuse/Rape

Skill: Applied

Objective:

- 70) The most common personality characteristic of rapists is _____
A) sexual sadism. B) empathy. C) impulsivity. D) extraversion.

Answer: C

Diff: 2 Type: MC Page Ref: 350

Topic: Sexual Abuse/Rape

Skill: Factual

Objective:

- 71) The recidivism rates for rapists _____
A) have been declining since the introduction of mandatory chemical castration.
B) suggest that neither incarceration nor treatment is an effective approach to dealing with this type of crime.
C) decrease steadily with age.
D) are much higher than is suggested by the media.

Answer: C

Diff: 2 Type: MC Page Ref: 350

Topic: Sexual Abuse/Treatment and Recidivism of Sex Offenders

Skill: Factual

Objective:

- 72) Which of the following sex offenders is most likely to reoffend? _____
A) an eighteen-year-old sadist
B) a twenty-year-old convicted of statutory rape
C) a twenty-five-year-old pedophile
D) a thirty-year-old rapist

Answer: C

Diff: 2 Type: MC Page Ref: 350

Topic: Sexual Abuse/Treatment and Recidivism of Sex Offenders

Skill: Applied

Objective:

- 73) Aversion therapy may involve _____
A) continuous masturbation to a paraphilic fantasy.
B) rewarding appropriate sexual responses.
C) repeated expression of aggressive feelings to the point of exhaustion.
D) exposure to a foul odor when becoming sexually aroused to a deviant stimulus.

Answer: D

Diff: 1 Type: MC Page Ref: 350

Topic: Sexual Abuse/Treatment and Recidivism of Sex Offenders

Skill: Factual

Objective:

- 74) Social-skills training is most likely to be used in the treatment of _____
A) sadists. B) rapists. C) exhibitionists. D) pedophiles.

Answer: B

Diff: 1 Type: MC Page Ref: 350
Topic: Sexual Abuse/Treatment and Recidivism of Sex Offenders
Skill: Conceptual
Objective:

- 75) Both surgical and chemical castration 75) _____
A) make recidivism impossible.
B) eliminate inappropriate impulses.
C) involve the administration of antiandrogen steroid hormones.
D) lower testosterone levels.

Answer: D

Diff: 1 Type: MC Page Ref: 351
Topic: Sexual Abuse/Treatment and Recidivism of Sex Offenders
Skill: Factual
Objective:

- 76) What do the drugs lupron and Depo-Provera have in common? 76) _____
A) They are the only drugs proven to increase sexual desire.
B) They are drugs used to modify the feelings and thoughts of transsexuals.
C) They are medications used for men with erectile dysfunction.
D) They are drugs used to chemically castrate sex offenders.

Answer: D

Diff: 1 Type: MC Page Ref: 351
Topic: Sexual Abuse/Treatment and Recidivism of Sex Offenders
Skill: Factual
Objective:

- 77) What is the single greatest flaw in the studies designed to find effective treatments for sex offenders? 77) _____
A) the lack of randomly assigned controls
B) the lack of female subjects
C) the inability to conduct follow-up assessments
D) the variability of the offenses committed

Answer: A

Diff: 1 Type: MC Page Ref: 352
Topic: Sexual Abuse/Treatment and Recidivism of Sex Offenders
Skill: Factual
Objective:

- 78) Sexual dysfunctions 78) _____
A) rarely affect the enjoyment of sex for the two parties in the relationship.
B) involve the impairment of either the desire for sexual gratification or the ability to achieve it.
C) are only diagnosed when the cause is psychological maladjustment.
D) only occur in heterosexual couples.

Answer: B

Diff: 1 Type: MC Page Ref: 352
Topic: Sexual Dysfunctions
Skill: Factual
Objective:

- 79) During which phase of the sexual response is there a characteristic sense of well-being and relaxation? 79) _____
A) desire B) resolution C) excitement D) orgasm

Answer: B

Diff: 1 Type: MC Page Ref: 353
Topic: Sexual Dysfunctions
Skill: Factual
Objective:

- 80) Which of the following statements about hypoactive sexual desire disorder is true? 80) _____
- A) Only women develop hypoactive sexual desire disorder.
 - B) Hypoactive sexual desire disorder usually has no identifiable biological basis.
 - C) Men with hypoactive sexual desire disorder are impotent.
 - D) Hypoactive sexual desire disorder has been studied more than most other sexual dysfunctions.

Answer: B

Diff: 1 Type: MC Page Ref: 353

Topic: Sexual Dysfunctions

Skill: Factual

Objective:

- 81) Newer research suggests the sequence of desire leading to orgasm 81) _____
- A) applies to most people.
 - B) doesn't apply to most people.
 - C) often doesn't apply to women.
 - D) often doesn't apply to men.

Answer: C

Diff: 2 Type: MC Page Ref: 353

Topic: Sexual Dysfunctions

Skill: Factual

Objective:

- 82) The role of anxiety in erectile dysfunction 82) _____
- A) is the main problem.
 - B) has been shown not to exist.
 - C) is not necessarily the problem—it is the cognitions associated with anxiety.
 - D) actually enhances performance.

Answer: C

Diff: 2 Type: MC Page Ref: 355

Topic: Sexual Dysfunctions

Skill: Factual

Objective:

- 83) Which of the following is NOT a possible cause of female sexual arousal disorder? 83) _____
- A) excessive early learning experiences about sex as an "evil"
 - B) lower tactile sensitivity
 - C) frigidity
 - D) early sexual traumatization

Answer: C

Diff: 1 Type: MC Page Ref: 356

Topic: Sexual Dysfunctions

Skill: Factual

Objective:

- 84) Premature ejaculation is 84) _____
- A) very easy to define because most men ejaculate at about the same stage of sexual relations.
 - B) very difficult to define because many things affect time to ejaculation.
 - C) extremely rare.
 - D) caused mainly by biological factors.

Answer: B

Diff: 1 Type: MC Page Ref: 356

Topic: Sexual Dysfunctions

Skill: Factual

Objective:

- 85) The diagnosis of vaginismus is controversial because 85) _____
- A) many researchers don't think it exists.
 - B) if properly diagnosed, a physiological cause, not a psychological one, is always found.
 - C) women who complain of this disorder usually show no problems having intercourse.
 - D) the diagnostic criteria require involuntary spasms while most diagnosticians do not require a physical exam to confirm this.

Answer: D

Diff: 2 Type: MC Page Ref: 378

Topic: Sexual Dysfunctions

Skill: Factual

Objective:

- 86) Dyspareunia 86) _____
- A) is a disorder of inhibited sexual desire.
 - B) is a disorder involving genital pain associated with intercourse.
 - C) is a disorder of inability to achieve orgasm.
 - D) is a disorder that involves involuntary spasms of the muscles of the vagina, preventing intercourse.

Answer: B

Diff: 1 Type: MC Page Ref: 358

Topic: Sexual Dysfunctions

Skill: Factual

Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 87) Freud did not see homosexuality as an illness. 87) _____

Answer: True False

Diff: 2 Type: TF Page Ref: 333

Topic:

Skill:

Objective:

- 88) The debate about whether or not homosexuality is an illness illustrates the role that values play in defining psychopathology. 88) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 333

Topic:

Skill:

Objective:

- 89) Pedophilia is a type of fetish. 89) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 336

Topic:

Skill:

Objective:

- 90) Classical conditioning is a possible cause of a fetish. 90) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 336

Topic:

Skill:

Objective:

- 91) Most transvestites are married. 91) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 337

Topic:

Skill:

Objective:

- 92) Some voyeurs develop their behavior to avoid rejection. 92) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 338
Topic:
Skill:
Objective:
- 93) Exhibitionists often are also voyeurs. 93) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 357
Topic:
Skill:
Objective:
- 94) Sadism, like exhibitionism and voyeurism, is always a criminal offense. 94) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 339
Topic:
Skill:
Objective:
- 95) Serial killers tend to be sexual sadists. 95) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 339
Topic:
Skill:
Objective:
- 96) Cross-gender identification is necessary for a diagnosis of gender identity disorder. 96) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 341
Topic:
Skill:
Objective:
- 97) Most boys with gender identity disorder become transsexual adults. 97) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 342
Topic:
Skill:
Objective:
- 98) Some non-Western cultures are very accepting of children who are gender non-conforming. 98) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 361
Topic:
Skill:
Objective:
- 99) Estimates of the prevalence of childhood sexual abuse vary due to the many definitions of sexual abuse that can be used. 99) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 344
Topic:
Skill:
Objective:

- 100) Children who have been sexually abused exhibit a well-defined sexual abuse syndrome. 100) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 344
Topic:
Skill:
Objective:
- 101) Many pedophiles are motivated by a desire to dominate another person. 101) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 347
Topic:
Skill:
Objective:
- 102) Rape is a crime solely of aggression, not sexual motivation. 102) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 348
Topic:
Skill:
Objective:
- 103) Sexual dysfunctions include fetishism and pedophilia. 103) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 352
Topic:
Skill:
Objective:
- 104) Several sexual dysfunctions can be caused by early learning experiences that sex is "evil" or by childhood sexual abuse. 104) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 353
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

- 105) What was unique about Freud's view of homosexuality? 105) _____
Answer: Freud was ahead of his time in believing that homosexuality was not an illness, despite the fact that this was the position taken by many psychoanalysts. While Freud exhibited this accepting view in a letter written in 1935, it was not until the early 1970's that homosexuality was removed from the DSM.
Diff: 2 Type: SA Page Ref: 333
Topic:
Skill:
Objective:
- 106) Why are almost all people with paraphilias male? 106) _____
Answer: It may be linked to their greater dependence on visual imagery. This makes them more vulnerable to forming sexual associations to nonsexual stimuli through classical and operant conditioning.
Diff: 2 Type: SA Page Ref: 341
Topic:
Skill:
Objective:

- 107) How are gender identity disorder and transvestic fetishism similar and different? 107) _____
Answer: Both involve cross-dressing, but the transvestite does it for sexual pleasure. The transvestite feels he is male and doesn't want to change genders. People with gender identity disorder believe they are the opposite gender and cross-dress to feel more appropriate. They typically wish to change genders.
Diff: 2 Type: SA Page Ref: 336-337, 341-343
Topic:
Skill:
Objective:
- 108) Why is it difficult to estimate the prevalence of incest? 108) _____
Answer: Incest is only identified when some agency becomes aware of its occurrence, such as elements of the legal or welfare systems. Due to the high possibility that incest may go undetected, it is believed that it is much more common than available statistics would suggest.
Diff: 1 Type: SA Page Ref: 347
Topic:
Skill:
Objective:
- 109) How do incest offenders differ from extrafamilial offenders? 109) _____
Answer: They tend to offend against girls, extrafamilial offenders have an equal distribution between the genders. They are more likely to offend with one or a few children in a family and extrafamilial offenders typically have more victims.
Diff: 2 Type: SA Page Ref: 347
Topic:
Skill:
Objective:
- 110) What are some personality characteristics of rapists? 110) _____
Answer: Impulsivity, quick tempers and insensitivity to social cues. They also often show a lack of social and communication skills and don't have intimate relationships. They have trouble understanding cues from women, especially negative ones.
Diff: 2 Type: SA Page Ref: 349-350
Topic:
Skill:
Objective:
- 111) Charles is a chronic sex offender in treatment. After being given electric shocks whenever he became sexually aroused to deviant stimuli, his arousal to those stimuli diminished. What additional forms of treatment is he likely to need in order to be effectively treated? 111) _____
Answer: He will need to develop sexual arousal to acceptable stimuli. Treatment involves imagining appropriate stimuli when he masturbates. Cognitive restructuring is also useful in challenging the distorted thinking in most sex offenders. Social skill training in reading the women's nonverbal cues is also important, especially in the treatment of rapists.
Diff: 2 Type: SA Page Ref: 350-352
Topic:
Skill:
Objective:
- 112) Name and describe the four phases of the human sexual response. 112) _____
Answer: The first phase is the desire phase where one experiences interest in engaging in sexual activity. When sexual activity has begun and both sexual pleasure and physiological changes occur, one is in the excitement phase. During this stage tension builds, which is finally released during the peak of sexual pleasure, the orgasm. Following orgasm, there is the resolution phase in which one experience a sense of calm and well-being. Disorders can occur in any one of the first three phases.

Diff: 2 Type: SA Page Ref: 353

Topic:

Skill:

Objective:

113) What appears to be the most important psychological factor in causing male erectile disorder? 113) _____

Answer: The cognitive distractions that come with anxiety. Men get distracted by negative thoughts about their performance, which inhibits sexual arousal.

Diff: 2 Type: SA Page Ref: 355

Topic:

Skill:

Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

114) Discuss the two main controversies concerning childhood sexual abuse.

Answer: 1. Children's testimony. Several high profile cases suggested that children's testimony about abuse is not always accurate. 2. Recovered memories of abuse. Some believe repressed memories are not valid, others believe they typically are. It does seem that some recovered memories are suspect, as are sometimes non-repressed memories.
GRADING RUBRIC: 8 points total, 4 for each controversy.

Diff: 2 Type: ES Page Ref: 344-346

Topic:

Skill:

Objective:

115) Is rape motivated by sex or aggression? Explain and provide support for your answer.

Answer: The determination of whether rape is motivated by sex or aggression has not been definitively made. While rape is an aggressive act, sexual motivation is also often involved. The fact that rape victims are rarely old and that rapists report sexual motivation as a reason for their actions leads me to conclude that rape is a violent act that is motivated by sex. (sample response - many correct answers possible)

GRADING RUBRIC: 6 points - 2 for taking a position, 4 for supporting it.

Diff: 2 Type: ES Page Ref: 348-349

Topic:

Skill:

Objective:

116) Discuss two ways in which sex offenses are treated. How effective is treatment for these offenses?

Answer: One approach is surgical or chemical castration as a means of reducing the urge for sex and making impulses more manageable. Recidivism rates are much lower for those who have been castrated. In addition the extreme approach of castration, there are numerous other approaches. Aversion therapy is one key component of cognitive-behavioral treatment. Aversive consequences are linked to deviant sexual arousal. In early forms of the treatment electric shocks were used. Now therapists rely on imagined consequences (covert sensitization) or foul odors paired with the images (assisted covert sensitization). Other aspects of treatment include social skills training and the restructuring of cognitive distortions. Maletzky reports that of nearly 1,500 offenders treated with this form of therapy, at least 79 percent reported no covert or overt deviant sexual behavior or repeat charges at one year follow-up.

GRADING RUBRIC: 8 points total, 2 for each of two treatments, and 2 for explaining how effective each is.

Diff: 2 Type: ES Page Ref: 350-352

Topic:

Skill:

Objective:

- 1) B
- 2) B
- 3) C
- 4) C
- 5) A
- 6) B
- 7) D
- 8) D
- 9) C
- 10) B
- 11) A
- 12) D
- 13) D
- 14) B
- 15) B
- 16) D
- 17) B
- 18) A
- 19) D
- 20) C
- 21) B
- 22) A
- 23) A
- 24) D
- 25) D
- 26) A
- 27) C
- 28) B
- 29) C
- 30) B

- 31) A
- 32) A
- 33) C
- 34) D
- 35) A
- 36) C
- 37) A
- 38) C
- 39) A
- 40) D
- 41) B
- 42) A
- 43) A
- 44) B
- 45) C
- 46) B
- 47) B
- 48) B
- 49) B
- 50) B
- 51) B
- 52) C
- 53) B
- 54) B
- 55) C
- 56) B
- 57) C
- 58) C
- 59) B
- 60) B

- 61) D
- 62) C
- 63) D
- 64) A
- 65) D
- 66) B
- 67) D
- 68) B
- 69) A
- 70) C
- 71) C
- 72) C
- 73) D
- 74) B
- 75) D
- 76) D
- 77) A
- 78) B
- 79) B
- 80) B
- 81) C
- 82) C
- 83) C
- 84) B
- 85) D
- 86) B
- 87) TRUE
- 88) TRUE
- 89) FALSE
- 90) TRUE

- 91) TRUE
- 92) TRUE
- 93) TRUE
- 94) FALSE
- 95) TRUE
- 96) TRUE
- 97) FALSE
- 98) TRUE
- 99) TRUE
- 100) FALSE
- 101) TRUE
- 102) FALSE
- 103) FALSE
- 104) TRUE
- 105) Freud was ahead of his time in believing that homosexuality was not an illness, despite the fact that this was the position taken by many psychoanalysts. While Freud exhibited this accepting view in a letter written in 1935, it was not until the early 1970's that homosexuality was removed from the DSM.
- 106) It may be linked to their greater dependence on visual imagery. This makes them more vulnerable to forming sexual associations to nonsexual stimuli through classical and operant conditioning.
- 107) Both involve cross-dressing, but the transvestite does it for sexual pleasure. The transvestite feels he is male and doesn't want to change genders. People with gender identity disorder believe they are the opposite gender and cross-dress to feel more appropriate. They typically wish to change genders.
- 108) Incest is only identified when some agency becomes aware of its occurrence, such as elements of the legal or welfare systems. Due to the high possibility that incest may go undetected, it is believed that it is much more common than available statistics would suggest.
- 109) They tend to offend against girls, extrafamilial offenders have an equal distribution between the genders. They are more likely to offend with one or a few children in a family and extrafamilial offenders typically have more victims.
- 110) Impulsivity, quick tempers and insensitivity to social cues. They also often show a lack of social and communication skills and don't have intimate relationships. They have trouble understanding cues from women, especially negative ones.
- 111) He will need to develop sexual arousal to acceptable stimuli. Treatment involves imagining appropriate stimuli when he masturbates. Cognitive restructuring is also useful in challenging the distorted thinking in most sex offenders. Social skill training in reading the women's nonverbal cues is also important, especially in the treatment of rapists.
- 112) The first phase is the desire phase where one experiences interest in engaging in sexual activity. When sexual activity has begun and both sexual pleasure and physiological changes occur, one is in the excitement phase. During this stage tension builds, which is finally released during the peak of sexual pleasure, the orgasm. Following orgasm, there is the resolution phase in which one experiences a sense of calm and well-being. Disorders can occur in any one of the first three phases.

- 113) The cognitive distractions that come with anxiety. Men get distracted by negative thoughts about their performance, which inhibits sexual arousal.
- 114) 1. Children's testimony. Several high profile cases suggested that children's testimony about abuse is not always accurate. 2. Recovered memories of abuse. Some believe repressed memories are not valid, others believe they typically are. It does seem that some recovered memories are suspect, as are sometimes non-repressed memories.
GRADING RUBRIC: 8 points total, 4 for each controversy.
- 115) The determination of whether rape is motivated by sex or aggression has not been definitively made. While rape is an aggressive act, sexual motivation is also often involved. The fact that rape victims are rarely old and that rapists report sexual motivation as a reason for their actions leads me to conclude that rape is a violent act that is motivated by sex. (sample response - many correct answers possible)
GRADING RUBRIC: 6 points - 2 for taking a position, 4 for supporting it.
- 116) One approach is surgical or chemical castration as a means of reducing the urge for sex and making impulses more manageable. Recidivism rates are much lower for those who have been castrated. In addition the extreme approach of castration, there are numerous other approaches. Aversion therapy is one key component of cognitive-behavioral treatment. Aversive consequences are linked to deviant sexual arousal. In early forms of the treatment electric shocks were used. Now therapists rely on imagined consequences (covert sensitization) or foul odors paired with the images (assisted covert sensitization). Other aspects of treatment include social skills training and the restructuring of cognitive distortions. Maletzky reports that of nearly 1,500 offenders treated with this form of therapy, at least 79 percent reported no covert or overt deviant sexual behavior or repeat charges at one year follow-up.
GRADING RUBRIC: 8 points total, 2 for each of two treatments, and 2 for explaining how effective each is.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Psychosis is a striking and essential feature of schizophrenia. Psychosis means 1) _____
A) a significant loss of contact with reality.
B) a tendency to be unpredictably violent.
C) an inability to know right from wrong.
D) an abrupt shift in personality from one pattern to another.

Answer: A

Diff: 1 Type: MC Page Ref: 363

Topic: Schizophrenia

Skill: Factual

Objective:

- 2) Schizophrenia occurs in about _____ of the general population. 2) _____
A) 1 out of 10 B) 1 out of 10,000 C) 1 out of 100 D) 1 out of 1000

Answer: C

Diff: 1 Type: MC Page Ref: 363

Topic: Schizophrenia/Epidemiology

Skill: Factual

Objective:

- 3) Which of the following people has the highest risk of developing schizophrenia? 3) _____
A) a person whose father was over 50 when he/she was born
B) a person who came from New Guinea
C) someone who was physically abused as a child
D) someone who has a history of depression

Answer: A

Diff: 2 Type: MC Page Ref: 363

Topic: Schizophrenia/Epidemiology

Skill: Applied

Objective:

- 4) The majority of cases of schizophrenia begin in 4) _____
A) late adulthood or old age.
B) there is no age where the majority of cases begin.
C) late adolescence or early adulthood.
D) late childhood or early adolescence.

Answer: C

Diff: 1 Type: MC Page Ref: 363

Topic: Schizophrenia/Epidemiology

Skill: Factual

Objective:

- 5) Which of the following accounts for the belief that schizophrenia is becoming more common in males than 5) _____
females?
A) Males are more likely to hallucinate than females so may be overdiagnosed.
B) Men are more likely to seek treatment.
C) Women respond better to treatment than men.
D) Females with schizophrenia have less severe symptoms so may be misdiagnosed.

Answer: D

Diff: 2 Type: MC Page Ref: 364

Topic: Schizophrenia/Epidemiology

Skill: Conceptual

Objective:

- 6) The term "dementia precoce" is inconsistent with the 6) _____
A) lack of brain damage that characterizes the brain of most schizophrenics.
B) effectiveness of psychological treatments for schizophrenia.
C) discovery of a late onset form of schizophrenia.
D) transient nature of most schizophrenias.

Answer: C

Diff: 1 Type: MC Page Ref: 364

Topic: Origins of the Schizophrenia Construct

Skill: Conceptual

Objective:

- 7) One problem with Kraepelin's use of the term "dementia praecox" is that 7) _____
A) it assumed that progressive deterioration of the brain is a universal feature of the disorder.
B) it assumed that what we call schizophrenia only occurred in elderly patients.
C) it assumed the intellectual functioning of patients remained constant even as their bodies aged.
D) it was actually describing Alzheimer's dementia, not schizophrenia.

Answer: A

Diff: 1 Type: MC Page Ref: 364

Topic: Origins of the Schizophrenia Construct

Skill: Factual

Objective:

- 8) When Bleuler coined the term "schizophrenia" the kind of split he believed was central to the disorder was 8) _____
A) an inability to make an intimate connection with other people.
B) a divergence between the person's chronological age and their intellectual performance.
C) a break with reality.
D) a division of personality within the person.

Answer: C

Diff: 1 Type: MC Page Ref: 364

Topic: Origins of the Schizophrenia Construct

Skill: Factual

Objective:

- 9) Kraepelin used the term "praecox" to convey that schizophrenia typically develops early in life. The actual 9) _____
age of onset of the condition
A) typically is during the mid-forties.
B) typically is during the mid-twenties.
C) typically is during the early teenage years.
D) typically is during the mid-thirties.

Answer: B

Diff: 1 Type: MC Page Ref: 364

Topic: Origins of the Schizophrenia Construct

Skill: Conceptual

Objective:

- 10) Joe has a delusional belief. When people argue with him 10) _____
A) he only admits he is wrong after being shown more proof than most people would need.
B) he doesn't admit he is wrong to other people, but he admits it to himself.
C) he doesn't admit he could be wrong, no matter what proof he is shown.
D) he admits he could be wrong.

Answer: C

Diff: 2 Type: MC Page Ref: 365

Topic: Schizophrenia/The Clinical Picture

Skill: Applied

Objective:

- 11) Delusions are 11) _____
- A) disturbances in the content of thought.
 - B) perceptions with no basis in reality.
 - C) necessary for a diagnosis of schizophrenia.
 - D) only seen in schizophrenia.
- Answer: A
Diff: 1 Type: MC Page Ref: 365
Topic: Schizophrenia/The Clinical Picture
Skill: Factual
Objective:
- 12) Which of the following is an example of a delusion? 12) _____
- A) The voices in Jaimie's head told him not to trust the priest.
 - B) Bob thought the CIA was controlling his thoughts.
 - C) Tracy did not think she could get pregnant the first time she had sex.
 - D) Carla saw and felt bugs crawling up her arm.
- Answer: B
Diff: 1 Type: MC Page Ref: 365
Topic: Schizophrenia/The Clinical Picture
Skill: Applied
Objective:
- 13) Sterling believes that the TV special that was on last night was shown to tell her that she should break up with her boyfriend. She is absolutely certain this is true and plans to do it. This type of belief is an example of a 13) _____
- A) thought insertion delusion.
 - B) delusion of reference.
 - C) thought broadcasting delusion.
 - D) made feelings delusion.
- Answer: B
Diff: 2 Type: MC Page Ref: 365
Topic: Schizophrenia/The Clinical Picture
Skill: Applied
Objective:
- 14) How common are delusions in schizophrenia? 14) _____
- A) They are experienced by approximately 50% of schizophrenics.
 - B) While hallucinations are a common occurrence in schizophrenia, delusions are rare.
 - C) Over 90% of those with schizophrenia experience delusions.
 - D) Delusions are an essential feature of schizophrenia; the presence of delusions is required for a diagnosis of schizophrenia.
- Answer: C
Diff: 1 Type: MC Page Ref: 365
Topic: Schizophrenia/The Clinical Picture
Skill: Factual
Objective:
- 15) Hallucinations are 15) _____
- A) sensory experiences with no basis in reality.
 - B) only seen in schizophrenia.
 - C) disturbances in the content of thought.
 - D) necessary for a diagnosis of schizophrenia.
- Answer: A
Diff: 1 Type: MC Page Ref: 365
Topic: Schizophrenia/The Clinical Picture
Skill: Factual
Objective:

- 16) Which of the following is an example of the most common type of hallucination seen in schizophrenia? 16) _____
- A) Sondra tried to ignore the voices in her head.
 - B) Rachel would frequently see her husband, even though he had been dead for several years.
 - C) Bill was convinced that his mother was inserting evil thoughts into his mind.
 - D) Ned believed he was Elvis.

Answer: A

Diff: 2 Type: MC Page Ref: 366

Topic: Schizophrenia/The Clinical Picture

Skill: Applied

Objective:

- 17) What type of hallucinations are the most common? 17) _____
- A) gustatory
 - B) visual
 - C) tactile
 - D) auditory

Answer: D

Diff: 1 Type: MC Page Ref: 366

Topic: Schizophrenia/The Clinical Picture

Skill: Factual

Objective:

- 18) Neuroimaging studies of hallucinating patients suggest that auditory hallucinations 18) _____
- A) may reflect a cognitive error.
 - B) are actually heard.
 - C) activate the brain areas involved in speech comprehension.
 - D) are usually drug induced.

Answer: A

Diff: 2 Type: MC Page Ref: 366

Topic: Schizophrenia/The Clinical Picture

Skill: Conceptual

Objective:

- 19) People with schizophrenia may have difficulty with the FORM of thought—in other words, their thoughts do 19) _____ not make sense. The observable sign of this is
- A) a hallucination.
 - B) disorganized behavior.
 - C) disorganized speech.
 - D) a delusion.

Answer: C

Diff: 2 Type: MC Page Ref: 366

Topic: Schizophrenia/The Clinical Picture

Skill: Applied

Objective:

- 20) "My father and I swiggered to the beach yesterday." This is an example of a 20) _____
- A) negative symptom.
 - B) auditory hallucination.
 - C) delusion.
 - D) neologism.

Answer: D

Diff: 2 Type: MC Page Ref: 366

Topic: Schizophrenia/The Clinical Picture

Skill: Applied

Objective:

- 21) Which of the following is an example of a negative symptom of schizophrenia? 21) _____
- A) Karen no longer socialized with her friends.
 - B) Julia heard voices that told her she was evil.
 - C) Georgia's speech sounded normal, but made no sense.
 - D) Ellen suspected that her husband had poisoned her food.

Answer: A

Diff: 1 Type: MC Page Ref: 367

Topic: Schizophrenia/The Clinical Picture

Skill: Applied

Objective:

- 22) Which of the following is an example of a negative symptom? 22) _____
- A) emotional turmoil
 - B) delusions
 - C) emotional unresponsiveness
 - D) hallucinations

Answer: C

Diff: 1 Type: MC Page Ref: 367

Topic: Schizophrenia/The Clinical Picture

Skill: Conceptual

Objective:

- 23) Negative symptoms 23) _____
- A) are a common side effect of antipsychotic medications.
 - B) are those that are harmful.
 - C) are characterized an absence or deficit of normal behaviors.
 - D) are more disturbing to the patient than positive symptoms.

Answer: C

Diff: 1 Type: MC Page Ref: 367

Topic: Schizophrenia/The Clinical Picture

Skill: Factual

Objective:

- 24) Over the course of the disorder, most individuals with schizophrenia 24) _____
- A) show either positive-syndrome or negative-syndrome types.
 - B) show the Type II form exclusively.
 - C) display a mix of positive and negative symptoms.
 - D) develop the "disorganized" form of the disorder.

Answer: C

Diff: 1 Type: MC Page Ref: 367

Topic: Schizophrenia/The Clinical Picture

Skill: Factual

Objective:

- 25) Which of the following is most likely seen in an individual with paranoid schizophrenia? 25) _____
- A) They show more significant cognitive impairments than are seen in the other subtypes.
 - B) They exhibit primarily negative symptoms.
 - C) They respond poorly to treatment.
 - D) They have delusions of grandeur.

Answer: D

Diff: 1 Type: MC Page Ref: 368

Topic: Schizophrenia/Subtypes/Paranoid

Skill: Factual

Objective:

- 26) Which of the following people with schizophrenia is likely to have the best prognosis? 26) _____
- A) the woman who believes she is being persecuted because she is Helen of Troy
 - B) the mother of three who first showed signs of schizophrenia in her teens and now is unable to care for herself or her children
 - C) the teen who has been in a catatonic state for several days
 - D) the man who shows little emotion, thinks the CIA is controlling his thoughts, and who makes no sense when he speaks

Answer: A

Diff: 2 Type: MC Page Ref: 368

Topic: Schizophrenia/Subtypes/Paranoid

Skill: Applied

Objective:

- 27) Disorganized schizophrenia 27) _____
- A) usually develops in late adulthood.
 - B) responds well to treatment.
 - C) was once called hebephrenic schizophrenia.
 - D) is most commonly seen in women.

Answer: C

Diff: 1 Type: MC Page Ref: 369

Topic: Schizophrenia/Subtypes/Disorganized

Skill: Factual

Objective:

- 28) Which of the following suggests a diagnosis of disorganized schizophrenia? 28) _____
- A) Peter appears to feel no emotion and tends to make odd facial expressions and movements.
 - B) Dillon rarely sits still, but will respond to any direction he is given.
 - C) Kyle constantly is asking for a doctor as he is convinced that his stomach is going to explode.
 - D) Trista fears for her life because the pictures on the wall have told her that she is not safe.

Answer: A

Diff: 2 Type: MC Page Ref: 369

Topic: Schizophrenia/Subtypes/Disorganized

Skill: Applied

Objective:

- 29) Which schizophrenic subtype usually has the earliest onset, the greatest indifference to reality, and the worst prognosis? 29) _____
- A) catatonic
 - B) disorganized
 - C) undifferentiated
 - D) paranoid

Answer: B

Diff: 1 Type: MC Page Ref: 369

Topic: Schizophrenia/Subtypes/Disorganized

Skill: Factual

Objective:

- 30) Moira is schizophrenic. She giggles a lot, acts silly, and talks "baby talk." She experiences frequent auditory hallucinations and bizarre delusions. Moira most likely belongs to the _____ subtype of schizophrenia. 30) _____
- A) undifferentiated
 - B) residual
 - C) catatonic
 - D) disorganized

Answer: D

Diff: 1 Type: MC Page Ref: 369

Topic: Schizophrenia/Subtypes/Disorganized

Skill: Applied

Objective:

- 31) Patients in a catatonic stupor 31) _____
- A) experience overwhelming hallucinations.
 - B) resist efforts to change their position.
 - C) exhibit both echopraxia and echolalia.
 - D) are highly suggestible.

Answer: B

Diff: 2 Type: MC Page Ref: 369

Topic: Schizophrenia/Subtypes/Catatonic

Skill: Factual

Objective:

- 32) It has been suggested that the catatonic patient's immobility 32) _____
A) is a consequence of the patient's inability to ignore irrelevant stimuli.
B) reflects a lack of willingness to comply with therapist demands.
C) results from the dopamine dysfunction known to underlie this disorder.
D) provides the patient with the calm and relaxed atmosphere they need in order to get well.

Answer: A

Diff: 1 Type: MC Page Ref: 369

Topic: Schizophrenia/Subtypes/Catatonic

Skill: Conceptual

Objective:

- 33) The central feature of catatonic schizophrenia is 33) _____
A) illogical or absurd delusions.
B) excited or stuporous motor symptoms.
C) an extreme stressor precipitating the symptoms.
D) blunted or inappropriate affect.

Answer: B

Diff: 1 Type: MC Page Ref: 369

Topic: Schizophrenia/Subtypes/Catatonic

Skill: Factual

Objective:

- 34) DeJuan is highly suggestible and automatically obeys the commands of his brother. He sometimes stands 34) _____
in the same strange posture for hours despite his hands and feet becoming swollen due to immobility.
Which subtype of schizophrenia does this best illustrate?
A) disorganized B) undifferentiated
C) catatonic D) positive-symptom

Answer: C

Diff: 1 Type: MC Page Ref: 369

Topic: Schizophrenia/Subtypes/Catatonic

Skill: Applied

Objective:

- 35) Which of the following best describes the person with undifferentiated schizophrenia? 35) _____
A) Lincoln, whose schizophrenia involves a chronic pattern of wild excitement followed by muteness and immobility.
B) Jake, who shows bizarre behavior, delusions, and disordered speech but has normal emotions.
C) Constance, whose speech is incoherent and filled with invented words, but whose emotions are inconsistent and inappropriate for the situation.
D) Pauline, who is convinced that her husband is poisoning her food and can hear voices (which others cannot hear) calling her a liar and a thief.

Answer: B

Diff: 2 Type: MC Page Ref: 370

Topic: Schizophrenia/Subtypes/Undifferentiated

Skill: Applied

Objective:

- 36) After her last episode of schizophrenia, Jill continued to behave a bit eccentrically and she showed little 36) _____
emotion. Which of the following diagnoses should she be given?
A) residual schizophrenia B) residual schizophreniform disorder
C) schizophreniform disorder D) schizoaffective disorder

Answer: A

Diff: 1 Type: MC Page Ref: 370

Topic: Schizophrenia/Subtypes/Residual

Skill: Applied

Objective:

- 37) There is some debate as to whether _____ is a variant of schizophrenia or a form of mood disorder. 37) _____
 A) residual type B) schizophreniform disorder
 C) schizoaffective disorder D) undifferentiated type
 Answer: C
 Diff: 1 Type: MC Page Ref: 370
 Topic: Schizophrenia/Subtypes/Other Psychotic Disorders
 Skill: Factual
 Objective:
- 38) Julia clearly had psychotic symptoms. As she also showed symptoms of bipolar disorder, she was 38) _____
 ultimately diagnosed with
 A) schizophreniform disorder. B) undifferentiated type.
 C) schizoaffective disorder. D) residual type.
 Answer: C
 Diff: 1 Type: MC Page Ref: 370
 Topic: Schizophrenia/Subtypes/Other Psychotic Disorders
 Skill: Applied
 Objective:
- 39) Virginia exhibits a variety of schizophrenic symptoms including delusions, auditory hallucinations, and 39) _____
 formal thought disorder. She has been symptomatic for about a month. Virginia qualifies for a diagnosis of
 A) schizophreniform disorder. B) schizoaffective disorder, manic type.
 C) paranoid schizophrenia. D) undifferentiated schizophrenia.
 Answer: A
 Diff: 1 Type: MC Page Ref: 370
 Topic: Schizophrenia/Subtypes/Other Psychotic Disorders
 Skill: Applied
 Objective:
- 40) Which of the following could be described as "short-term" schizophrenia? 40) _____
 A) delusional disorder B) undifferentiated schizophrenia
 C) schizoaffective disorder D) schizophreniform disorder
 Answer: D
 Diff: 1 Type: MC Page Ref: 370
 Topic: Schizophrenia/Subtypes/Other Psychotic Disorders
 Skill: Conceptual
 Objective:
- 41) The individual diagnosed with schizophreniform disorder 41) _____
 A) experiences a schizophrenia-like psychosis that lasts for less than a month.
 B) has a mild case of schizophrenia combined with signs of a mood disorder.
 C) usually exhibits symptoms of schizophrenia that would fit only undifferentiated type.
 D) is likely to take actions based on their delusions.
 Answer: C
 Diff: 1 Type: MC Page Ref: 370
 Topic: Schizophrenia/Subtypes/Other Psychotic Disorders
 Skill: Conceptual
 Objective:
- 42) Harold and Tanya both have a wide range of schizophrenic symptoms that came on rather suddenly. 42) _____
 Harold's symptoms have lasted for eight months; Tanya's have lasted only eight weeks. According to the
 DSM-IV their diagnoses should be
 A) schizophreniform disorder for Harold; brief psychotic disorder for Tanya.
 B) undifferentiated schizophrenia for Harold; schizophreniform disorder for Tanya.
 C) schizoaffective disorder for Harold; schizophreniform disorder for Tanya.
 D) disorganized schizophrenia for Harold; undifferentiated schizophrenia for Tanya.

Answer: B

Diff: 2 Type: MC Page Ref: 370
Topic: Schizophrenia/Subtypes/Other Psychotic Disorders
Skill: Applied
Objective:

- 43) What is the major difference between a diagnosis of undifferentiated schizophrenia and schizophreniform disorder? 43) _____
- A) the duration of symptoms
 - B) the presence of delusions and hallucinations
 - C) the age of the person when they develop the disorder
 - D) the degree of emotional instability and disconnection from other people

Answer: A

Diff: 1 Type: MC Page Ref: 370
Topic: Schizophrenia/Subtypes/Other Psychotic Disorders
Skill: Conceptual
Objective:

- 44) Individuals with delusional disorder differ from those with schizophrenia in that 44) _____
- A) their delusions are not well-formed.
 - B) they behave relatively normally.
 - C) they know their delusions are delusions.
 - D) they rarely act on their delusions.

Answer: B

Diff: 1 Type: MC Page Ref: 370-371
Topic: Schizophrenia/Subtypes/Other Psychotic Disorders
Skill: Factual
Objective:

- 45) Which of the following statements most clearly summarizes our understanding of schizophrenia? 45) _____
- A) The role of genes in schizophrenia is well-established.
 - B) Schizophrenia is one of the few psychological disorders that is most effectively treated with medication.
 - C) While much is known about the causes of schizophrenia, there are many questions still to be answered.
 - D) The relative influence of nature and nurture has been established.

Answer: C

Diff: 1 Type: MC Page Ref: 372
Topic: Schizophrenia/Causes
Skill: Conceptual
Objective:

- 46) Most of the evidence suggests that, if schizophrenia is inherited, it 46) _____
- A) involves one or two genes.
 - B) is due to an abnormality on Chromosome 21.
 - C) is a sex-linked, recessive condition.
 - D) involves a multitude of genes that work in concert.

Answer: D

Diff: 1 Type: MC Page Ref: 372
Topic: Schizophrenia/Causes/Genetic Aspects
Skill: Factual
Objective:

- 47) In genetic studies, a "proband" or "index case" is someone who 47) _____
- A) shows signs of the disorder of interest.
 - B) is related to someone with the disorder of interest.
 - C) has the disorder of interest.
 - D) shares at least 25% of their genes with an affected subject.

Answer: C

Diff: 1 Type: MC Page Ref: 372

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Factual

Objective:

- 48) Both of Mary's parents have been diagnosed with schizophrenia. Bob has an identical twin who has schizophrenia. Who is more likely to develop schizophrenia and why? 48) _____
- A) Bob because he has inherited the same susceptibility that his twin is expressing.
 - B) Mary because females are more susceptible than males to the genetic forms of schizophrenia.
 - C) Mary because all of her genes come from her parents and they both have the disease.
 - D) Bob because he is male and has a family history of schizophrenia.

Answer: A

Diff: 1 Type: MC Page Ref: 372

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Applied

Objective:

- 49) "Familial" does not mean the same thing as "genetic" because 49) _____
- A) families share both genes and the environment.
 - B) families don't always share genes.
 - C) the strength of the correlations seen in familial concordance patterns does not allow any conclusions to be made.
 - D) genes are not expressed in every generation.

Answer: A

Diff: 1 Type: MC Page Ref: 372

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Factual

Objective:

- 50) Studies of family concordance patterns for schizophrenia have found 50) _____
- A) such strong correspondence between gene-sharing and diagnosis that environmental factors have been ruled out.
 - B) little evidence of increased concordance with increased gene-sharing.
 - C) that the more genetically related you are to someone with schizophrenia, the greater your risk of the disorder.
 - D) strong correspondence between gene-sharing and diagnosis but only for males.

Answer: C

Diff: 1 Type: MC Page Ref: 372

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Factual

Objective:

- 51) Lori just found out that she is pregnant. Her husband's fraternal twin has schizophrenia. What is her unborn child's risk of developing schizophrenia? 51) _____
- A) 48% B) 2% C) 16% D) 1%

Answer: B

Diff: 1 Type: MC Page Ref: 373

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Applied

Objective:

- 52) If schizophrenia were exclusively a genetic disorder, 52) _____
- A) numerous cures would now be available.
 - B) marrying a schizophrenic would not increase the likelihood of developing schizophrenia.
 - C) the concordance rate for dizygotic twins would be 100%.
 - D) anyone with schizophrenia in their family history would develop schizophrenia.

Answer: C

Diff: 1 Type: MC Page Ref: 373

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Conceptual

Objective:

- 53) Studies of the offspring of nonschizophrenic co-twins from discordant twin pairs suggest that 53) _____
- A) genetic factors cause schizophrenia, while environmental factors are essentially unimportant.
 - B) the heritability of schizophrenia involves the transmission of a single dominant gene.
 - C) a genetic predisposition to schizophrenia may remain unexpressed in some individuals unless it is released by some unknown environmental factors.
 - D) environmental factors play a more important role than genetic factors in the origin of schizophrenia.

Answer: C

Diff: 1 Type: MC Page Ref: 373

Topic: Schizophrenia/Causes/A Neurodevelopmental Perspective

Skill: Conceptual

Objective:

- 54) Adoption studies are typically used 54) _____
- A) to separate the effects of nature and nurture.
 - B) to establish the primary role that the environment plays in most disorders.
 - C) in order to isolate the environmental factors that "trigger" a disorder.
 - D) to assess the effectiveness of long-term treatment protocols.

Answer: A

Diff: 1 Type: MC Page Ref: 373

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Factual

Objective:

- 55) The Danish adoption studies have been criticized for 55) _____
- A) only studying males.
 - B) not confirming the family history of the subjects.
 - C) not treating the subjects found to have schizophrenia.
 - D) not assessing the child-rearing environments of the index and control groups.

Answer: D

Diff: 1 Type: MC Page Ref: 376

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Factual

Objective:

- 56) When adoption studies of schizophrenia contain all the necessary controls and measurements 56) _____
- A) no significant effects are seen.
 - B) index subjects are more likely to develop schizophrenia than the control subjects.
 - C) the role of genes is found to be negligible.
 - D) the environment is found to be a more important determinant of psychological health than family history.

Answer: B

Diff: 1 Type: MC Page Ref: 376

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Factual

Objective:

- 57) Communication deviance 57) _____
- A) may be an environmental risk factor for the development of schizophrenia.
 - B) is an early indication of schizophrenia.
 - C) and disordered speech are the same thing.
 - D) is not seen in control adoptees.

Answer: A

Diff: 1 Type: MC Page Ref: 376

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Conceptual

Objective:

58) Studies of adopted children who were at high-risk for developing schizophrenia found that which of the following appeared to increase the likelihood that these children would show high levels of thought disorders? 58) _____

- A) vague, confusing, and unclear communication
- B) divorce
- C) permissive parenting
- D) physical abuse

Answer: A

Diff: 1 Type: MC Page Ref: 376

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Conceptual

Objective:

59) Adopted children who were high risk for schizophrenia, who were raised in healthy families 59) _____

- A) showed lower risk for schizophrenia than those adopted into dysfunctional families. A good environment may protect people with genetic vulnerabilities from developing schizophrenia.
- B) showed the same risk for schizophrenia as those adopted into dysfunctional families. ĀGenes were the most important factor.
- C) showed higher risk for schizophrenia than those adopted into dysfunctional families. ĀThey had trouble fitting in with the family.
- D) showed lower risk for schizophrenia than those adopted into dysfunctional families.ĀThe environment causes people to develop schizophrenia, not genes.

Answer: A

Diff: 2 Type: MC Page Ref: 376

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Conceptual

Objective:

60) Linkage analysis 60) _____

- A) is being used to show problems in connections between neurons.
- B) is being used to find the connections between stress and schizophrenia.
- C) is being used to identify family risk factors.
- D) is being used to help locate genes associated with schizophrenia.

Answer: D

Diff: 2 Type: MC Page Ref: 377

Topic: Schizophrenia/Causes/Genetic Aspects

Skill: Factual

Objective:

61) Which of the following is a plausible explanation for how maternal influenza might lead to schizophrenia later in life? 61) _____

- A) The flu virus frequently has long-term effects on the behavior of affected individuals; maternal infection with influenza may result in an environment that is likely to trigger schizophrenia in the susceptible individual.
- B) Maternal antibodies could cross the placenta and interfere with brain development such that the risk of developing schizophrenia is enhanced later in life.
- C) The flu exposure may alter the fetal genes such that a susceptibility to schizophrenia is now part of the child's genetic makeup.
- D) The flu virus may lay dormant in the brain until adolescence when it becomes active and initiates the degeneration that results in the symptoms of schizophrenia.

Answer: B

Diff: 2 Type: MC Page Ref: 377
Topic: Schizophrenia/Causes/Prenatal Exposures
Skill: Conceptual
Objective:

- 62) The finding that prenatal viral exposure, rhesus incompatibility, and early nutritional deficiency are associated with an increased risk of developing schizophrenia indicates that 62) _____
- A) anything that interferes with normal brain development might lead to a greater risk of schizophrenia.
 - B) the results of twin studies reflect the impact of a shared prenatal environment, not shared genes.
 - C) environmental factors are more important than genetic factors when it comes to determining who is likely to develop schizophrenia.
 - D) genes do not play a role in vulnerability to schizophrenia.

Answer: A

Diff: 2 Type: MC Page Ref: 377-378
Topic: Schizophrenia/Causes/Prenatal Exposures
Skill: Conceptual
Objective:

- 63) All of the following have been found to lead to an increased risk of developing schizophrenia EXCEPT 63) _____
- A) Rh incompatibility.
 - B) prenatal alcohol exposure.
 - C) birth complications.
 - D) prenatal influenza exposure.

Answer: B

Diff: 1 Type: MC Page Ref: 377-378
Topic: Schizophrenia/Causes/Prenatal Exposures
Skill: Factual
Objective:

- 64) Schizophrenia is best described as a 64) _____
- A) genetically influenced polygenic disorder.
 - B) genetically determined monogenic disorder.
 - C) genetically determined polygenic disorder.
 - D) genetically influenced monogenic disorder.

Answer: A

Diff: 1 Type: MC Page Ref: 378
Topic: Schizophrenia/Causes/Genes and Environment
Skill: Factual
Objective:

- 65) Based on current research, which statement is most justified? 65) _____
- A) Genetics increase a person's vulnerability to develop schizophrenia.
 - B) Genetics may not be sufficient for schizophrenia, but everyone who develops schizophrenia must have some number of "schizophrenia genes."
 - C) Genetics cannot play a significant role in the cause of schizophrenia because most people with the disorder have no close relatives who have it.
 - D) Genetics play such a strong role that they are a sufficient condition for schizophrenia.

Answer: A

Diff: 1 Type: MC Page Ref: 378
Topic: Schizophrenia/Causes/A Neurodevelopmental Perspective
Skill: Conceptual
Objective:

- 66) Compared to his nonschizophrenic identical twin, Matthew (who is schizophrenic) is more likely to 66) _____
- A) be artistically or musically talented.
 - B) have been born with physical birth defects.
 - C) have a higher intelligence level on IQ tests.
 - D) have been considered "different" or "odd" in childhood.

Answer: D

Diff: 1 Type: MC

Page Ref: 379

Topic: Schizophrenia/Causes/A Neurodevelopmental Perspective

Skill: Applied

Objective:

- 67) What is the value of research that monitors children at high risk for schizophrenia for a long time? 67) _____
- A) It can separate the impact of genetics from that of subtle neurological impairment.
 - B) It can identify the factors that improve treatment outcome.
 - C) It can identify the specific genes responsible for the disorder.
 - D) It can identify environmental factors that precede breakdown.

Answer: D

Diff: 1 Type: MC

Page Ref: 379

Topic: Schizophrenia/Causes/A Neurodevelopmental Perspective

Skill: Conceptual

Objective:

- 68) Based on developmental studies of children who later developed schizophrenia 68) _____
- A) the first signs are usually seen in speech problems.
 - B) the first signs are usually delusions or hallucinations.
 - C) the first signs are usually seen in the way children move.
 - D) it is usually impossible to detect early signs of the disorder.

Answer: C

Diff: 2 Type: MC

Page Ref: 379

Topic: Schizophrenia/Causes/A Neurodevelopmental Perspective

Skill: Factual

Objective:

- 69) What are endophenotypes? 69) _____
- A) abnormally shaped cells in the brain
 - B) neurotransmitters that are slightly different in chemical composition than normal
 - C) specific chromosomes that are thought to be important in the genetic transmission of schizophrenia
 - D) measurable traits that are thought to be linked to specific genes that might be important in schizophrenia

Answer: D

Diff: 2 Type: MC

Page Ref: 380

Topic: Schizophrenia/Causes/A Neurodevelopmental Perspective

Skill: Factual

Objective:

- 70) Which of the following has been found to be connected with schizophrenia? 70) _____
- A) Abnormal thinking in childhood.
 - B) An incredible ability to focus intense attention on anything they did as a child.
 - C) Movement abnormalities in childhood and adolescence.
 - D) Extreme extroversion and interest in other people.

Answer: C

Diff: 2 Type: MC

Page Ref: 399

Topic: Schizophrenia/Causes/ A Neurodevelopmental Perspective

Skill: Factual

Objective:

- 71) Enlarged brain ventricles 71) _____
- A) are seen in all schizophrenics.
 - B) suggest that there has been a loss of brain tissue.
 - C) can be used to confirm a diagnosis of schizophreniform disorder.
 - D) are more commonly seen in the brains of paranoid schizophrenics.

Answer: B

Diff: 1 Type: MC Page Ref: 380
Topic: Schizophrenia/Causes/Biological Aspects
Skill: Factual
Objective:

- 72) Enlarged brain ventricles seen in people with schizophrenia 72) _____
A) are rare.
B) are seen in childhood but have typically disappeared by adulthood.
C) are most likely due to medication.
D) continue to enlarge for many years.

Answer: D

Diff: 2 Type: MC Page Ref: 401
Topic: Schizophrenia/Causes/Biological Factors
Skill: Factual
Objective:

- 73) Why might Kraepelin's idea that schizophrenia was similar to dementia not be as far from the truth as 73) _____
previously thought?
A) On autopsy, people with schizophrenia show the same smoothing of the brain as is seen in people
with dementia.
B) Evidence suggests that there sometimes are progressive changes in brain volume over time in people
with schizophrenia.
C) The same biological treatments work for both disorders.
D) The symptoms of the two disorders overlap tremendously.

Answer: B

Diff: 2 Type: MC Page Ref: 381
Topic: Schizophrenia/Causes/Biological Aspects
Skill: Conceptual
Objective:

- 74) Which of the following is a brain area that has been shown to be involved in schizophrenia? 74) _____
A) occipital lobe B) hippocampus C) parietal lobe D) hypothalamus

Answer: B

Diff: 1 Type: MC Page Ref: 381
Topic: Schizophrenia/Causes/Biological Aspects
Skill: Factual
Objective:

- 75) Ursula has been diagnosed with schizophrenia. If PET scans were done to measure her brain's activity, 75) _____
which area would probably be underactive?
A) the hypothalamus and pituitary
B) the deepest portions of the brain, the medulla and reticular activating system
C) the frontal lobes
D) the visual cortex

Answer: C

Diff: 1 Type: MC Page Ref: 381
Topic: Schizophrenia/Causes/Biological Aspects
Skill: Applied
Objective:

- 76) People with schizophrenia often show poor performance on tasks like the Wisconsin Card Sorting Task, 76) _____
which is thought to indicate a dysfunction of the
A) temporal lobe. B) frontal lobe. C) parietal lobe. D) occipital lobe.

Answer: B

Diff: 1 Type: MC Page Ref: 381
Topic: Schizophrenia/Causes/Biological Aspects
Skill: Factual
Objective:

- 77) Aberrant salience means that 77) _____
- A) people with schizophrenia often show unusual motor behaviors.
 - B) enlarged brain ventricles cause people with schizophrenia to be unable to concentrate.
 - C) dysregulated dopamine can cause people with schizophrenia to pay too much attention to stimuli that are not actually important.
 - D) a large amount of communication deviance in the family can cause a person with schizophrenia to relapse.
- Answer: C
Diff: 2 Type: MC Page Ref: 383
Topic: Schizophrenia/Causes/Biological Aspects
Skill: Factual
Objective:
- 78) There is a new trend to focus on dopamine receptor sensitivity rather than on dopamine itself because 78) _____
- A) there is only one type of dopamine receptor.
 - B) there is strong evidence that people with schizophrenia have used too many drugs.
 - C) there is strong evidence that people with schizophrenia have too much dopamine.
 - D) there is no strong evidence that people with schizophrenia have too much dopamine.
- Answer: D
Diff: 2 Type: MC Page Ref: 383-384
Topic: Schizophrenia/Causes/Biological Aspects
Skill: Factual
Objective:
- 79) Glutamate is an excitatory neurotransmitter that researchers suspect might be involved in schizophrenia because 79) _____
- A) it causes the ventricles to enlarge.
 - B) it makes dopamine.
 - C) it is missing in the brains of people with schizophrenia.
 - D) it can produce schizophrenic-like symptoms in normal subjects.
- Answer: D
Diff: 2 Type: MC Page Ref: 384
Topic: Schizophrenia/Causes/Biological Aspects
Skill: Factual
Objective:
- 80) Studies on neurocognition have found that people with schizophrenia 80) _____
- A) have abnormal neurochemical changes in response to negative thoughts.
 - B) can't control their thoughts that jump from topic to topic.
 - C) get too focused on one thing and tune out the rest of the real world.
 - D) are unable to pay attention on demand and don't habituate to stimuli.
- Answer: D
Diff: 2 Type: MC Page Ref: 384-385
Topic: Schizophrenia/Causes/Biological Aspects
Skill: Factual
Objective:
- 81) A mother constantly demands that her son show her how much she is loved, but when he tries to hug her she yells at him to be more discreet. No matter what the child does, he is wrong. Further, the mother prohibits him from commenting on this paradox. What does this interaction pattern best illustrate? 81) _____
- A) loosening of associations
 - B) double-bind communication
 - C) fragmented thinking
 - D) expressed emotion
- Answer: B
Diff: 2 Type: MC Page Ref: 385
Topic: Schizophrenia/Causes/Psychosocial and Cultural
Skill: Applied
Objective:

- 82) One aspect of family environment that has been found to be important in schizophrenia is 82) _____
A) the level of parental grief over their child's illness.
B) if lots of double-bind communications are used.
C) the level of expressed emotion.
D) if the mother is cold and aloof.

Answer: C

Diff: 2 Type: MC Page Ref: 386
Topic: Schizophrenia/Causes/Psychosocial and Cultural
Skill: Factual
Objective:

- 83) What are some of the stressors that have been found to increase the risk of developing schizophrenia? 83) _____
A) being a recent immigrant B) living alone
C) being raised in an isolated rural area D) being an identical twin

Answer: A

Diff: 2 Type: MC Page Ref: 387
Topic: Schizophrenia/Causes/Psychosocial and Cultural
Skill: Factual
Objective:

- 84) Schizophrenia and cannabis abuse 84) _____
A) were not found to be linked.
B) were found to be connected – having schizophrenia increases the risk of abusing cannabis.
C) were found to be connected – abusing cannabis increases the risk of schizophrenia in vulnerable people and may speed up the brain changes that occur.
D) were found to be connected – abusing cannabis decreases the risk of schizophrenia in vulnerable people and may slow down the brain changes that occur.

Answer: C

Diff: 2 Type: MC Page Ref: 408-409
Topic: Schizophrenia/Causes/Psychosocial and Cultural
Skill: Factual
Objective:

- 85) Most people with schizophrenia 85) _____
A) develop other disorders.
B) continue to show signs of illness.
C) remain hospitalized for the rest of their lives.
D) are cured.

Answer: B

Diff: 2 Type: MC Page Ref: 388
Topic: Schizophrenia/Treatment
Skill: Factual
Objective:

- 86) The best predictor of overall functioning over time for someone with schizophrenia is 86) _____
A) how severe the person's positive symptoms are.
B) how much therapy the person gets.
C) how much impairment the person suffers.
D) how severe the person's negative symptoms are.

Answer: D

Diff: 2 Type: MC Page Ref: 388
Topic: Schizophrenia/Treatment
Skill: Factual
Objective:

- 87) First-generation antipsychotics 87) _____
A) include Risperdal and Zyprexa. B) produce few side effects.
C) work by blocking dopamine receptors. D) are not effective.

Answer: C

Diff: 2 Type: MC Page Ref: 388

Topic: Schizophrenia/Treatment

Skill: Factual

Objective:

- 88) The first-generation antipsychotics seem to work because they block dopamine. This is supported by the new research findings that 88) _____
- A) changes in symptoms begin to occur weeks after starting to take the medications, rather than immediately.
 - B) patients report they feel better right away, although there isn't any actual clinical changes occurring.
 - C) changes in symptoms occur without any side effects.
 - D) changes in symptoms begin to occur very quickly after starting to the medications, not weeks later as previously thought.

Answer: D

Diff: 2 Type: MC Page Ref: 388

Topic: Schizophrenia/Treatment

Skill: Factual

Objective:

- 89) Extrapyramidal side effects 89) _____
- A) are involuntary movements that result mainly from taking first-generation antipsychotic drugs.
 - B) are voluntary, unusual movements that result mainly from taking second-generation antipsychotic drugs.
 - C) are often fatal side-effects from second-generation antipsychotic drugs.
 - D) are an increase in mood (reduction in depression) that occur in people with schizoaffective disorder.

Answer: A

Diff: 2 Type: MC Page Ref: 389

Topic: Schizophrenia/Treatment

Skill: Factual

Objective:

- 90) Which of the following is suggested by the effectiveness of second generation antipsychotics in the treatment of schizophrenia? 90) _____
- A) Prenatal brain damage causes schizophrenia.
 - B) More than one brain area or neurotransmitter is involved in producing the symptoms of schizophrenia.
 - C) Decreased frontal lobe activity underlies the positive symptoms seen in schizophrenia.
 - D) There is no biological explanation for the symptoms of schizophrenia.

Answer: B

Diff: 2 Type: MC Page Ref: 389

Topic: Schizophrenia/Treatment

Skill: Conceptual

Objective:

- 91) Social-skills training for people with schizophrenia 91) _____
- A) tries to help cure people of schizophrenia.
 - B) tries to help people learn a trade so they can earn a living.
 - C) tries to help people gain the skills they need for daily living outside the hospital.
 - D) has been very successful in reducing symptoms.

Answer: C

Diff: 2 Type: MC Page Ref: 390

Topic: Schizophrenia/Treatment

Skill: Factual

Objective:

- 92) Which type of training has an emphasis on helping patients deal with their neurocognitive deficits? 92) _____
A) case management B) cognitive remediation training
C) family therapy D) social skills training

Answer: B

Diff: 1 Type: MC Page Ref: 390

Topic: Schizophrenia/Treatment

Skill: Factual

Objective:

- 93) Cognitive-behavioral treatment for people with schizophrenia 93) _____
A) tries to help people question their delusions to help reduce their intensity.
B) tries to help people find the services they need in the community.
C) tries to help people gain the skills they need for daily living.
D) tries to help people learn a trade so they can earn a living.

Answer: A

Diff: 2 Type: MC Page Ref: 390

Topic: Schizophrenia/Treatment

Skill: Factual

Objective:

- 94) One-on-one psychotherapy for people with schizophrenia 94) _____
A) seems to be very effective when combined with medication.
B) has many side effects.
C) shows very little promise.
D) is an effective replacement for medication.

Answer: A

Diff: 1 Type: MC Page Ref: 391

Topic: Schizophrenia/Treatment

Skill: Factual

Objective:

- 95) Secondary prevention for schizophrenia 95) _____
A) involves early social skills training for people with schizophrenia.
B) involves trying to intervene early with people who are at high risk of developing schizophrenia.
C) involves starting treatment as early as possible for people who have schizophrenia.
D) involves trying to prevent new cases of schizophrenia from ever developing.

Answer: B

Diff: 2 Type: MC Page Ref: 393

Topic: Schizophrenia/Treatment

Skill: Factual

Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 96) There is some evidence to suggest that estrogen may protect females from psychosis. 96) _____

Answer: True False

Diff: 2 Type: TF Page Ref: 364

Topic:

Skill:

Objective:

- 97) A delusion is a belief with no basis in reality. 97) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 365

Topic:

Skill:

Objective:

- 98) The most common type of hallucinations in schizophrenia is visual. 98) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 366
Topic:
Skill:
Objective:
- 99) There is evidence to suggest that schizophrenics really do hear voices. 99) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 366
Topic:
Skill:
Objective:
- 100) A neologism is a type of hallucination. 100) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 366
Topic:
Skill:
Objective:
- 101) Disorganized behavior can involve either inactivity or overactivity. 101) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 366-367
Topic:
Skill:
Objective:
- 102) Hallucinations and delusions are the most common negative symptoms of schizophrenia. 102) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 367
Topic:
Skill:
Objective:
- 103) Delusions of grandeur are commonly seen in disorganized schizophrenia. 103) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 369
Topic:
Skill:
Objective:
- 104) Imitating the actions of others is known as echopraxia. 104) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 369
Topic:
Skill:
Objective:
- 105) A person with schizophrenia who is not currently experiencing prominent symptoms can be described as having residual schizophrenia. 105) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 370
Topic:
Skill:
Objective:

- 106) Individuals with delusional disorder are likely to behave quite normally. 106) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 370-371
Topic:
Skill:
Objective:
- 107) The occurrence of shared psychotic disorder is not acknowledged in the DSM-IV-TR. 107) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 371
Topic:
Skill:
Objective:
- 108) If one identical twin has schizophrenia, the other twin has a 90% chance of developing the disorder as well. 108) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 372
Topic:
Skill:
Objective:
- 109) Adoption studies have identified environmental factors that increase the likelihood that both index and control subjects will exhibit thought disorders. 109) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 373-375
Topic:
Skill:
Objective:
- 110) Prenatal insults can increase the likelihood of developing schizophrenia. 110) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 377
Topic:
Skill:
Objective:
- 111) Schizophrenia is a genetically determined disorder. 111) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 378
Topic:
Skill:
Objective:
- 112) Most researchers believe schizophrenia is a neurodevelopmental disorder. 112) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 378
Topic:
Skill:
Objective:
- 113) Movement abnormalities in children and adolescents may predict later schizophrenia. 113) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 399
Topic:
Skill:
Objective:

- 114) Many people with schizophrenia have enlarged brains, with brain size increasing over time. 114) _____
 Answer: True False
 Diff: 1 Type: TF Page Ref: 380
 Topic:
 Skill:
 Objective:
- 115) The existence of a psychosis caused by amphetamine provides support for the role of dopamine in schizophrenia. 115) _____
 Answer: True False
 Diff: 2 Type: TF Page Ref: 383
 Topic:
 Skill:
 Objective:
- 116) There is no strong support showing enhanced dopamine production in schizophrenics. 116) _____
 Answer: True False
 Diff: 2 Type: TF Page Ref: 383
 Topic:
 Skill:
 Objective:
- 117) Family environment can be a stressor that contributes to the relapse of people with schizophrenia. 117) _____
 Answer: True False
 Diff: 2 Type: TF Page Ref: 385
 Topic:
 Skill:
 Objective:
- 118) Cannabis abuse has been found to decrease the risk of schizophrenia. 118) _____
 Answer: True False
 Diff: 2 Type: TF Page Ref: 408
 Topic:
 Skill:
 Objective:
- 119) Most people with schizophrenia that are treated recover fully. 119) _____
 Answer: True False
 Diff: 1 Type: TF Page Ref: 388
 Topic:
 Skill:
 Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

- 120) What is thought to explain the delayed onset of schizophrenia in women? 120) _____
 Answer: While the average age of onset of schizophrenia for males is 25, for women it is 29. There is some reason to believe that estrogen may serve to protect the female brain. It has been observed that women with schizophrenia experience more psychotic symptoms when estrogen levels are low or dropping, consistent with this hypothesis.
 Diff: 2 Type: SA Page Ref: 363-364
 Topic:
 Skill:
 Objective:

- 121) What is a delusion? What type of delusions are most common in schizophrenia? 121) _____
Answer: A delusion is a thought, a cognition, with no basis in reality. Common delusions involve believing that one's actions or thoughts are being controlled by some external force, that one's thoughts are being broadcasted, and that thoughts are being inserted into one's mind. These delusions are all consistent with the disorganized thoughts commonly seen in schizophrenia.
Diff: 1 Type: SA Page Ref: 365
Topic:
Skill:
Objective:
- 122) What is catatonia? Is catatonia a positive or negative symptom? Explain your answer. 122) _____
Answer: Catatonia is a negative symptom of schizophrenia as it is characterized by an absence of normal behavior. The patient with catatonia may have virtually no movement or speech, or they may freeze and hold an awkward position for an extended period of time.
Diff: 2 Type: SA Page Ref: 366-367
Topic:
Skill:
Objective:
- 123) Explain and give examples of positive symptoms of schizophrenia. 123) _____
Answer: Positive symptoms involve the presence of abnormal behavior. Hallucinations, delusions, disorganized speech, and bizarre behavior are all examples of positive symptoms.
Diff: 1 Type: SA Page Ref: 367
Topic:
Skill:
Objective:
- 124) What is schizoaffective disorder? 124) _____
Answer: The individual diagnosed with schizoaffective disorder exhibits symptoms of both schizophrenia and an affective disorder; they experience both psychosis and extremes of mood. It is not clear whether or not this disorder is best thought of as a form of mood disorder or a form of schizophrenia.
Diff: 1 Type: SA Page Ref: 370
Topic:
Skill:
Objective:
- 125) What are two types of prenatal experience associated with increased risk of schizophrenia? 125) _____
Answer: Two of: 1. flu virus - elevated risk in children whose mothers had the flu during the 2nd trimester.
2. Rh incompatibility - elevated risk in children.
3. early prenatal nutritional deficiency. All compromise fetal development, especially brain development.
Diff: 2 Type: SA Page Ref: 377-378
Topic:
Skill:
Objective:
- 126) How is dopamine theorized to impact schizophrenia? 126) _____
Answer: Dopamine may play a role in how much attention people pay to stimuli. Too much may make people pay too much attention to irrelevant stimuli (aberrant salience) and contribute to thought disorder.
Diff: 2 Type: SA Page Ref: 382-383
Topic:
Skill:
Objective:

- 127) Esther lives with her parents. She frequently has relapses into schizophrenia. If her family is characterized by expressed emotion, what behaviors can we expect of her parents that induce relapse? 127) _____
- Answer: They are emotionally over-involved in Esther's life and at the same time excessively critical of her. Expressed emotion would be especially intense if Esther's parents believe that Esther can control her schizophrenic symptoms and chooses not to. Conflict is likely to be two-way between Esther and her parents.
- Diff: 2 Type: SA Page Ref: 385-386
Topic:
Skill:
Objective:
- 128) Why is immigration associated with an increased risk of schizophrenia? 128) _____
- Answer: Probably because of the increased stressors, especially that of facing discrimination and social disadvantage.
- Diff: 2 Type: SA Page Ref: 387
Topic:
Skill:
Objective:
- 129) What is the connection between cannabis abuse and schizophrenia? 129) _____
- Answer: People with schizophrenia are twice as likely to abuse cannabis. Use of cannabis more than doubles a person's risk of developing schizophrenia. Cannabis may accelerate the progressive brain changes of schizophrenia.
- Diff: 2 Type: SA Page Ref: 408-409
Topic:
Skill:
Objective:
- 130) What factors help predict prognosis? 130) _____
- Answer: The severity of negative symptoms - the worse they are, the worse the prognosis. And where someone lives - people in less industrialized nations have better prognoses.
- Diff: 2 Type: SA Page Ref: 388
Topic:
Skill:
Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

- 131) Define positive and negative symptoms. Give examples of each.
- Answer: A common way of describing schizophrenia is by categorizing its symptoms as either positive or negative. Positive symptoms are abnormal behaviors, unusual perceptions or thoughts that are present, while negative symptoms involve the absence of something normal. Thus, inappropriate emotion would be a positive symptom and a lack of emotion would be a negative symptom. It should be noted, however, that a single individual is likely to exhibit both types of symptoms.
- GRADING RUBRIC: 10 points total, 5 for each categorization.
- Diff: 2 Type: ES Page Ref: 365-367
Topic:
Skill:
Objective:
- 132) What are schizoaffective disorder and schizophreniform disorder?
- Answer: These are not considered formal subtypes of schizophrenia in DSM-IV. Schizoaffective disorder is a category for individuals who have characteristics of both schizophrenia and bipolar or major depressive disorder, such that a differential diagnosis can not be made. Schizophreniform disorder is diagnosed when schizophrenic symptoms are present but have not lasted for six months. An individual may be rediagnosed as schizophrenic after six months.
- GRADING RUBRIC: 6 points, 3 for each explanation.

Diff: 1 Type: ES Page Ref: 370
Topic:
Skill:
Objective:

133) What important aspect of the adoptive family was missing from early studies? What did later studies find when they did include it?

Answer: Early studies did not examine child rearing adequacy of the adoptive family. Newer studies found that communication deviance - how understandable and easy to follow the speech of family members was - was related to risk of schizophrenia. Children with a biological risk for schizophrenia who were adopted into families with high communication deviance had an increased risk of the disease. If the child had no genetic predisposition for schizophrenia, communication deviance did not make a difference in risk. Most interestingly, if a genetic risk existed and the child was adopted into a family with low communication deviance, that child's risk for schizophrenia was actually lower than the other groups!

GRADING RUBRIC: 8 points total, 3 for child rearing adequacy, 5 for later findings.

Diff: 2 Type: ES Page Ref: 376-377
Topic:
Skill:
Objective:

134) What is the evidence for and against the dopamine hypothesis?

Answer: Early antipsychotic drugs that blocked dopamine receptors reduced psychotic symptoms. Amphetamine psychosis—due to increased dopamine. Drugs that raise dopamine, for example Parkinson's drugs, caused psychotic-like side effects. However, no strong evidence that people with schizophrenia have increased levels of dopamine has been found.

GRADING RUBRIC: 5 points

Diff: 2 Type: ES Page Ref: 382-383
Topic:
Skill:
Objective:

135) What role does the family play in schizophrenia?

Answer: While it was once thought that features of the home environment "caused" schizophrenia, such simplistic explanations have been discarded. At one time it was believed that inconsistent emotional signals from a parent lead to schizophrenia, this "double-bind" hypothesis has not been supported. While there is little or no evidence to support a role for the family environment in the development of the disorder, it has been shown that communication patterns can predict relapse. In other words, familial interactions that are stressful can contribute to relapse. A recurrence of symptoms is more likely in a home that is high in expressed emotion. The elements of expressed emotion are criticism, hostility, and emotional overinvolvement.

GRADING RUBRIC: 8 points - 2 points for noting that family not implicated as a causal factor, 2 points role of family in relapse, 2 points for explanation of/reference to double-bind, 2 points for expressed emotion.

Diff: 1 Type: ES Page Ref: 385-386
Topic:
Skill:
Objective:

- 1) A
- 2) C
- 3) A
- 4) C
- 5) D
- 6) C
- 7) A
- 8) C
- 9) B
- 10) C
- 11) A
- 12) B
- 13) B
- 14) C
- 15) A
- 16) A
- 17) D
- 18) A
- 19) C
- 20) D
- 21) A
- 22) C
- 23) C
- 24) C
- 25) D
- 26) A
- 27) C
- 28) A
- 29) B
- 30) D

- 31) B
- 32) A
- 33) B
- 34) C
- 35) B
- 36) A
- 37) C
- 38) C
- 39) A
- 40) D
- 41) C
- 42) B
- 43) A
- 44) B
- 45) C
- 46) D
- 47) C
- 48) A
- 49) A
- 50) C
- 51) B
- 52) C
- 53) C
- 54) A
- 55) D
- 56) B
- 57) A
- 58) A
- 59) A
- 60) D

- 61) B
- 62) A
- 63) B
- 64) A
- 65) A
- 66) D
- 67) D
- 68) C
- 69) D
- 70) C
- 71) B
- 72) D
- 73) B
- 74) B
- 75) C
- 76) B
- 77) C
- 78) D
- 79) D
- 80) D
- 81) B
- 82) C
- 83) A
- 84) C
- 85) B
- 86) D
- 87) C
- 88) D
- 89) A
- 90) B

- 91) C
- 92) B
- 93) A
- 94) A
- 95) B
- 96) TRUE
- 97) TRUE
- 98) FALSE
- 99) FALSE
- 100) FALSE
- 101) TRUE
- 102) FALSE
- 103) FALSE
- 104) TRUE
- 105) TRUE
- 106) TRUE
- 107) FALSE
- 108) FALSE
- 109) FALSE
- 110) TRUE
- 111) FALSE
- 112) FALSE
- 113) TRUE
- 114) FALSE
- 115) TRUE
- 116) TRUE
- 117) TRUE
- 118) FALSE
- 119) FALSE

- 120) While the average age of onset of schizophrenia for males is 25, for women it is 29. There is some reason to believe that estrogen may serve to protect the female brain. It has been observed that women with schizophrenia experience more psychotic symptoms when estrogen levels are low or dropping, consistent with this hypothesis.
- 121) A delusion is a thought, a cognition, with no basis in reality. Common delusions involve believing that one's actions or thoughts are being controlled by some external force, that one's thoughts are being broadcasted, and that thoughts are being inserted into one's mind. These delusions are all consistent with the disorganized thoughts commonly seen in schizophrenia.
- Catatonia is a negative symptom of schizophrenia as it is characterized by an absence of normal behavior. The patient with catatonia may have virtually no movement or speech, or they may freeze and hold an awkward position for an extended period
- 122) of time.
- 123) Positive symptoms involve the presence of abnormal behavior. Hallucinations, delusions, disorganized speech, and bizarre behavior are all examples of positive symptoms.
- 124) The individual diagnosed with schizoaffective disorder exhibits symptoms of both schizophrenia and an affective disorder; they experience both psychosis and extremes of mood. It is not clear whether or not this disorder is best thought of as a form of mood disorder or a form of schizophrenia.
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2. Rh incompatibility - elevated risk in children.
3. early prenatal nutritional deficiency. All compromise fetal development, especially brain development.
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- 127) They are emotionally overinvolved in Esther's life and at the same time excessively critical of her. Expressed emotion would be especially intense if Esther's parents believe that Esther can control her schizophrenic symptoms and chooses not to. Conflict is likely to be two-way between Esther and her parents.
- 128) Probably because of the increased stressors, especially that of facing discrimination and social disadvantage.
- 129) People with schizophrenia are twice as likely to abuse cannabis. Use of cannabis more than doubles a person's risk of developing schizophrenia. Cannabis may accelerate the progressive brain changes of schizophrenia.
- 130) The severity of negative symptoms - the worse they are, the worse the prognosis. And where someone lives - people in less industrialized nations have better prognoses.
- 131) A common way of describing schizophrenia is by categorizing its symptoms as either positive or negative. Positive symptoms are abnormal behaviors, unusual perceptions or thoughts that are present, while negative symptoms involve the absence of something normal. Thus, inappropriate emotion would be a positive symptom and a lack of emotion would be a negative symptom. It should be noted, however, that a single individual is likely to exhibit both types of symptoms.
GRADING RUBRIC: 10 points total, 5 for each categorization.
- 132) These are not considered formal subtypes of schizophrenia in DSM-IV. Schizoaffective disorder is a category for individuals who have characteristics of both schizophrenia and bipolar or major depressive disorder, such that a differential diagnosis can not be made. Schizophreniform disorder is diagnosed when schizophrenic symptoms are present but have not lasted for six months. An individual may be re-diagnosed as schizophrenic after six months.
GRADING RUBRIC: 6 points, 3 for each explanation.
- 133) Early studies did not examine child rearing adequacy of the adoptive family. Newer studies found that communication deviance - how understandable and easy to follow the speech of family members was - was related to risk of schizophrenia. Children with a biological risk for schizophrenia who were adopted into families with high communication deviance had an increased risk of the disease. If the child had no genetic predisposition for schizophrenia, communication deviance did not make a difference in risk. Most interestingly, if a genetic risk existed and the child was adopted into a family with low communication deviance, that child's risk for schizophrenia was actually lower than the other groups!
GRADING RUBRIC: 8 points total, 3 for child rearing adequacy, 5 for later findings.

134) Early antipsychotic drugs that blocked dopamine receptors reduced psychotic symptoms. Amphetamine psychosis - due to increased dopamine. Drugs that raise dopamine, for example Parkinson's drugs, caused psychotic-like side effects. However, no strong evidence that people with schizophrenia have increased levels of dopamine has been found.

GRADING RUBRIC: 5 points

135) While it was once thought that features of the home environment "caused" schizophrenia, such simplistic explanations have been discarded. At one time it was believed that inconsistent emotional signals from a parent lead to schizophrenia, this "double-bind" hypothesis has not been supported. While there is little or no evidence to support a role for the family environment in the development of the disorder, it has been shown that communication patterns can predict relapse. In other words, familial interactions that are stressful can contribute to relapse. A recurrence of symptoms is more likely in a home that is high in expressed emotion. The elements of expressed emotion are criticism, hostility, and emotional overinvolvement.

GRADING RUBRIC: 8 points - 2 points for noting that family not implicated as a causal factor, 2 points role of family in relapse, 2 points for explanation of/reference to double-bind, 2 points for expressed emotion.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Which of the following statements about the brain is true? 1) _____
A) Brain damage rarely results in cognitive changes.
B) The brain is protected only by the skull.
C) The human brain typically weights about 5 pounds.
D) The skull is designed to support as much as 2 tons of weight.

Answer: D

Diff: 1 Type: MC Page Ref: 396

Topic: Cognitive Disorders

Skill: Factual

Objective:

- 2) It is important that mental health professionals have an understanding of the effects of brain damage because 2) _____
A) most of their patients will have brain damage.
B) the effects of most forms of brain damage are reversible.
C) many of the medications used to treat psychopathology cause brain damage.
D) brain damage can result in symptoms that look like psychological conditions.

Answer: D

Diff: 1 Type: MC Page Ref: 396

Topic: Cognitive Disorders

Skill: Conceptual

Objective:

- 3) All of the following are reasons why cognitive disorders are addressed in an abnormal text EXCEPT 3) _____
A) brain damage can lead to psychological symptoms.
B) psychological conditions can signal the onset of brain damage.
C) some brain disorders cause symptoms that look like mood and anxiety disorders.
D) these disorders are considered to be psychopathological conditions.

Answer: B

Diff: 1 Type: MC Page Ref: 396

Topic: Cognitive Disorders

Skill: Conceptual

Objective:

- 4) The terms functional and organic are no longer found in the DSM. Functional was previously used to indicate a _____ origin while organic was used to refer to brain damage of with a(n) _____ cause. 4) _____
A) psychological; biological B) acute; chronic
C) genetic; environmental D) known; unknown

Answer: A

Diff: 2 Type: MC Page Ref: 397

Topic: Brain Impairment in Adults

Skill: Conceptual

Objective:

- 5) Anosognosia is an inability to 5) _____
A) see, although physically the eyes are fine. B) move parts of the body.
C) make realistic self-appraisals. D) understand language.

Answer: C

Diff: 3 Type: MC Page Ref: 397

Topic: Brain Impairment in Adults/Clinical Signs

Skill: Factual

Objective:

- 6) The extent of the deficits seen after brain damage are determined in part by 6) _____
- A) genetic factors.
 - B) how one is functioning before the damage occurs.
 - C) the drugs a person was on.
 - D) chemical imbalances in the brain.

Answer: B

Diff: 1 Type: MC Page Ref: 397
Topic: Brain Impairment in Adults/Clinical Signs
Skill: Conceptual
Objective:

- 7) Major brain damage 7) _____
- A) sometimes causes minor changes and sometimes major ones.
 - B) causes minor changes.
 - C) causes changes to personality only.
 - D) causes major changes.

Answer: A

Diff: 1 Type: MC Page Ref: 397
Topic: Brain Impairment in Adults/Clinical Signs
Skill: Factual
Objective:

- 8) A person who has experienced destruction of brain tissue may have widespread or limited behavioral deficits. The outcome depends upon all of the following EXCEPT 8) _____
- A) whether the person is male or female.
 - B) the person's predisorder personality or intellectual competence.
 - C) the location of the brain damage.
 - D) the person's total life situation.

Answer: A

Diff: 2 Type: MC Page Ref: 397
Topic: Brain Impairment in Adults/Clinical Signs
Skill: Applied
Objective:

- 9) When Mrs. Thomason experienced a stroke, a small area of her brain was deprived of oxygenated blood. This resulted in a 9) _____
- A) focal lesion.
 - B) psychopathological dementia.
 - C) diffuse lesion.
 - D) diffuse brain injury.

Answer: A

Diff: 1 Type: MC Page Ref: 397
Topic: Brain Impairment in Adults/Diffuse versus Local Damage
Skill: Applied
Objective:

- 10) Mild to moderate diffuse brain damage is most likely to result in 10) _____
- A) altered sleep patterns.
 - B) attention deficits.
 - C) mood disturbance.
 - D) visual distortions.

Answer: B

Diff: 1 Type: MC Page Ref: 397
Topic: Brain Impairment in Adults/Diffuse versus Local Damage
Skill: Conceptual
Objective:

- 11) Focal brain damage is most likely to be a consequence of 11) _____
- A) poison ingestion.
 - B) oxygen deprivation.
 - C) malnutrition.
 - D) stroke.

Answer: D

Diff: 1 Type: MC Page Ref: 397
Topic: Brain Impairment in Adults/Diffuse versus Local Damage
Skill: Factual
Objective:

- 12) Someone with focal brain damage in their left hemisphere 12) _____
A) will have problems with understanding new situations.
B) will have anterograde amnesia.
C) will have problems with processing language.
D) will have problems with nonverbal reasoning.

Answer: C

Diff: 2 Type: MC Page Ref: 398
Topic: Brain Impairment in Adults/Diffuse versus Local Damage
Skill: Applied
Objective:

- 13) Damage to the temporal lobes of the brain is most likely to result in 13) _____
A) impulsivity. B) blindness. C) forgetfulness. D) passivity.

Answer: C

Diff: 1 Type: MC Page Ref: 398
Topic: Brain Impairment in Adults/Diffuse versus Local Damage
Skill: Conceptual
Objective:

- 14) Damage to the _____ lobes of the brain is most associated with memory loss; damage to the _____ 14) _____
lobes of the brain is most associated with passivity or impulsiveness.
A) temporal; frontal B) frontal; temporal
C) parietal; occipital D) parietal; temporal

Answer: A

Diff: 1 Type: MC Page Ref: 398
Topic: Brain Impairment in Adults/Diffuse versus Local Damage
Skill: Factual
Objective:

- 15) Ruth experienced a stroke which severely damaged her occipital lobe. We can expect that she has an 15) _____
impairment in her ability to
A) understand what she sees. B) do mathematical and word problems.
C) walk in a coordinated fashion. D) think and talk using good judgment.

Answer: A

Diff: 1 Type: MC Page Ref: 398
Topic: Brain Impairment in Adults/Diffuse versus Local Damage
Skill: Applied
Objective:

- 16) Which of the following is a good example of a person with an impairment of orientation? 16) _____
A) Joe, who once thought he was a homosexual but now thinks he is heterosexual.
B) Lois, who must constantly be reminded of what to do next when she is getting dressed.
C) Karla, who cannot accurately draw objects or copy designs on a piece of paper.
D) Marlon, who is not sure where he is or what month or year it is.

Answer: D

Diff: 1 Type: MC Page Ref: 399
Topic: Brain Impairment in Adults/Diffuse versus Local Damage
Skill: Applied
Objective:

- 17) Jerry had a stroke several months ago. Among the changes his family has noticed is that he now blows up over little things, cries over minor problems and laughs at anything, no matter how silly. Jerry is showing _____
- A) affective blunting.
 - B) focal brain damage.
 - C) impairment of affective modulation.
 - D) impairment of receptive and expressive communication.

Answer: C

Diff: 1 Type: MC Page Ref: 399

Topic: Brain Impairment in Adults/Neuropsychology

Skill: Applied

Objective:

- 18) An individual with neuropsychological damage _____
- A) will not usually show manifest signs of psychopathology such as panic attacks or delusions.
 - B) usually manifests symptoms of psychopathology that are the opposite of the person's predisorder personality.
 - C) will almost always evidence moderate to severe psychopathology, including hallucinations and delusions.
 - D) will develop psychopathological symptoms only when areas of the frontal cortex have been damaged.

Answer: A

Diff: 1 Type: MC Page Ref: 399

Topic: Brain Impairment in Adults/Neuropsychology

Skill: Conceptual

Objective:

- 19) Which of the following psychopathological symptoms is commonly seen in neuropsychological disorders? _____
- A) dissociative episodes
 - B) delusions
 - C) cognitive deficits
 - D) panic attacks

Answer: C

Diff: 1 Type: MC Page Ref: 399

Topic: Brain Impairment in Adults/Neuropsychology

Skill: Factual

Objective:

- 20) Delirium _____
- A) can occur in a person of any age.
 - B) reflects severe brain damage.
 - C) develops slowly.
 - D) affects perception.

Answer: D

Diff: 1 Type: MC Page Ref: 400

Topic: Delirium/Clinical Presentation

Skill: Factual

Objective:

- 21) Delirium is thought to be more common in the elderly due to _____
- A) their relative lack of physical and mental activity.
 - B) normal age-related changes in the brain.
 - C) their weakened immune systems.
 - D) chemical imbalances.

Answer: B

Diff: 1 Type: MC Page Ref: 400

Topic: Delirium/Clinical Presentation

Skill: Factual

Objective:

- 22) Suddenly, Lavinia is unable to remember what she was doing. She screams that bugs are crawling all over the walls. She begins to wildly swing her arms around. She can't fall asleep at night, but finally falls asleep at daylight. Lavinia most likely has _____
- A) schizophrenia. B) delirium.
C) dementia. D) focal brain damage.
- Answer: B
Diff: 1 Type: MC Page Ref: 400
Topic: Delirium/Clinical Presentation
Skill: Applied
Objective:
- 23) The most common cause of delirium is _____
- A) drugs. B) disease.
C) electrolytic imbalance. D) stroke.
- Answer: A
Diff: 1 Type: MC Page Ref: 400
Topic: Delirium/Clinical Presentation
Skill: Factual
Objective:
- 24) Delirium _____
- A) is usually permanent.
B) is usually reversible.
C) is characterized by a decline from a previously attained level of functioning.
D) rarely is a medical emergency.
- Answer: B
Diff: 1 Type: MC Page Ref: 400
Topic: Delirium/Treatment and Outcome
Skill: Factual
Objective:
- 25) The presence of delirium in a patient after surgery or other health problems _____
- A) is a sign that the patient is getting better.
B) means the patient is going to develop additional health problems and almost certainly is going to die.
C) means that the patient will develop dementia within a year of having delirium.
D) means the patient will probably be in the hospital longer, have more health problems and an increased risk of death.
- Answer: D
Diff: 2 Type: MC Page Ref: 423
Topic: Delirium
Skill: Factual
Objective:
- 26) Delirium has a _____ onset and dementia has a _____ onset. _____
- A) interference with complex processing; interference with simple processing
B) slow recovery; rapid recovery
C) rapid onset; gradual onset
D) extensive brain damage; localized brain damage
- Answer: C
Diff: 2 Type: MC Page Ref: 400-401
Topic: Dementia
Skill: Conceptual
Objective:
- 27) Delirium is to dementia as _____ is to _____. _____
- A) biological; psychological B) diffuse; focal
C) old; young D) acute; chronic

Answer: D

Diff: 1 Type: MC Page Ref: 401

Topic: Dementia

Skill: Conceptual

Objective:

- 28) The first sign of dementia is typically _____
- A) memory problems. B) lack of alertness.
C) motor control problems. D) lack of attention to the environment.

Answer: A

Diff: 1 Type: MC Page Ref: 401

Topic: Dementia

Skill: Factual

Objective:

- 29) Janice is showing signs of dementia. In addition, she experiences tremors in her hands and head. When she is given a medication that increases her dopamine level, her tremors stop, but they return as soon as the medication wears off. Janice _____

- A) has Alzheimer's dementia
B) has Parkinson's disease
C) has Huntington's disease
D) is malingering.

Answer: B

Diff: 2 Type: MC Page Ref: 424

Topic: Dementia

Skill: Applied

Objective:

- 30) The most common cause of dementia is _____
- A) severe or repeated head injury. B) intracranial tumors.
C) drug toxicity. D) degenerative brain disease.

Answer: D

Diff: 1 Type: MC Page Ref: 401

Topic: Dementia

Skill: Factual

Objective:

- 31) The most common cause of dementia is _____
- A) Parkinson's Disease. B) Huntington's Disease.
C) alcoholic amnesic disorder. D) Alzheimer's Disease.

Answer: D

Diff: 1 Type: MC Page Ref: 401

Topic: Dementia

Skill: Factual

Objective:

- 32) In order for a diagnosis of Alzheimer's Disease to be definitively made _____
- A) the afflicted individual must exhibit delirium at least 50% of the time.
B) plaques and tangles must be visible on an MRI.
C) brain tissue must be examined.
D) symptoms must be present for over 2 years.

Answer: C

Diff: 2 Type: MC Page Ref: 401

Topic: Dementia/Alzheimer's Disease

Skill: Factual

Objective:

- 33) You are convinced that your grandmother has Alzheimer's. How can you doctor confirm your diagnosis? 33) _____
- A) by looking to see if she has a decrease in frontal lobe function
 - B) by determining if she has enlarged ventricles that indicate brain atrophy
 - C) by ruling out all other potential causes of dementia
 - D) by conducting a blood test

Answer: C

Diff: 1 Type: MC Page Ref: 402

Topic: Dementia/Alzheimer's Disease

Skill: Applied

Objective:

- 34) It is suspected that June is in the early stages of Alzheimer's Disease. Which of the following symptoms would suggest this? 34) _____
- A) social withdrawal
 - B) loss of contact with reality
 - C) persistent delusions
 - D) excessive neatness and an intrusive interest in others' affairs

Answer: A

Diff: 1 Type: MC Page Ref: 403

Topic: Dementia/Alzheimer's Disease

Skill: Applied

Objective:

- 35) Which of the following is the most typical example of the onset of Alzheimer's Disease? 35) _____
- A) When Yula's dementia became obvious, her family looked back on her behavior and realized that she had been exhibiting memory deficits.
 - B) Christa began showing signs of forgetfulness after her last surgery.
 - C) Rachel have always suffered from mood disorders. When she descended into a state of dementia after her last manic episode, no one was surprised.
 - D) After Bill's death, Carol was never the same again.

Answer: A

Diff: 2 Type: MC Page Ref: 403

Topic: Dementia/Alzheimer's Disease

Skill: Applied

Objective:

- 36) The text presented a case study of a retired man who was hospitalized by his wife and son. He was typical of many patients with Dementia of the Alzheimer's Type (DAT) in that 36) _____
- A) he had good memory for remote events but no memory for events that just occurred.
 - B) he became hypochondriacal and performed repetitive, meaningless rituals.
 - C) he had become violent toward family members.
 - D) he never lost his orientation for time and person.

Answer: A

Diff: 1 Type: MC Page Ref: 403

Topic: Dementia/Alzheimer's Disease

Skill: Applied

Objective:

- 37) What types of delusions are most commonly seen in Alzheimer's Disease? 37) _____
- A) delusions of persecution
 - B) delusions of reference
 - C) delusions of bodily changes
 - D) delusions of grandeur

Answer: A

Diff: 1 Type: MC Page Ref: 404

Topic: Dementia/Alzheimer's Disease

Skill: Applied

Objective:

- 38) Which of the following is most likely to be characteristic of a physically aggressive Alzheimer's Disease patient? 38) _____
- A) delusions of reference
 - B) history of violent behavior
 - C) delusions of persecution
 - D) multiple psychotic breaks
- Answer: C
Diff: 1 Type: MC Page Ref: 404
Topic: Dementia/Alzheimer's Disease
Skill: Factual
Objective:
- 39) The brain begins to decrease in size at age 39) _____
- A) 35.
 - B) 18.
 - C) 55.
 - D) 65.
- Answer: B
Diff: 1 Type: MC Page Ref: 404
Topic: Dementia/Alzheimer's Disease
Skill: Factual
Objective:
- 40) Which of the following is a risk factor for developing Alzheimer's Disease? 40) _____
- A) being highly educated
 - B) being a woman
 - C) living in a non-Western developed nation
 - D) having a family history of Parkinson's Disease
- Answer: B
Diff: 1 Type: MC Page Ref: 404
Topic: Dementia/Alzheimer's Disease
Skill: Factual
Objective:
- 41) One of the reasons women may be at higher risk for Alzheimer's disease than men is 41) _____
- A) hormonal differences.
 - B) a higher likelihood of substance abuse.
 - C) a higher likelihood of experiencing loneliness.
 - D) they are more likely to ask for help and be diagnosed.
- Answer: C
Diff: 2 Type: MC Page Ref: 426-427
Topic: Dementia/Alzheimer's Disease
Skill: Factual
Objective:
- 42) Early-onset Alzheimer's Disease differs from other the late-onset form in that 42) _____
- A) environmental factors have no impact on the onset or the progression of the disorder.
 - B) genetics play little or no causal role.
 - C) the progression of the disease is more rapid.
 - D) symptoms invariably involve delusions and assaultive behavior.
- Answer: C
Diff: 1 Type: MC Page Ref: 405
Topic: Dementia/Alzheimer's Disease
Skill: Factual
Objective:
- 43) Early-onset Alzheimer's Disease affects people in their 43) _____
- A) 40s.
 - B) 30s.
 - C) 20s.
 - D) teens.
- Answer: A
Diff: 1 Type: MC Page Ref: 405
Topic: Dementia/Alzheimer's Disease
Skill: Factual
Objective:

- 44) Most cases of early-onset Alzheimer's Disease appear to be caused by 44) _____
A) one of several rare genetic mutations.
B) a combination of psychoactive drug abuse and poor nutrition.
C) environmental exposure to toxins.
D) HIV or some other autoimmune disease.

Answer: A

Diff: 1 Type: MC Page Ref: 405

Topic: Dementia/Alzheimer's Disease

Skill: Factual

Objective:

- 45) Which of the following is associated with an increased risk of developing Alzheimer's Disease? 45) _____
A) giving birth to a child with Down syndrome before age 35
B) excessive use of nonsteroidal anti-inflammatory drugs
C) having a family history of vascular dementia
D) living in a non-Western developed nation

Answer: A

Diff: 1 Type: MC Page Ref: 405

Topic: Dementia/Alzheimer's Disease

Skill: Factual

Objective:

- 46) It has been observed that if a women gives birth to a child with Down Syndrome before the age of 35 she has an increased risk of developing Alzheimer's Disease. Which of the following best explains this observation? 46) _____
A) Women under 35 are not emotionally mature enough to manage a child with mental retardation.
B) The same gene underlies both Down Syndrome and Alzheimer's Disease.
C) A genetic mutation that increases susceptibility to Alzheimer's Disease also increases the likelihood of passing on chromosomal abnormalities.
D) Multiple copies of the APOE-4 allele increase the likelihood of both conditions.

Answer: C

Diff: 2 Type: MC Page Ref: 405

Topic: Dementia/Alzheimer's Disease

Skill: Conceptual

Objective:

- 47) Late-onset Alzheimer's disease has been linked to a gene on Chromosome 47) _____
A) 19. B) 14. C) 21. D) 7.

Answer: A

Diff: 1 Type: MC Page Ref: 405

Topic: Dementia/Alzheimer's Disease

Skill: Factual

Objective:

- 48) Research suggests that the use of _____ may decrease the risk of developing Alzheimer's Disease. 48) _____
A) codeine B) ibuprofen C) valium D) aspirin

Answer: B

Diff: 1 Type: MC Page Ref: 406

Topic: Dementia/Alzheimer's Disease

Skill: Conceptual

Objective:

- 49) The protein called tau 49) _____
A) is a neurotoxic substance that occurs in the brains of people with Alzheimer's disease.
B) is caused by amyloid in the brain and is a sign that Alzheimer's disease is progressing.
C) is a sticky substance at the core of a plaque.
D) is a neurotransmitter important in the mediation of memory.

Answer: B

Diff: 2 Type: MC Page Ref: 406

Topic: Dementia/Alzheimer's Disease

Skill: Factual

Objective:

- 50) Consistent with its established role in memory, neurons in the _____ suffer much damage in Alzheimer's Disease. 50) _____

A) thalamus B) hippocampus C) hypothalamus D) amygdala

Answer: B

Diff: 1 Type: MC Page Ref: 406

Topic: Dementia/Alzheimer's Disease

Skill: Factual

Objective:

- 51) What type of drugs are most likely to be used to inhibit the progression of Alzheimer's Disease? 51) _____

A) antipsychotics B) nonsteroidal anti-inflammatories
C) antidepressants D) cholinesterase inhibitors

Answer: D

Diff: 2 Type: MC Page Ref: 407

Topic: Dementia/Alzheimer's Disease

Skill: Conceptual

Objective:

- 52) The first neurons to be affected in Alzheimer's Disease are cells that release 52) _____

A) beta amyloid. B) dopamine. C) acetylcholine. D) serotonin.

Answer: C

Diff: 1 Type: MC Page Ref: 407

Topic: Dementia/Alzheimer's Disease

Skill: Factual

Objective:

- 53) A hypothetical drug that might improve the cognitive functioning of Alzheimer's patients would probably 53) _____

A) increase levels of acetylcholine.
B) increase levels of beta amyloid.
C) decrease levels of acetylcholine.
D) decrease the activity of all genes that produce ApoE.

Answer: A

Diff: 1 Type: MC Page Ref: 407

Topic: Dementia/Alzheimer's Disease

Skill: Conceptual

Objective:

- 54) The most promising development in the treatment of Alzheimer's involves 54) _____

A) increasing the intake of vitamins and minerals known to enhance memory function.
B) vaccines that might clear away any accumulated plaques.
C) preventing the degeneration of dopamine-producing cells.
D) finding drugs that counteract the processes associated with inheriting high-risk Apo-E allele patterns.

Answer: B

Diff: 1 Type: MC Page Ref: 407

Topic: Dementia/Alzheimer's Disease

Skill: Conceptual

Objective:

- 55) The best avenue of research for effective treatment of Alzheimer's disease involves _____
- A) regenerating neurons in the brain to replace those lost or damaged by the disorder.
 - B) behavioral therapy to help improve memory and living skills.
 - C) prevention or treatment at the first sign of illness because lost neurons cannot be regained.
 - D) medications to remove plaques, because they cause the symptoms in Alzheimer's disease.

Answer: C

Diff: 2 Type: MC Page Ref: 407

Topic: Dementia/Alzheimer's Disease

Skill: Factual

Objective:

- 56) Caregivers of patients with Alzheimer's Disease _____
- A) are likely to show signs of cognitive deterioration.
 - B) experience "social death."
 - C) are at extraordinarily high risk for depression.
 - D) show high levels of APOE, even if they do not show any outward anxiety symptoms.

Answer: C

Diff: 1 Type: MC Page Ref: 408

Topic: Dementia/Alzheimer's Disease

Skill: Factual

Objective:

- 57) What is the relationship between the HIV-1 virus and brain damage? _____
- A) The virus itself can cause disruptive brain damage.
 - B) The virus works indirectly: it allows infections to occur which cause brain damage.
 - C) The virus is more likely to multiply in a brain that has already been damaged by brain trauma or some other cause of tissue loss.
 - D) The virus does not lead to brain damage, but the disease so affects patients that their psychotic reactions mimic those of brain damage.

Answer: A

Diff: 1 Type: MC Page Ref: 408

Topic: Dementia/Dementia from HIV-1 Infection

Skill: Factual

Objective:

- 58) Dementia in HIV _____
- A) results from acute damage to temporal lobe structures.
 - B) is always due to secondary infections that attack the brain.
 - C) may be due to the HIV virus directly attacking brain cells.
 - D) is a common side effect of antiviral therapy.

Answer: C

Diff: 1 Type: MC Page Ref: 408

Topic: Dementia/Dementia from HIV-1 Infection

Skill: Factual

Objective:

- 59) The neuropathology in AIDS-related dementia _____
- A) involves the formation of plaques and tangles in the brain.
 - B) preferentially affects the frontal and temporal lobes in the brain.
 - C) includes generalized atrophy in the brain.
 - D) tends to result in focal damage in the brain.

Answer: C

Diff: 1 Type: MC Page Ref: 408

Topic: Dementia/Dementia from HIV-1 Infection

Skill: Factual

Objective:

- 60) The only neuropsychological syndrome for which antiviral therapy is likely to be helpful is _____
- A) AIDS-related dementia.
 - B) amnesic disorder.
 - C) multi-infarct dementia.
 - D) vascular dementia.

Answer: A

Diff: 1 Type: MC Page Ref: 408
Topic: Dementia/Dementia from HIV-1 Infection
Skill: Factual
Objective:

- 61) Vascular dementia 61) _____
- A) affects more women than men.
 - B) is a result of many small strokes.
 - C) responds to the same treatments as Alzheimer's Disease.
 - D) is what was once called amnestic infarct dementia.

Answer: B

Diff: 1 Type: MC Page Ref: 408
Topic: Dementia/Vascular Dementia
Skill: Conceptual
Objective:

- 62) How does vascular dementia differs from Alzheimer's Disease? 62) _____
- A) It is not progressive.
 - B) The early clinical picture is more homogeneous than that seen in Alzheimer's Disease.
 - C) Accompanying mood disorders are more common.
 - D) It occurs at an earlier age.

Answer: C

Diff: 1 Type: MC Page Ref: 409
Topic: Dementia/Vascular Dementia
Skill: Conceptual
Objective:

- 63) Vascular dementia less common than Alzheimer's Disease because 63) _____
- A) the patient is vulnerable to sudden death from stroke or cardiovascular disease.
 - B) it develops later in life.
 - C) it can be cured.
 - D) spontaneous remission is common.

Answer: A

Diff: 1 Type: MC Page Ref: 409
Topic: Dementia/Vascular Dementia
Skill: Factual
Objective:

- 64) Which of the following best explains why mood disorders are more characteristic of vascular dementia (VAD) than of Alzheimer's Disease? 64) _____
- A) VAD is more prevalent in women.
 - B) VAD preferentially affects serotonergic cells.
 - C) Subcortical areas are more affected in VAD.
 - D) Medical treatments are less effective in the treatment of VAD.

Answer: C

Diff: 1 Type: MC Page Ref: 409
Topic: Dementia/Vascular Dementia
Skill: Factual
Objective:

- 65) What is affected in amnestic syndrome? 65) _____
- A) the ability to recall something that happened seconds ago
 - B) the ability to recall something that happened hours ago
 - C) the ability to recall something that happened minutes ago
 - D) the ability to recall something that happened years ago

Answer: C

Diff: 1 Type: MC Page Ref: 409

Topic: Amnestic Syndrome

Skill: Factual

Objective:

- 66) Which of the following would someone with amnestic syndrome NOT be able to do? 66) _____
- A) repeat an address they were just told
 - B) describe the house they grew up in
 - C) demonstrate how to ride a bike
 - D) tell you who they met 5 minutes ago

Answer: D

Diff: 1 Type: MC Page Ref: 409

Topic: Amnestic Syndrome

Skill: Applied

Objective:

- 67) "Confabulation" is a term for 67) _____
- A) the making up of events that amnestic patients do to fill in gaps in their memories.
 - B) the abnormal gait that can be an early predictor of vascular dementia.
 - C) the depression that often develops in caregivers of dementia patients.
 - D) the development of delusions in dementia.

Answer: A

Diff: 2 Type: MC Page Ref: 409

Topic: Amnestic Syndrome

Skill: Factual

Objective:

- 68) Procedural memory often is intact in patients with amnestic disorder. This means 68) _____
- A) they will eventually recover their short term memory.
 - B) they will eventually recover their memory for the most important personal events in their lives, but will still have problems with short term memory.
 - C) the memory pathways in the brain are still intact, so patients can be retaught how to remember things.
 - D) they can still learn routines and skills and may be able to be taught tasks that will enable them to work.

Answer: D

Diff: 2 Type: MC Page Ref: 409

Topic: Amnestic Syndrome

Skill: Conceptual

Objective:

- 69) Korsakoff's Syndrome is 69) _____
- A) a subtype of Alzheimer's dementia.
 - B) a form of delirium caused by coronary heart disease.
 - C) the first stage of dementia caused by Parkinson's disease.
 - D) an amnestic disorder often caused by alcoholism.

Answer: D

Diff: 2 Type: MC Page Ref: 432

Topic: Amnestic Syndrome

Skill: Factual

Objective:

- 70) The most common cause of traumatic brain injury is 70) _____
- A) Alzheimer's Disease.
 - B) motor vehicle accidents.
 - C) stroke.
 - D) drug abuse.

Answer: B

Diff: 1 Type: MC Page Ref: 410

Topic: Disorders Involving Head Injury

Skill: Factual

Objective:

- 71) Which of the following is not a cause of traumatic brain injury? 71) _____
A) vitamin deficiency B) assaults
C) sports D) car accidents
Answer: A
Diff: 1 Type: MC Page Ref: 410
Topic: Disorders Involving Head Injury
Skill: Factual
Objective:
- 72) When a closed-head injury occurs 72) _____
A) post-trauma epilepsy is common.
B) the damage is localized.
C) the skull is bruised.
D) the damage is a result of the brain colliding with the skull.
Answer: D
Diff: 1 Type: MC Page Ref: 410
Topic: Disorders Involving Head Injury
Skill: Conceptual
Objective:
- 73) A bullet is most likely to cause 73) _____
A) amnesic disorder. B) a penetrating head injury.
C) multi-infarct dementia. D) a closed-head injury.
Answer: B
Diff: 1 Type: MC Page Ref: 410
Topic: Disorders Involving Head Injury
Skill: Factual
Objective:
- 74) The damage that might be caused to the brain by a violent roller coaster is similar to that seen with 74) _____
A) a penetrating head injury. B) vascular dementia.
C) a closed-head injury. D) a series of circumscribed cerebral infarcts.
Answer: C
Diff: 1 Type: MC Page Ref: 410
Topic: Disorders Involving Head Injury
Skill: Factual
Objective:
- 75) The occurrence of which of the following after a head injury suggests a poor prognosis? 75) _____
A) retrograde amnesia B) contusion
C) anterograde amnesia D) concussion
Answer: C
Diff: 1 Type: MC Page Ref: 410
Topic: Disorders Involving Head Injury
Skill: Factual
Objective:
- 76) After being hit on the head, Bob experienced some retrograde amnesia. Those who were there knew this 76) _____
because he
A) had a concussion. B) was unconscious.
C) could not remember his name. D) did not know what happened.
Answer: D
Diff: 1 Type: MC Page Ref: 410
Topic: Disorders Involving Head Injury
Skill: Factual
Objective:

- 77) The effects of head trauma on memory suggest that 77) _____
A) rarely are episodic memories affected by head trauma.
B) short-term memory is not affected by physical trauma.
C) the process of memory consolidation can be interrupted.
D) semantic memory is usually affected when an injury is severe enough to produce a loss of consciousness.

Answer: C

Diff: 1 Type: MC Page Ref: 410

Topic: Disorders Involving Head Injury

Skill: Conceptual

Objective:

- 78) After the car accident, Sherry was unable to remember what happened from the time of the crash until the following morning. Sherry appears to have experienced 78) _____
A) dissociative fugue. B) anterograde amnesia.
C) retrograde amnesia. D) amnesic disorder.

Answer: B

Diff: 1 Type: MC Page Ref: 410

Topic: Disorders Involving Head Injury

Skill: Factual

Objective:

- 79) The case of Phineas Gage demonstrates 79) _____
A) the importance of a healthy cerebrovascular system.
B) the role of the temporal lobe in controlling behavioral impulses.
C) the role of the brain in determining personality.
D) that even the most serious brain injuries need not lead to permanent alteration in behavior.

Answer: C

Diff: 1 Type: MC Page Ref: 411-412

Topic: Disorders Involving Head Injury

Skill: Conceptual

Objective:

- 80) Emotional dyscontrol and personality alterations are expected with 80) _____
A) amnesic syndrome. B) prolonged oxygen deprivation.
C) vascular dementia. D) frontal lobe damage.

Answer: D

Diff: 1 Type: MC Page Ref: 412

Topic: Disorders Involving Head Injury

Skill: Factual

Objective:

- 81) Phenas Gage had a 81) _____
A) contusion. B) skull fracture.
C) closed-head injury. D) penetrating head injury.

Answer: D

Diff: 1 Type: MC Page Ref: 412

Topic: Disorders Involving Head Injury

Skill: Applied

Objective:

- 82) Before the accident, Bob was unemployed and had few friends. Lionel, who suffered comparable head trauma, was a successful businessman and had just married. Which of these men should have the more favorable outcome and why? 82) _____
A) There is no reason to expect that these men will have different outcomes.
B) Bob, because he will benefit from relearning basic social skills.
C) Bob, because his lack of responsibilities will permit him to focus on getting well.
D) Lionel, because he is more likely to be motivated to recover.

Answer: D

Diff: 3 Type: MC Page Ref: 412

Topic: Disorders Involving Head Injury

Skill: Applied

Objective:

83) Which of the following is probably the most important factor in determining the functioning of a child who undergoes significant traumatic brain injury? 83) _____

A) gender

B) family environment

C) age

D) competencies acquired before the injury

Answer: D

Diff: 2 Type: MC Page Ref: 413

Topic: Disorders Involving Head Injury

Skill: Conceptual

Objective:

84) Favorable outcomes following a traumatic brain injury are associated with all of the following EXCEPT 84) _____

A) experiencing minimal cognitive impairment.

B) having a favorable life situation to return to.

C) being young.

D) early intervention.

Answer: C

Diff: 1 Type: MC Page Ref: 413

Topic: Disorders Involving Head Injury

Skill: Factual

Objective:

85) Which person is least likely to have a good recovery from moderate brain injury? 85) _____

A) Danielle, who had a short period of unconsciousness following the injury.

B) Art, who received treatment interventions shortly after the injury.

C) Wendy, who was a Ph. D. student.

D) Paul, who was severely depressed.

Answer: D

Diff: 1 Type: MC Page Ref: 412

Topic: Disorders Involving Head Injury

Skill: Applied

Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

86) Cognitive disorders are recognized as psychopathological conditions. 86) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 397

Topic:

Skill:

Objective:

87) Depressive symptoms may predict the development of Alzheimer's Disease. 87) _____

Answer: True False

Diff: 2 Type: TF Page Ref: 396

Topic:

Skill:

Objective:

- 88) Functional mental disorders are those that do not require hospitalization or any form of long-term treatment. 88) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 397
Topic:
Skill:
Objective:
- 89) The distinction between organic and functional mental disorders is no longer made as it is understood that the brain is involved in all brain disorders, regardless of their origin. 89) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 397
Topic:
Skill:
Objective:
- 90) Diffuse brain damage often causes widespread damage. 90) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 397
Topic:
Skill:
Objective:
- 91) In general, someone with focal brain damage in the right hemisphere will have trouble solving math problems and processing language. 91) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 398
Topic:
Skill:
Objective:
- 92) Dementia is a rapidly fluctuating condition. 92) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 401
Topic:
Skill:
Objective:
- 93) Delirium has a rapid onset and dementia has a gradual one. 93) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 401
Topic:
Skill:
Objective:
- 94) Delirium after surgery is a good sign – it means the patient is recovering quickly. 94) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 423
Topic:
Skill:
Objective:
- 95) Both Parkinson's Disease and dietary deficiencies can cause dementia. 95) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 401
Topic:
Skill:
Objective:

- 96) Alzheimer's Disease is the most common cause of dementia. 96) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 401
Topic:
Skill:
Objective:
- 97) A diagnosis of Alzheimer's Disease can not be definitively made until after death. 97) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 401
Topic:
Skill:
Objective:
- 98) The onset of Alzheimer's Disease is usually precipitated by some physical ailment or other stressful event. 98) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 403
Topic:
Skill:
Objective:
- 99) The APOE gene on chromosome 19 increases the risk of developing early-onset Alzheimer's disease. 99) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 405
Topic:
Skill:
Objective:
- 100) The plaques seen in Alzheimer's patients are webs of abnormal filaments found within nerve cells. 100) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 406
Topic:
Skill:
Objective:
- 101) Too much of the neurotransmitter acetylcholine causes senile plaques. 101) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 406
Topic:
Skill:
Objective:
- 102) Vascular dementia was once called multi-infarct dementia. 102) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 408
Topic:
Skill:
Objective:
- 103) Most commonly, amnesic syndrome is a consequence of a nutritional deficiency. 103) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 409
Topic:
Skill:
Objective:

- 104) The individual with anterograde amnesia is unable to form new long term memories. 104) _____
 Answer: True False
 Diff: 1 Type: TF Page Ref: 410
 Topic:
 Skill:
 Objective:
- 105) Korsakoff's syndrome is an amnesic disorder usually caused by chronic alcoholism. 105) _____
 Answer: True False
 Diff: 1 Type: TF Page Ref: 432
 Topic:
 Skill:
 Objective:
- 106) Children between the ages of 10 and 17 are at the highest risk for brain injury. 106) _____
 Answer: True False
 Diff: 1 Type: TF Page Ref: 410
 Topic:
 Skill:
 Objective:
- 107) Retrograde amnesia is commonly seen when an injury is severe enough to produce a loss of consciousness. 107) _____
 Answer: True False
 Diff: 1 Type: TF Page Ref: 410
 Topic:
 Skill:
 Objective:
- 108) Dramatic personality changes occur in almost all types of brain injury. 108) _____
 Answer: True False
 Diff: 1 Type: TF Page Ref: 412
 Topic:
 Skill:
 Objective:
- 109) Deficits in premorbid coping are correlated with the degrees of postinjury disability. 109) _____
 Answer: True False
 Diff: 1 Type: TF Page Ref: 412
 Topic:
 Skill:
 Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

- 110) What is meant by the term "organic mental disorders?" Why is this term rarely used today? 110) _____
 Answer: Organic mental disorders are those in which there is an identifiable underlying pathology, such as a tumor or a stroke. As it is now generally accepted that there is a biological basis for all disorders, this distinction is no longer necessary.
 Diff: 1 Type: SA Page Ref: 397
 Topic:
 Skill:
 Objective:

- 111) What factors determine the amount of impairment from brain damage? 111) _____
Answer: The nature, location and extent of the damage, premorbid competence and personality, an individual's life situation and the amount of time since the first appearance of the condition.
Diff: 1 Type: SA Page Ref: 397
Topic:
Skill:
Objective:
- 112) What effects is damage to the frontal areas of the brain likely to have? 112) _____
Answer: Damage to the frontal parts of the brain that are largely involved in the control and planning of movement may result in a passive apathy or impulsiveness and distractibility. Where the damage is and the extent of the damage will determine the ultimate effect on behavior.
Diff: 1 Type: SA Page Ref: 398
Topic:
Skill:
Objective:
- 113) What is delirium? 113) _____
Answer: Delirium is a state of confusion that reflects some major change in how the brain is working. The elderly are at high risk for experiencing delirium. The most common cause of delirium is drug intoxication or withdrawal.
Diff: 1 Type: SA Page Ref: 400
Topic:
Skill:
Objective:
- 114) How can a diagnosis of Alzheimer's disease be definitively made? 114) _____
Answer: A diagnosis of Alzheimer's disease can only be confirmed at autopsy. The presence of amyloid plaques and neurofibrillary tangles in the brain are the hallmarks of the disease.
Diff: 2 Type: SA Page Ref: 401
Topic:
Skill:
Objective:
- 115) What is vascular dementia? 115) _____
Answer: Vascular dementia (VAD) was once known as multi-infarct dementia and results in symptoms that look a lot like Alzheimer's disease. In VAD, however, the problems observed are a consequence of a series of small strokes that kill more and more of the brain.
Diff: 2 Type: SA Page Ref: 408
Topic:
Skill:
Objective:
- 116) What is anterograde amnesia? 116) _____
Answer: Anterograde amnesia is an inability to form new memories.
Diff: 2 Type: SA Page Ref: 410
Topic:
Skill:
Objective:

117) What does the case of Phineas Gage suggest about traumatic brain injury? 117) _____

Answer: Gage survived a blasting accident in which an iron bar went through his brain. He had a severe frontal lobe wound that altered his personality. Where once he was efficient and capable he became impulsive and profane. This illustrates a neuropsychological personality syndrome and is characteristic of frontal lobe damage. Further, Gage was no longer able to return to his former occupation, a common outcome of this kind of brain injury.

Diff: 2 Type: SA Page Ref: 411-412

Topic:

Skill:

Objective:

118) What are the factors that have an impact on the outcome for children with traumatic brain injury? 118) _____

Answer: The younger they are, the more adversely affected. The severity of the damage and the degree to which their environment is accommodating also has an impact. If the injury is mild, most have no lasting effect.

Diff: 2 Type: SA Page Ref: 413

Topic:

Skill:

Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

119) Why are cognitive disorders included in abnormal psychology?

Answer: 1. They are considered psychopathological conditions.
2. They can cause symptoms very similar to other mental disorders.
3. Brain damage can change behavior, personality, mood, etc. and can help in understanding of biological bases of many problems.
4. Many people with brain disorders react with depression or anxiety and depression may be related to onset.
5. These disorders can have heavy impact on family members, often including anxiety and depression.

GRADING RUBRIC: 10 points, 2 points each.

Diff: 2 Type: ES Page Ref: 396

Topic:

Skill:

Objective:

120) Your text lists nine types of impairment that are commonly found in neuropsychological disorders. List and describe five of them.

Answer: 1. Impairment of memory: typically recent events are forgotten rather than remote events; there is a tendency to fill in gaps (confabulate).
2. Impairment of orientation: the person cannot accurately locate himself/herself in time or place or in relation to the personality identities of self or others.
3. Impairment of learning, comprehension, and judgment: the person has trouble understanding abstract ideas or is unable to plan actions.
4. Impairment of emotional control: the person overreacts with extreme emotions such as laughter, tears, or rage.
5. Apathy or emotional blunting: this lack of emotionality usually occurs when deterioration is advanced.
6. Impairment of initiating behavior: the person needs to be repeatedly reminded what to do next.
7. Impaired control over ethical conduct: the person shows lowered standards of appearance, language, sexuality, hygiene, and so on.
8. Impaired communication: inability to comprehend or express oral or written language.
9. Impaired visuospatial ability: poor handwriting or ability to assemble things.

GRADING RUBRIC: 10 points, 2 for each correct answer.

Diff: 2 Type: ES Page Ref: 399

Topic:

Skill:

Objective:

121) Describe delirium and dementia. What are the main differences?

Answer: Delirium has a relatively rapid onset and is caused by a generalized disturbance in brain metabolism. Causal factors include head trauma, oxygen deprivation, drug withdrawal, and toxic and metabolic disturbances. Attention, perception, and memory are affected. Frequently the person becomes agitated and has disturbed sleep. Delirium rarely lasts more than one week. Dementia involves a progressive deterioration of brain function that begins with episodic, short-term memory loss and spreads to include impaired emotional control, motor control, learning, abstract thinking, and other functions. It typically affects older individuals and may be caused by strokes, infections, tumors, head injury, and degenerative diseases, particularly Alzheimer's disease.
GRADING RUBRIC: 10 points, 4 for each description and 2 for the differences.

Diff: 2 Type: ES Page Ref: 400-401

Topic:

Skill:

Objective:

122) What evidence is there that genes are involved in Alzheimer's disease (AD)?

Answer: While the incidence of AD increases with age, there are those who develop AD in their 40s or 50s. This "early-onset" AD appears to have a genetic basis. This form of the disease is usually of rapid onset and course. While early-onset AD appears to run in families, numerous genes have been implicated. Mutations on many different chromosomes have been identified as playing a potential causal role. Genes that code for products that play a role in the development plaques and tangles have been identified. While much has been discovered about this disease, there are many questions that remain unanswered.

GRADING RUBRIC: 8 points total, 4 points each for discussing two different pieces of evidence.

Diff: 2 Type: ES Page Ref: 405-406

Topic:

Skill:

Objective:

- 1) D
- 2) D
- 3) B
- 4) A
- 5) C
- 6) B
- 7) A
- 8) A
- 9) A
- 10) B
- 11) D
- 12) C
- 13) C
- 14) A
- 15) A
- 16) D
- 17) C
- 18) A
- 19) C
- 20) D
- 21) B
- 22) B
- 23) A
- 24) B
- 25) D
- 26) C
- 27) D
- 28) A
- 29) B
- 30) D

- 31) D
- 32) C
- 33) C
- 34) A
- 35) A
- 36) A
- 37) A
- 38) C
- 39) B
- 40) B
- 41) C
- 42) C
- 43) A
- 44) A
- 45) A
- 46) C
- 47) A
- 48) B
- 49) B
- 50) B
- 51) D
- 52) C
- 53) A
- 54) B
- 55) C
- 56) C
- 57) A
- 58) C
- 59) C
- 60) A

- 61) B
- 62) C
- 63) A
- 64) C
- 65) C
- 66) D
- 67) A
- 68) D
- 69) D
- 70) B
- 71) A
- 72) D
- 73) B
- 74) C
- 75) C
- 76) D
- 77) C
- 78) B
- 79) C
- 80) D
- 81) D
- 82) D
- 83) D
- 84) C
- 85) D
- 86) TRUE
- 87) TRUE
- 88) FALSE
- 89) TRUE
- 90) TRUE

- 91) FALSE
- 92) FALSE
- 93) TRUE
- 94) FALSE
- 95) TRUE
- 96) TRUE
- 97) TRUE
- 98) FALSE
- 99) FALSE
- 100) FALSE
- 101) FALSE
- 102) TRUE
- 103) TRUE
- 104) TRUE
- 105) TRUE
- 106) FALSE
- 107) TRUE
- 108) FALSE
- 109) TRUE
- 110) Organic mental disorders are those in which there is an identifiable underlying pathology, such as a tumor or a stroke. As it is now generally accepted that there is a biological basis for all disorders, this distinction is no longer necessary.
- 111) The nature, location and extent of the damage, premorbid competence and personality, an individual's life situation and the amount of time since the first appearance of the condition.
- 112) Damage to the frontal parts of the brain that are largely involved in the control and planning of movement may result in a passive apathy or impulsiveness and distractibility. Where the damage is and the extent of the damage will determine the ultimate effect on behavior.
- 113) Delirium is a state of confusion that reflects some major change in how the brain is working. The elderly are at high risk for experiencing delirium. The most common cause of delirium is drug intoxication or withdrawal.
- 114) A diagnosis of Alzheimer's disease can only be confirmed at autopsy. The presence of amyloid plaques and neurofibrillary tangles in the brain are the hallmarks of the disease.
- 115) Vascular dementia (VAD) was once known as multi-infarct dementia and results in symptoms that look a lot like Alzheimer's disease. In VAD, however, the problems observed are a consequence of a series of small strokes that kill more and more of the brain.
- 116) Anterograde amnesia is an inability to form new memories.

- 117) Gage survived a blasting accident in which an iron bar went through his brain. He had a severe frontal lobe wound that altered his personality. Where once he was efficient and capable he became impulsive and profane. This illustrates a neuropsychological personality syndrome and is characteristic of frontal lobe damage. Further, Gage was no longer able to return to his former occupation, a common outcome of this kind of brain injury.
- 118) The younger they are, the more adversely affected. The severity of the damage and the degree to which their environment is accommodating also has an impact. If the injury is mild, most have no lasting effect.
- 119) 1. They are considered psychopathological conditions.
2. They can cause symptoms very similar to other mental disorders.
3. Brain damage can change behavior, personality, mood, etc. and can help in understanding of biological bases of many problems.
4. Many people with brain disorders react with depression or anxiety and depression may be related to onset.
5. These disorders can have heavy impact on family members, often including anxiety and depression.
GRADING RUBRIC: 10 points, 2 points each.
- 120) 1. Impairment of memory: typically recent events are forgotten rather than remote events; there is a tendency to fill in gaps (confabulate).
2. Impairment of orientation: the person cannot accurately locate himself/herself in time or place or in relation to the personality identities of self or others.
3. Impairment of learning, comprehension, and judgment: the person has trouble understanding abstract ideas or is unable to plan actions.
4. Impairment of emotional control: the person over-reacts with extreme emotions such as laughter, tears, or rage.
5. Apathy or emotional blunting: this lack of emotionality usually occurs when deterioration is advanced.
6. Impairment of initiating behavior: the person needs to be repeatedly reminded what to do next.
7. Impaired control over ethical conduct: the person shows lowered standards of appearance, language, sexuality, hygiene, and so on.
8. Impaired communication: inability to comprehend or express oral or written language.
9. Impaired visuospatial ability: poor handwriting or ability to assemble things.
GRADING RUBRIC: 10 points, 2 for each correct answer.
- 121) Delirium has a relatively rapid onset and is caused by a generalized disturbance in brain metabolism. Causal factors include head trauma, oxygen deprivation, drug withdrawal, and toxic and metabolic disturbances. Attention, perception, and memory are affected. Frequently the person becomes agitated and has disturbed sleep. Delirium rarely lasts more than one week. Dementia involves a progressive deterioration of brain function that begins with episodic, short-term memory loss and spreads to include impaired emotional control, motor control, learning, abstract thinking, and other functions. It typically affects older individuals and may be caused by strokes, infections, tumors, head injury, and degenerative diseases, particularly Alzheimer's disease.
GRADING RUBRIC: 10 points, 4 for each description and 2 for the differences.
- 122) While the incidence of AD increases with age, there are those who develop AD in their 40s or 50s. This "early-onset" AD appears to have a genetic basis. This form of the disease is usually of rapid onset and course. While early-onset AD appears to run in families, numerous genes have been implicated. Mutations on many different chromosomes have been identified as playing a potential causal role. Genes that code for products that play a role in the development plaques and tangles have been identified. While much has been discovered about this disease, there are many questions that remain unanswered.
GRADING RUBRIC: 8 points total, 4 points each for discussing two different pieces of evidence.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Historically, why has little attention been paid to childhood psychopathology? 1) _____
- A) All signs of mental illness in children were assumed to reflect some developmental stage that would be outgrown.
 - B) Childhood disorders were viewed as childhood versions of adult disorders.
 - C) Society viewed children as inherently good and accepted all behavior unconditionally.
 - D) Mental illness was not recognized in children.

Answer: B

Diff: 2 Type: MC Page Ref: 417
Topic: Disorders of Childhood and Adolescence
Skill: Conceptual
Objective:

- 2) Suppose you were the director of a mental health center that provided treatment for children. Based on research, you would expect that 2) _____
- A) the average age of your child clients would be around 5 or 6.
 - B) more girls would be diagnosed with disorders than boys.
 - C) more boys would be diagnosed with disorders than girls.
 - D) the most common disorders diagnosed would be eating disorders and posttraumatic stress disorder.

Answer: C

Diff: 1 Type: MC Page Ref: 417
Topic: Disorders of Childhood and Adolescence
Skill: Applied
Objective:

- 3) Among children, the most commonly diagnosed disorders are 3) _____
- A) attention-deficit hyperactivity disorder and separation anxiety disorders.
 - B) obsessive-compulsive disorder and conduct disorder.
 - C) depression and phobic conditions.
 - D) psychotic conditions such as schizophrenia.

Answer: A

Diff: 1 Type: MC Page Ref: 417
Topic: Disorders of Childhood and Adolescence
Skill: Factual
Objective:

- 4) What complicates the diagnosis of maladaptive behavior in childhood? 4) _____
- A) Drugs are not effective in treating the disorders that are most commonly seen in children.
 - B) The dividing line between childhood and adolescence has been arbitrarily drawn.
 - C) Behavior that is problematic for a child of one age is normal behavior for a child of a different age.
 - D) Most psychological disorders in the young have an identifiable environmental cause.

Answer: C

Diff: 2 Type: MC Page Ref: 417
Topic: Maladaptive Behavior in Different Life Periods
Skill: Conceptual
Objective:

- 5) A crucial aspect of developmental psychopathology is understanding individual maladaptation 5) _____
- A) as a phenomenon no different in children than in adults.
 - B) in a cultural context that determines what is acceptable behavior.
 - C) in the context of normal developmental changes.
 - D) as a disease process.

Answer: C

Diff: 1 Type: MC Page Ref: 417
Topic: Maladaptive Behavior in Different Life Periods
Skill: Conceptual
Objective:

- 6) Suicidal thoughts and behaviors in children are not rare. The leading cause is 6) _____
- A) inherited biological problems.
 - B) a diagnosis of ADHD.
 - C) difficult family relationships.
 - D) school failure.

Answer: C

Diff: 2 Type: MC Page Ref: 441
Topic: Maladaptive Behavior in Different Life Periods
Skill: Factual
Objective:

- 7) Which of the following both protects children from environmental stressors, but also makes them more vulnerable? 7) _____
- A) a lack of self-understanding
 - B) a limited understanding of death
 - C) unrealistic expectations
 - D) dependence on adults

Answer: D

Diff: 2 Type: MC Page Ref: 418
Topic: Maladaptive Behavior/Special Vulnerabilities of Young
Skill: Factual
Objective:

- 8) A young child who tries to kill him/herself 8) _____
- A) is depressed and really wants to die.
 - B) is doing it to try to manipulate adults, not because he/she really wants to die.
 - C) may have unrealistic beliefs about death and not really understand what it means to die.
 - D) is probably more mature and aware than most children their age.

Answer: C

Diff: 2 Type: MC Page Ref: 418
Topic: Maladaptive Behavior/Special Vulnerabilities of Young
Skill: Conceptual
Objective:

- 9) What was the greatest problem that emerged as a classification system for childhood disorders was being developed? 9) _____
- A) The role of parents in the development of disordered behavior was overemphasized.
 - B) The same classification system that had been developed for adults was used for children.
 - C) Few childhood disorders had been identified.
 - D) There was a hesitancy to identify childhood disorders as parents were likely to be blamed for any diagnosis given.

Answer: B

Diff: 2 Type: MC Page Ref: 418
Topic: The Classification of Childhood and Adolescent Disorders
Skill: Factual
Objective:

- 10) Children with ADHD that have symptoms of hyperactivity 10) _____
- A) are usually well liked by their peers because they become "class clowns."
 - B) are usually viewed negatively by their peers because of their behaviors.
 - C) are usually viewed negatively by their peers because they are socially withdrawn.
 - D) are usually well liked by their peers because they are always active.

Answer: B

Diff: 2 Type: MC Page Ref: 419
Topic: Disorders of Childhood/Attention-Deficit/Hyperactivity
Skill: Factual
Objective:

- 11) Attention-deficit hyperactivity disorder (ADHD) 11) _____
- A) is thought to occur in about 10 percent of school-aged children.
 - B) is commonly diagnosed after the age of 15.
 - C) is seen equally in boys and girls.
 - D) is the most frequent psychological referral to mental health facilities.

Answer: D

Diff: 1 Type: MC Page Ref: 419
Topic: Disorders of Childhood/Attention-Deficit/Hyperactivity
Skill: Factual
Objective:

- 12) Attention-deficit hyperactivity disorder is characterized by 12) _____
- A) mild to moderate mental retardation.
 - B) an increasing frequency from age six to age sixteen.
 - C) a greater frequency in girls than in boys.
 - D) difficulties that interfere with effective task-oriented behavior.

Answer: D

Diff: 1 Type: MC Page Ref: 419
Topic: Disorders of Childhood/Attention-Deficit/Hyperactivity
Skill: Factual
Objective:

- 13) George is in 2nd grade and is having trouble. He frequently is out of his seat, looking at the work of other students and annoying them by making comments. He interrupts the teacher, blurts out answers before she finishes the question and usually needs directions repeated multiple times. At home, his mother says he is always "on the go." The most likely diagnosis for George is 13) _____
- A) separation anxiety disorder.
 - B) attention-deficit hyperactivity disorder.
 - C) conduct disorder.
 - D) oppositional defiant disorder.

Answer: B

Diff: 2 Type: MC Page Ref: 419
Topic: Disorders of Childhood/Attention-Deficit/Hyperactivity
Skill: Applied
Objective:

- 14) Currently, the cause of ADHD is believed to be 14) _____
- A) an allergic reaction to certain foods and food additives.
 - B) a combination of family pathology and poor peer modeling.
 - C) excessive sugar in the diet.
 - D) both biological and psychological factors.

Answer: D

Diff: 1 Type: MC Page Ref: 419-420
Topic: Disorders of Childhood/Attention-Deficit/Hyperactivity
Skill: Factual
Objective:

- 15) Which of the following is NOT a subtype of ADHD found in the DSM-IV-TR? 15) _____
- A) Hyperactive/Impulsive Type
 - B) Predominantly Inattentive Type
 - C) Combined Type
 - D) Inattentive/Impulsive Type

Answer: D

Diff: 1 Type: MC Page Ref: 420
Topic: Disorders of Childhood/Attention-Deficit/Hyperactivity
Skill: Factual
Objective:

- 16) Treatment of ADHD with drugs such as Ritalin is thought to be effective as it 16) _____
A) acts as a sedative. B) increases the ability to concentrate.
C) interferes with glutamate activity. D) quiets the voices.

B

Answer:

Diff: 2 Type: MC Page Ref: 420
Topic: Disorders of Childhood/Attention-Deficit/Hyperactivity
Skill: Conceptual
Objective:

- 17) The evidence suggests that medications for ADHD 17) _____
A) only work for children who have had the diagnosis at least two years.
B) work well for both the short- and long-term.
C) really don't work at all□what is seen is due to the placebo effect.
D) work well for the short-term but show little long-term effect.

Answer: D

Diff: 2 Type: MC Page Ref: 421
Topic: Disorders of Childhood/Attention-Deficit/Hyperactivity
Skill: Factual
Objective:

- 18) In studies looking at the effectiveness of treatment for ADHD, what was found? 18) _____
A) Cognitive-behavioral therapy is more effective than behavioral modification.
B) While good results are achieved when medication is combined with therapy, the therapy appears to be the more effective element of the treatment.
C) The use of medications interferes with the effectiveness of behavioral approaches.
D) While good results are achieved when medication is combined with therapy, the medication appears to be the more effective element of the treatment.

Answer: D

Diff: 2 Type: MC Page Ref: 421
Topic: Disorders of Childhood/Attention-Deficit/Hyperactivity
Skill: Factual
Objective:

- 19) As children with ADHD become adolescents and adults, 19) _____
A) those with hyperactivity tend to get worse, the rest get better.
B) most get worse.
C) they outgrow their ADHD symptoms.
D) many continue to experience symptoms.

Answer: D

Diff: 1 Type: MC Page Ref: 421
Topic: Disorders of Childhood/Attention-Deficit/Hyperactivity
Skill: Factual
Objective:

- 20) What two childhood disorders are characterized by aggressive or antisocial behavior? 20) _____
A) oppositional defiant disorder and conduct disorder
B) conduct disorder and childhood depression
C) attention-deficit hyperactivity disorder and oppositional defiant disorder
D) attention-deficit hyperactivity disorder and childhood depression

Answer: A

Diff: 1 Type: MC Page Ref: 421
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Factual
Objective:

- 21) The term "juvenile delinquent" is _____ 21) _____
- A) defined by the legal system.
 - B) rarely used in modern times.
 - C) used when a diagnosis of early-onset antisocial personality disorder has been made.
 - D) inconsistent with the diagnostic criteria for conduct disorder.
- A

Answer:

Diff: 1 Type: MC Page Ref: 421
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Factual
Objective:

- 22) Brad has been diagnosed with oppositional defiant disorder (ODD). The disorder began around age 12 and is characterized by disobedient and hostile behavior toward authority figures. What aspect of this case is unusual? _____ 22) _____
- A) Nothing about this case is unusual.
 - B) It is unusual for children with ODD to be boys.
 - C) It is unusual for the onset of ODD to occur at age 12.
 - D) It is unusual for children with ODD to be hostile toward authority figures.

Answer: C

Diff: 2 Type: MC Page Ref: 422
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Applied
Objective:

- 23) _____ is to antisocial personality disorder as _____ is to conduct disorder. _____ 23) _____
- A) ADHD; conduct disorder
 - B) ODD; conduct disorder
 - C) Conduct disorder; ADHD
 - D) Conduct disorder; ODD

Answer: D

Diff: 2 Type: MC Page Ref: 422
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Conceptual
Objective:

- 24) What is the relationship between oppositional defiant disorder and conduct disorder? _____ 24) _____
- A) Almost every case of oppositional defiant disorder develops into conduct disorder.
 - B) Before children develop oppositional defiant disorder, they have conduct disorder first.
 - C) Virtually all children who develop conduct disorder have oppositional defiant disorder first.
 - D) Children who develop conduct disorder almost never had oppositional defiant disorder.

Answer: C

Diff: 1 Type: MC Page Ref: 422
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Factual
Objective:

- 25) Which behavior pattern is extremely unlikely to be found in a child with conduct disorder? _____ 25) _____
- A) depression
 - B) firesetting and vandalism
 - C) substance abuse
 - D) constant worry about minor issues

Answer: D

Diff: 1 Type: MC Page Ref: 422
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Factual
Objective:

- 26) What is the self-perpetuating cycle in conduct disorder? 26) _____
- A) A genetic predisposition leads to an easy temperament but because of abusive parents, this leads to depression which in turn leads to conduct disorder.
 - B) A genetic predisposition leads to a difficult temperament, which leads to behavior problems, which lead to parental overindulgence and lack of discipline, which leads to conduct disorder.
 - C) A genetic predisposition leads to an easy temperament, which leads to parental neglect, which leads to anxiety, which leads to conduct disorder.
 - D) A genetic predisposition leads to a low IQ and difficult temperament, which leads to poor parenting and an insecure attachment, which leads to conduct disorder.

Answer: D

Diff: 2 Type: MC Page Ref: 422-423
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Conceptual
Objective:

- 27) All of the following are risk factors for ODD and conduct disorder EXCEPT 27) _____
- A) familial dysfunction.
 - B) childhood obesity.
 - C) parental psychopathology.
 - D) economic disadvantage.

Answer: B

Diff: 1 Type: MC Page Ref: 423
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Factual
Objective:

- 28) The development of conduct disorder in adolescence 28) _____
- A) commonly occurs in teens who suffer from ADHD.
 - B) rarely occurs.
 - C) is not associated with lasting behavioral problems.
 - D) predicts the development of other psychopathology in adulthood.

Answer: C

Diff: 2 Type: MC Page Ref: 423
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Factual
Objective:

- 29) Which of the following statements about early-onset conduct disorder is true? 29) _____
- A) Environmental factors predict whether or not the disorder persists.
 - B) Most will develop antisocial personality disorder.
 - C) Later problems are not likely.
 - D) The majority will continue to have, at minimum, social dysfunction as adults.

Answer: D

Diff: 2 Type: MC Page Ref: 423
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Factual
Objective:

- 30) Artiss developed conduct disorder early. Bertram developed conduct disorder late. This suggests that 30) _____
- A) Artiss will have a higher likelihood of adult antisocial personality disorder.
 - B) Bertram will have a higher likelihood of social dysfunctions.
 - C) Bertram will show more severe neuropsychological deficits and attentional problems.
 - D) Artiss will have a higher level of intelligence.

Answer: A

Diff: 2 Type: MC Page Ref: 423
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Applied
Objective:

- 31) Research on the families of children with conduct disorder suggests that 31) _____
- A) environmental factors are rarely involved in disorders of childhood onset.
 - B) genetics do not play a role in the development of antisocial tendencies.
 - C) parental substance abuse is the greatest risk factor for early-onset conduct disorder.
 - D) antisocial behavioral patterns may be learned.

Answer: D

Diff: 2 Type: MC Page Ref: 423
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Conceptual
Objective:

- 32) The families of children with conduct disorders typically 32) _____
- A) accept the child's behavior as "normal."
 - B) provide the child with harsh but consistent discipline.
 - C) are overprotective.
 - D) involve rejection and neglect.

Answer: D

Diff: 1 Type: MC Page Ref: 423
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Factual
Objective:

- 33) Divorce, hostility, and lack of monitoring are family characteristics most closely associated with 33) _____
- A) separation anxiety disorder.
 - B) attention-deficit hyperactivity disorder.
 - C) conduct disorder.
 - D) autism.

Answer: C

Diff: 1 Type: MC Page Ref: 423
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Factual
Objective:

- 34) Punitive approaches to antisocial youth are 34) _____
- A) effective at "teaching the child a lesson."
 - B) effective when intervention occurs before adolescence.
 - C) likely to make problems worse.
 - D) not the norm.

Answer: C

Diff: 1 Type: MC Page Ref: 424
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Factual
Objective:

- 35) The cohesive family model is a treatment strategy for the child with conduct disorder that 35) _____
- A) teaches the child basic moral lessons.
 - B) combines punitive and therapeutic interventions.
 - C) proposes that dysfunctional interactions have served to maintain the child's problematic behavior.
 - D) focuses on how the child's behavior elicits negative responses from other family members.

Answer: C

Diff: 2 Type: MC Page Ref: 424
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Conceptual
Objective:

- 36) Effective treatments for conduct disorder usually involve _____ 36) _____
- A) legal intervention.
 - B) parental participation.
 - C) removing the child from the environment that has fostered the maladaptive behavior.
 - D) teaching the child basic moral lessons.

Answer: B

Diff: 1 Type: MC Page Ref: 424
Topic: Disorders of Childhood/ODD and Conduct Disorder
Skill: Conceptual
Objective:

- 37) Separation anxiety disorder is best illustrated by which of the following people? 37) _____
- A) Chuck, who is afraid he will be beaten by bullies at school.
 - B) Isabella, who worries that her father will die if she is not near him.
 - C) Harriet, who refuses to talk to her teachers or other adults other than her parents.
 - D) Thomas, who is fiercely independent of other children and his parents.

Answer: B

Diff: 2 Type: MC Page Ref: 425
Topic: Disorders of Childhood/Anxiety Disorders
Skill: Applied
Objective:

- 38) The most common childhood anxiety disorder is _____. 38) _____
- A) generalized anxiety disorder
 - B) depression
 - C) selective mutism
 - D) separation anxiety

Answer: D

Diff: 1 Type: MC Page Ref: 425
Topic: Disorders of Childhood/Anxiety Disorders
Skill: Factual
Objective:

- 39) Which statement about separation anxiety disorder is accurate? 39) _____
- A) It is a severe but extremely rare form of childhood anxiety disorder.
 - B) The child with separation anxiety is likely to be immature and lack self-confidence.
 - C) The disorder is equally common in boys and girls.
 - D) Children who have the disorder commonly develop antisocial personality disorder as adults.

Answer: B

Diff: 1 Type: MC Page Ref: 425
Topic: Disorders of Childhood/Anxiety Disorders
Skill: Factual
Objective:

- 40) Children with separation anxiety disorder _____ 40) _____
- A) fear impending separation but are fine once it actually happens.
 - B) have a school phobia.
 - C) frequently develop conduct disorder as a result.
 - D) fear separation from major attachment figures and worry they will die once it happens.

Answer: D

Diff: 1 Type: MC Page Ref: 425
Topic: Disorders of Childhood/Anxiety Disorders
Skill: Factual
Objective:

- 41) Justine has the ability to speak and knows the language. However, for more than six months she has refused to speak to her teacher or any adult other than her parents. The best diagnosis for Justine is probably _____
- A) separation anxiety disorder.
 - B) antisocial personality disorder.
 - C) autism.
 - D) selective mutism.
- Answer: D
Diff: 1 Type: MC Page Ref: 426
Topic: Disorders of Childhood/Anxiety Disorders
Skill: Applied
Objective:
- 42) In order to make a diagnosis of selective mutism _____
- A) other developmental delays must be ruled out.
 - B) the child must be at least four years old.
 - C) the condition must persist for at least 2 months.
 - D) the child must know the language.
- Answer: D
Diff: 1 Type: MC Page Ref: 426
Topic: Disorders of Childhood/Anxiety Disorders
Skill: Factual
Objective:
- 43) Which of the following is most likely to be used in the treatment of selective mutism? _____
- A) extinction
 - B) individual therapy
 - C) medications
 - D) family therapy
- Answer: D
Diff: 1 Type: MC Page Ref: 426
Topic: Disorders of Childhood/Anxiety Disorders
Skill: Factual
Objective:
- 44) Childhood anxiety disorders are associated with each of the following factors EXCEPT _____
- A) an unusual constitutional sensitivity.
 - B) maladaptive learning from an overprotective parent.
 - C) a deficit in conditionability to aversive stimuli.
 - D) moving to a new school.
- Answer: C
Diff: 1 Type: MC Page Ref: 426
Topic: Disorders of Childhood/Anxiety Disorders
Skill: Factual
Objective:
- 45) Evidence that culture plays a role in the development of childhood anxiety disorders comes from the fact that _____
- A) children from cultures that favor independence report more fears.
 - B) children from cultures that favor inhibition and compliance report more fears.
 - C) overanxious children rarely have overanxious parents.
 - D) African American children rarely show symptoms of PTSD.
- Answer: B
Diff: 1 Type: MC Page Ref: 427
Topic: Disorders of Childhood/Anxiety Disorders
Skill: Factual
Objective:
- 46) Anxiety disorders of childhood _____
- A) show few cross-cultural differences.
 - B) typically do not lead to problems later in life.
 - C) tend to persist into adulthood.
 - D) are usually effectively treated with drugs.

Answer: B

Diff: 1 Type: MC Page Ref: 427
Topic: Disorders of Childhood/Anxiety Disorders
Skill: Factual
Objective:

- 47) What type of behavioral therapy is most likely to be used in the treatment of child with an anxiety disorder? 47) _____
- A) A combination of Ritalin and family therapy.
 - B) Behavior therapy that includes assertiveness training and desensitization using graded real-life situations.
 - C) A group therapy in which anxious children are taught to ignore their anxious feelings.
 - D) Behavior therapy that includes a generalized desensitization to fearful situations using Ruthanne's imagination to picture these situations.

Answer: B

Diff: 1 Type: MC Page Ref: 427
Topic: Disorders of Childhood/Anxiety Disorders
Skill: Applied
Objective:

- 48) Childhood and adult depression differ in what way? 48) _____
- A) Altered hormone levels are not seen in children.
 - B) Adult depression does not remit without pharmacological intervention.
 - C) Irritability is often seen as a major symptom in childhood depression.
 - D) Altered eating habits are not seen in childhood depression.

Answer: C

Diff: 1 Type: MC Page Ref: 427
Topic: Disorders of Childhood/Childhood Depression
Skill: Factual
Objective:

- 49) Currently, there has been an increase in the diagnosis of what disorder in children? 49) _____
- A) bipolar disorder
 - B) schizophrenia
 - C) panic disorder with agoraphobia
 - D) dissociative identity disorder

Answer: A

Diff: 1 Type: MC Page Ref: 451
Topic: Childhood Depression and Bipolar Disorder
Skill: Factual
Objective:

- 50) Research on the effects of parental depression 50) _____
- A) suggests that parental psychopathology leads to changes in parenting behavior that has lasting effects on children.
 - B) indicates that the influence of peers is greater than that of parents.
 - C) does not indicate that environmental factors play a role in the development of childhood depression.
 - D) confirms that genes play a role in the etiology of childhood depression.

Answer: A

Diff: 1 Type: MC Page Ref: 428
Topic: Disorders of Childhood/Childhood Depression
Skill: Conceptual
Objective:

- 51) It is believed that depressed mothers negatively affect their infants because they 51) _____
- A) tend to blame themselves when, in fact, the children have made mistakes.
 - B) engage in impulsive, antisocial behaviors which the children mimic.
 - C) respond less sensitively to their children and show more irritable behavior.
 - D) are overly intrusive with their children, depending upon the child rather than allowing the child to depend upon them.

Answer: C

Diff: 1 Type: MC Page Ref: 429
Topic: Disorders of Childhood/Childhood Depression
Skill: Factual
Objective:

- 52) Childhood depression is likely to persist because 52) _____
- A) positive events are unlikely to occur.
 - B) most treatments are not effective.
 - C) lasting changes occur in the brain.
 - D) an attributional style is adopted that maintains a negative mood state.

Answer: D

Diff: 1 Type: MC Page Ref: 429
Topic: Disorders of Childhood/Childhood Depression
Skill: Conceptual
Objective:

- 53) Juliet is a depressed child. When she wins a prize at school for her art project, how is she likely to explain it? 53) _____
- A) I was the best.
 - B) I worked hard.
 - C) I got lucky.
 - D) My teacher likes me.

Answer: C

Diff: 1 Type: MC Page Ref: 429
Topic: Disorders of Childhood/Childhood Depression
Skill: Applied
Objective:

- 54) Research on the effectiveness of antidepressants for the treatment of childhood depression 54) _____
- A) suggests that children experience more side effects from these medications than adults.
 - B) indicates that there is not a biological basis for childhood depression.
 - C) demonstrates that drugs are just as effective as therapy.
 - D) has been inconclusive.

Answer: D

Diff: 1 Type: MC Page Ref: 429
Topic: Disorders of Childhood/Childhood Depression
Skill: Factual
Objective:

- 55) Studies of the effectiveness of antidepressant medication with children have 55) _____
- A) a major drawback: children develop tolerance to the drugs and become psychologically dependent on them.
 - B) shown that Prozac is extremely effective in producing long-term symptom relief.
 - C) produced inconsistent results.
 - D) indicated that while these drugs have few side effects, neither do they have any benefits.

Answer: C

Diff: 2 Type: MC Page Ref: 429
Topic: Disorders of Childhood/Childhood Depression
Skill: Factual
Objective:

- 56) Suicidal behavior in children and adolescents 56) _____
- A) should be ignored as manipulative behavior.
 - B) may be increased by taking SSRIs.
 - C) is extremely rare.
 - D) is usually not related to depression.

Answer: B

Diff: 2 Type: MC Page Ref: 429
Topic: Disorders of Childhood/Childhood Depression
Skill: Factual
Objective:

57) _____ are a group of severely disabling conditions in children that are considered to be the result of structural differences in the brain and usually apparent at birth or as the child begins to develop. 57) _____

- A) Symptom disorders
- B) Conduct disorders
- C) Pervasive developmental disorders
- D) Tic disorders

Answer: C

Diff: 1 Type: MC Page Ref: 429
Topic: Disorders of Childhood/Pervasive Developmental Disorders
Skill: Factual
Objective:

58) Asperger's disorder is 58) _____

- A) an extreme tic disorder.
- B) similar to but less severe than autism.
- C) a severe form of conduct disorder.
- D) what was once called "autism."

Answer: B

Diff: 1 Type: MC Page Ref: 429
Topic: Disorders of Childhood/Pervasive Developmental Disorders
Skill: Factual
Objective:

59) The hallmark symptom of autism is 59) _____

- A) strange behaviors.
- B) lack of interest in other people.
- C) lack of language.
- D) mental retardation.

Answer: B

Diff: 1 Type: MC Page Ref: 430
Topic: Disorders of Childhood/Pervasive Developmental Disorders
Skill: Factual
Objective:

60) Autism is similar to schizophrenia in its 60) _____

- A) responsiveness to treatment.
- B) impact on multiple functions.
- C) biological basis.
- D) age of onset.

Answer: B

Diff: 1 Type: MC Page Ref: 430
Topic: Disorders of Childhood/Pervasive Developmental Disorders
Skill: Conceptual
Objective:

61) We are likely to find that most of the children with autistic disorder 61) _____

- A) were identified as having the disorder before they were three years old.
- B) are girls.
- C) also suffer from depression, tic disorders, and other forms of psychopathology.
- D) come from poverty-stricken environments.

Answer: A

Diff: 1 Type: MC Page Ref: 430
Topic: Disorders of Childhood/Pervasive Developmental Disorders
Skill: Conceptual
Objective:

- 62) William is an autistic child. He is probably _____
A) severely lacking in emotional expression.
B) relatively withdrawn and uncommunicative.
C) unable to utter any meaningful sounding words.
D) aggressive and frequently attacks others.

Answer: B

Diff: 1 Type: MC Page Ref: 430

Topic: Disorders of Childhood/Pervasive Developmental Disorders

Skill: Applied

Objective:

- 63) Children with _____ are believed to be "mind blind," that is, they cannot take the attitude of or "see" _____
things as others do. They are also deficient at locating and orienting to sounds in their environment.
A) attention-deficit hyperactivity disorder B) autistic disorder
C) separation anxiety disorder D) childhood disorder

Answer: B

Diff: 1 Type: MC Page Ref: 430

Topic: Disorders of Childhood/Pervasive Developmental Disorders

Skill: Factual

Objective:

- 64) Which of the following is a possible explanation for the seeming lack of emotion in autistic children? _____
A) immaturity—they will show more as they get older
B) they have no emotions
C) they have a lack of social understanding
D) neurological impairment—they can feel but not show emotions

Answer: C

Diff: 1 Type: MC Page Ref: 430

Topic: Disorders of Childhood/Pervasive Developmental Disorders

Skill: Conceptual

Objective:

- 65) In autistic children, head banging, spinning in circles, and rocking are behaviors that _____
A) are exceedingly rare.
B) are common forms of self-stimulation.
C) are used because these children find repetitive routines very aversive.
D) are believed to be ways of communicating without language.

Answer: B

Diff: 1 Type: MC Page Ref: 430

Topic: Disorders of Childhood/Pervasive Developmental Disorders

Skill: Factual

Objective:

- 66) Despite what is shown in movies like Rain Man, most autistic children would not cope well being brought _____
to a Las Vegas casino for the first time, because
A) they are afraid of large groups of people.
B) they would be so excited by all the sights and sounds they would become over-agitated.
C) they would want to touch things they weren't allowed to touch.
D) they often show aversion to auditory stimulation and prefer a limited and solitary routine.

Answer: D

Diff: 2 Type: MC Page Ref: 431-432

Topic: Disorders of Childhood/Pervasive Developmental Disorders

Skill: Applied

Objective:

- 67) Which of the following would be most distressing to a child with autism? 67) _____
A) an everyday routine that stays the same B) soft, monotonous sounds
C) altering a familiar environment D) not having a normal sleep pattern
Answer: C
Diff: 2 Type: MC Page Ref: 431-432
Topic: Disorders of Childhood/Pervasive Developmental Disorders
Skill: Applied
Objective:
- 68) Autism 68) _____
A) is one of the most strongly genetic disorders in the DSM-IV.
B) is due to environmental factors like family environment.
C) has both genetic and environmental causes.
D) is caused by exposure to chemical toxins during early development.
Answer: A
Diff: 2 Type: MC Page Ref: 432
Topic: Disorders of Childhood/Pervasive Developmental Disorders
Skill: Factual
Objective:
- 69) Autism, like schizophrenia, appears to be 69) _____
A) not inherited.
B) one of a spectrum of disorders that are genetically related.
C) best treated by antipsychotic medications.
D) a very unreliable diagnosis.
Answer: B
Diff: 2 Type: MC Page Ref: 456
Topic: Disorders of Childhood/Pervasive Developmental Disorders
Skill: Factual
Objective:
- 70) Drug treatment for autistic disorder has been found to be 70) _____
A) extremely beneficial when neuroleptics like haloperidol are used.
B) extremely beneficial when a hormone replacement drug is used.
C) contra-indicated since they tend to make the children withdraw even further.
D) of some value in reducing aggressive behaviors.
Answer: D
Diff: 1 Type: MC Page Ref: 433
Topic: Disorders of Childhood/Pervasive Developmental Disorders
Skill: Factual
Objective:
- 71) The extremely intensive experimental behavior program designed by Ivar Lovaas for children with autism 71) _____
A) helped almost half of the children in the treatment program achieve normal intellectual functioning.
B) has not proven successful.
C) has shown promise, but not as much as medications.
D) helped most of the parents of autistic children learn to cope better with their children.
Answer: A
Diff: 2 Type: MC Page Ref: 433
Topic: Disorders of Childhood/Pervasive Developmental Disorders
Skill: Factual
Objective:
- 72) Despite studies such as by Ivar Lovaas, the overall prognosis for children with autism is 72) _____
A) most will steadily improve as they age and become independent.
B) most will be able to live on their own and work at low-level jobs.
C) poor.
D) extremely positive.

Answer: C

Diff: 2 Type: MC Page Ref: 433
Topic: Disorders of Childhood/Pervasive Developmental Disorders
Skill: Factual
Objective:

- 73) Jenny has an IQ in the average range. However, at school she is doing very badly. She has consistently scored at 2 or more grade levels below the grade she is actually in. From this, a diagnostician would hypothesize that Jenny _____
- A) most likely has mental retardation.
 - B) most likely has an anxiety disorder.
 - C) most likely does not have a learning disability because her IQ is only average.
 - D) most likely has a learning disability.

Answer: D

Diff: 1 Type: MC Page Ref: 434
Topic: Learning Disorders
Skill: Applied
Objective:

- 74) By definition, learning disorders _____
- A) reflect a developmental delay.
 - B) can not be treated medically.
 - C) are not due to a physical defect.
 - D) are present before the age of 5.

Answer: C

Diff: 1 Type: MC Page Ref: 434
Topic: Learning Disorders
Skill: Factual
Objective:

- 75) The most widely known and studied learning disorder is _____
- A) mental retardation.
 - B) conduct disorder.
 - C) autism.
 - D) dyslexia.

Answer: D

Diff: 1 Type: MC Page Ref: 434
Topic: Learning Disorders
Skill: Factual
Objective:

- 76) A learning disability usually is identified _____
- A) because a child shows a disparity between their actual academic achievement and their expected academic achievement.
 - B) because teachers and school administrators are on the watch for the signs.
 - C) because the child has been doing very well in school for several years and then suddenly starts failing.
 - D) because a child begins to show significant emotional problems, fails and begins to hate school.

Answer: A

Diff: 2 Type: MC Page Ref: 434
Topic: Learning Disorders
Skill: Factual
Objective:

- 77) An asymmetry in brain development has been hypothesized to be a cause of _____
- A) ADHD.
 - B) learning disabilities.
 - C) autism.
 - D) selective mutism.

Answer: B

Diff: 1 Type: MC Page Ref: 434
Topic: Learning Disorders
Skill: Factual
Objective:

- 78) When symptoms of mental retardation are not apparent until after age 17, 78) _____
A) the diagnosis would be dementia, not mental retardation.
B) the retardation is almost always at least moderate and often severe.
C) the treatment for retardation is more successful.
D) the level of retardation is typically mild.

Answer: A

Diff: 1 Type: MC Page Ref: 435

Topic: Mental Retardation

Skill: Factual

Objective:

- 79) With respect to how they function in relationships, an individual with mild mental retardation is most 79) _____
comparable to
A) an average seven-year-old. B) an average eleven-year-old.
C) an adolescent. D) an intelligent ten-year-old.

Answer: C

Diff: 1 Type: MC Page Ref: 436

Topic: Learning Disorders

Skill: Conceptual

Objective:

- 80) Ron works as a custodian's helper at a school, under supervision of the custodian. Ron can read and write 80) _____
his name, and can read first grade books. He moves slowly and sometimes with difficulty. Ron most likely
has
A) severe mental retardation. B) profound mental retardation.
C) moderate mental retardation. D) mild mental retardation.

Answer: C

Diff: 1 Type: MC Page Ref: 436-437

Topic: Mental Retardation

Skill: Applied

Objective:

- 81) Genetic factors 81) _____
A) are involved only in cases of profound retardation.
B) are very common in most levels of retardation.
C) are involved only in Down syndrome.
D) are clearly involved in the more severe forms of retardation.

Answer: D

Diff: 2 Type: MC Page Ref: 437

Topic: Mental Retardation

Skill: Factual

Objective:

- 82) Individuals with Down syndrome typically show which of the following characteristics? 82) _____
A) Their cranium fills with an abnormal amount of cerebrospinal fluid.
B) They have extremely small heads and brains.
C) They have large tongues and short fingers.
D) Their eyes, skin, and hair are very pale.

Answer: C

Diff: 1 Type: MC Page Ref: 438-439

Topic: Mental Retardation/Organic Retardation Syndromes

Skill: Factual

Objective:

- 83) The long held belief that children with Down syndrome are especially placid and loving 83) _____
A) has been supported by research. B) has been shown to be invalid by research.
C) is only true for those with higher IQs. D) is only true for those with lower IQs.

Answer: B

Diff: 1 Type: MC Page Ref: 439
Topic: Mental Retardation/Organic Retardation Syndromes
Skill: Factual
Objective:

- 84) The incidence of Down syndrome increases 84) _____
- A) when the mother is exposed to lead during pregnancy.
 - B) as the age of the parents increases.
 - C) when the mother drinks heavily during pregnancy.
 - D) if the father is extremely young.

Answer: B

Diff: 2 Type: MC Page Ref: 440
Topic: Mental Retardation/Organic Retardation Syndromes
Skill: Factual
Objective:

- 85) Children born with phenylketonuria, 85) _____
- A) appear normal.
 - B) have characteristic facial features.
 - C) are destined to develop severe or profound retardation.
 - D) exhibit abnormal movements and vocalizations.

Answer: A

Diff: 1 Type: MC Page Ref: 440
Topic: Mental Retardation/Organic Retardation Syndromes
Skill: Applied
Objective:

- 86) Phenylketonuria can be used to illustrate 86) _____
- A) how nature and nurture interact.
 - B) the importance of early detection of chromosomal anomalies.
 - C) why women should give birth at an early age.
 - D) the dramatic effects of prenatal malnutrition.

Answer: A

Diff: 2 Type: MC Page Ref: 440
Topic: Mental Retardation/Organic Retardation Syndromes
Skill: Conceptual
Objective:

- 87) Urine testing allows for the early detection of _____ and its treatment which consists of _____. 87) _____
- A) macrocephaly; surgery to remove excess fluid
 - B) phenylketonuria; a low-phenylalanine diet
 - C) Down Syndrome; behavior therapy
 - D) Down Syndrome; the drug tacrine

Answer: B

Diff: 1 Type: MC Page Ref: 440
Topic: Mental Retardation/Organic Retardation Syndromes
Skill: Factual
Objective:

- 88) Microcephaly and macrocephaly have what in common? 88) _____
- A) They are due to recessive genes.
 - B) They involve alterations in head size and shape.
 - C) They are caused by an abnormal accumulation of cerebrospinal fluid in the cranium.
 - D) They are associated with older parental age.

Answer: B

Diff: 1 Type: MC Page Ref: 440
Topic: Mental Retardation/Organic Retardation Syndromes
Skill: Factual
Objective:

- 89) Shortly after birth, Darren's head began to grow. At age 5, a shunt was placed in his skull to drain fluid. He has seizures, trouble seeing and is mildly mentally retarded. Darren's most likely diagnosis is 89) _____
- A) phenylketonuria. B) Turner's syndrome.
C) microcephaly. D) hydrocephaly.

Answer: D

Diff: 1 Type: MC Page Ref: 441
Topic: Mental Retardation/Organic Retardation Syndromes
Skill: Applied
Objective:

- 90) The current trend for treatment of the mentally retarded is 90) _____
- A) to place all but the mildly and moderately retarded in institutions.
B) to place them in institutions.
C) to keep even the most severely retarded in the community rather than institutions.
D) to place all but the mildly mentally retarded in institutions.

Answer: C

Diff: 1 Type: MC Page Ref: 441
Topic: Mental Retardation/Organic Retardation Syndromes
Skill: Factual
Objective:

- 91) One of the most important factors in the treatment of children and adolescents is 91) _____
- A) parental willingness to be involved in treatment.
B) the type of disorder they have.
C) their intellectual level.
D) their response to medications.

Answer: A

Diff: 1 Type: MC Page Ref: 444
Topic: Special Factors in the Treatment of Children
Skill: Factual
Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 92) Just as is seen in adult females and males, most studies find that girls experience more psychological disorders than boys. 92) _____

Answer: True False

Diff: 2 Type: TF Page Ref: 417
Topic:
Skill:
Objective:

- 93) Behaviors that are signs of emotional disturbance at one age may be normal at another age. 93) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 417
Topic:
Skill:
Objective:

- 94) The natural limits of a child's cognitive abilities increase their risk of psychopathology. 94) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 418
Topic:
Skill:
Objective:

- 95) Hyperactive children tend to be anxious and easily startled. 95) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 419
Topic:
Skill:
Objective:
- 96) Children with ADHD often have trouble getting along with peers. 96) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 419
Topic:
Skill:
Objective:
- 97) The drugs most commonly used to treat hyperactivity are stimulants. 97) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 420
Topic:
Skill:
Objective:
- 98) Ritalin is the only medication available for ADHD. 98) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 444
Topic:
Skill:
Objective:
- 99) Conduct disorder, by definition, involves engaging in acts that are against the law. 99) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 422
Topic:
Skill:
Objective:
- 100) Virtually all children with oppositional defiant disorder develop conduct disorder. 100) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 422
Topic:
Skill:
Objective:
- 101) The earlier conduct disorder develops, the poorer the prognosis. 101) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 423
Topic:
Skill:
Objective:
- 102) A punitive approach is the most effective means of dealing with oppositional defiant disorder. 102) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 424
Topic:
Skill:
Objective:

- 103) A diagnosis of selective mutism can not be made if the child already has a diagnosis of developmental disorder/delay. 103) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 426
Topic:
Skill:
Objective:
- 104) Irritability may be the main symptom of depression in a child. 104) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 427
Topic:
Skill:
Objective:
- 105) The effectiveness of antidepressants for the treatment of child and adolescent depression is well-established. 105) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 429
Topic:
Skill:
Objective:
- 106) Autism is usually identified before the age of 3. 106) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 430
Topic:
Skill:
Objective:
- 107) The cardinal sign of autism is abnormally small head size. 107) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 430
Topic:
Skill:
Objective:
- 108) Autistic children are very empathic and aware of other children's feelings, even if they don't respond to them. 108) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 430
Topic:
Skill:
Objective:
- 109) The speech of most children with autism that can speak consists of echolalia. 109) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 430
Topic:
Skill:
Objective:
- 110) People diagnosed with Asperger's Disorder have a poorer prognosis than people with Autism. 110) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 458
Topic:
Skill:
Objective:

- 111) Children with learning disabilities have achievement scores significantly below their expected level. 111) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 434
Topic:
Skill:
Objective:
- 112) Advancing age in either parent increases the risk of trisomy 21. 112) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 440
Topic:
Skill:
Objective:
- 113) It is never legal or ethical for psychologists to treat children without their parents' consent. 113) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 443
Topic:
Skill:
Objective:
- 114) The best treatment for most childhood disorders is to treat the parents. 114) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 444
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

- 115) How do early views of child psychopathology differ from those of today? 115) _____
Answer: Childhood disorders were once given little attention as they were viewed as simply being manifestations of adult disorders in children. It was not recognized that there are disorders that are only seen in childhood and that definitions of what is viewed as normal behavior change with age.
Diff: 1 Type: SA Page Ref: 417
Topic:
Skill:
Objective:
- 116) What is the clinical picture of oppositional defiant disorder? How is this disorder related to conduct disorder? 116) _____
Answer: The key characteristics of oppositional defiant disorder are persistent negativism, disobedience, and hostile behavior toward authority figures. This pattern must last at least six months and usually begins by age 6. Conduct disorder involves many of the same behaviors but usually has its onset at age 9 or later. While about one-quarter of children who have oppositional defiant disorder go on to develop conduct disorder, virtually every child with conduct disorder had oppositional defiant disorder earlier in life.
Diff: 2 Type: SA Page Ref: 421-422
Topic:
Skill:
Objective:

- 117) What relationship is there between conduct disorder and antisocial personality disorder? 117) _____
Answer: Early-onset conduct disorder is associated with later development of antisocial personality disorder, or other social dysfunction. It appears that the earlier that antisocial behavior becomes apparent, the more likely that it will continue and become a lifelong behavioral pattern.
Diff: 2 Type: SA Page Ref: 423
Topic:
Skill:
Objective:
- 118) Sarah is 5 and in her third month of kindergarten. She has refused to speak to her kindergarten teacher or her peers there since school started. She knows the language and speaks freely at home. What childhood anxiety disorder does she have? What other problems does she probably have as well? 118) _____
Answer: Sarah illustrates selective mutism. She is probably also quite shy and experiences social anxiety in settings outside her home.
Diff: 1 Type: SA Page Ref: 426
Topic:
Skill:
Objective:
- 119) How does depression in a mother impact her child? 119) _____
Answer: Depressed mothers tend not to respond effectively to children and to be less attuned to them. They also tend to respond in a more negative manner. The mothers' behavior and modeling of affect may produce similar responses in infants.
Diff: 2 Type: SA Page Ref: 429
Topic:
Skill:
Objective:
- 120) What are the major symptoms of autism? 120) _____
Answer: Lack of interest in social relationships, social deficits, absence of speech, self-stimulation, lowered IQ and maintaining sameness.
Diff: 2 Type: SA Page Ref: 430-432
Topic:
Skill:
Objective:
- 121) What are three factors that can cause mental retardation? 121) _____
Answer: Three of: Genetic-chromosomal factors, infections and toxic agents, trauma and physical injury, ionizing radiation and malnutrition.
Diff: 2 Type: SA Page Ref: 437-438
Topic:
Skill:
Objective:
- 122) What is unique about the mental retardation caused by PKU? 122) _____
Answer: While many conditions inevitably result in brain damage and mental retardation, early detection of PKU can prevent any adverse consequences. Children with PKU are unable to metabolize phenylalanine. If they ingest food with this amino acid, it accumulates and causes brain damage that leads to retardation. The mental retardation seen in PKU only occurs if foods with phenylalanine are ingested, therefore it is preventable.
Diff: 1 Type: SA Page Ref: 440
Topic:
Skill:
Objective:

123) What are three of the special factors associated with treatment for children and adolescents? 123) _____

Answer: Three of: child's inability to seek assistance on their own, child's unique vulnerabilities that put them at risk, the need to treat parents as well as children, the problems of placing children outside of the family and the value of intervening before problems become acute.

Diff: 2 Type: SA Page Ref: 442-445

Topic:

Skill:

Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

124) What are the special vulnerabilities in young children that contribute to the development of psychological problems?

Answer: Children have a more simplistic view of life than adults. They have less self-understanding and cannot grasp as adults can what situations require of them nor what resources they have to cope with those situations. Therefore immediate threats are more likely to seem overwhelming to children. Given this limited perspective, children use unrealistic ideas to explain events. Children are also more dependent on other people than adults, and while this may provide support, it also makes them vulnerable to rejection and inadequate or inappropriate modeling of behavior.

GRADING RUBRIC: 6 points, 2 for each of 3 special vulnerabilities.

Diff: 1 Type: ES Page Ref: 417-418

Topic:

Skill:

Objective:

125) Discuss the relationship between oppositional defiant disorder, conduct disorder, juvenile delinquency, and antisocial personality disorder.

Answer: While oppositional defiant disorder (ODD), conduct disorder (CD), and antisocial personality disorder (APD) are all psychological disorders found in the DSM-IV-TR, juvenile delinquency is a term used to law breaking by minors. Thus, many children with ODD and CD are juvenile delinquents. The behavioral features of ODD, CD, and APD are all similar. In essence, ODD and CD involve age-appropriate antisocial acts. ODD is usually apparent by age 8 and is characterized by negativity, defiance, and hostility that persist for at least 6 months. The child with ODD does not respect authority. Not all children with ODD develop CD, but virtually all children with CD had ODD. CD tends to be seen by about age 9. While the child with ODD is hostile to authority, the child with CD violates the rights of others and repeatedly violates rules. In CD we see an escalation of the antisocial behaviors evident in the child with ODD. Just as not all children with ODD develop CD, those children who develop CD are not destined to develop APD. Those who develop CD at a young age, however, are more likely to develop APD. Thus, it appears that early and persistent antisocial behavior in childhood is a precursor for APD.

GRADING RUBRIC: 12 points, 2 points each for distinguishing between the 4 disorders (8 points), 2 for stating relationship between ODD and CD, 2 for stating the relationship between CD and APD.

Diff: 2 Type: ES Page Ref: 421-423

Topic:

Skill:

Objective:

126) Describe the ways parents can cause anxiety disorders in their children.

Answer: 1. Modeling by overanxious and protective parents can sensitize children to the dangers of the outside world, communicates to them a lack of confidence in the child's ability to cope and reinforces the child's feelings of inadequacy.
2. Indifferent or detached parents or rejecting parents cause the child to not feel adequately supported in mastering essential competencies and gaining a positive self-concept. Either repeated failures from poor learning skills leads to anxiety or withdrawal in the face of a threat or the child performs adequately but is overly self-critical and feels anxious and devalued because of self-perception of failure and loss of parental love.

GRADING RUBRIC: 10 points, 5 for each way.

Diff: 2 Type: ES Page Ref: 426-427

Topic:

Skill:

Objective:

- 1) B
- 2) C
- 3) A
- 4) C
- 5) C
- 6) C
- 7) D
- 8) C
- 9) B
- 10) B
- 11) D
- 12) D
- 13) B
- 14) D
- 15) D
- 16) B
- 17) D
- 18) D
- 19) D
- 20) A
- 21) A
- 22) C
- 23) D
- 24) C
- 25) D
- 26) D
- 27) B
- 28) C
- 29) D
- 30) A

- 31) D
- 32) D
- 33) C
- 34) C
- 35) C
- 36) B
- 37) B
- 38) D
- 39) B
- 40) D
- 41) D
- 42) D
- 43) D
- 44) C
- 45) B
- 46) B
- 47) B
- 48) C
- 49) A
- 50) A
- 51) C
- 52) D
- 53) C
- 54) D
- 55) C
- 56) B
- 57) C
- 58) B
- 59) B
- 60) B

- 61) A
- 62) B
- 63) B
- 64) C
- 65) B
- 66) D
- 67) C
- 68) A
- 69) B
- 70) D
- 71) A
- 72) C
- 73) D
- 74) C
- 75) D
- 76) A
- 77) B
- 78) A
- 79) C
- 80) C
- 81) D
- 82) C
- 83) B
- 84) B
- 85) A
- 86) A
- 87) B
- 88) B
- 89) D
- 90) C

- 91) A
- 92) FALSE
- 93) TRUE
- 94) TRUE
- 95) FALSE
- 96) TRUE
- 97) TRUE
- 98) FALSE
- 99) FALSE
- 100) FALSE
- 101) TRUE
- 102) FALSE
- 103) FALSE
- 104) TRUE
- 105) FALSE
- 106) TRUE
- 107) FALSE
- 108) FALSE
- 109) TRUE
- 110) FALSE
- 111) TRUE
- 112) TRUE
- 113) FALSE
- 114) TRUE
- 115) Childhood disorders were once given little attention as they were viewed as simply being manifestations of adult disorders in children. It was not recognized that there are disorders that are only seen in childhood and that definitions of what is viewed as normal behavior change with age.
- 116) The key characteristics of oppositional defiant disorder are persistent negativism, disobedience, and hostile behavior toward authority figures. This pattern must last at least six months and usually begins by age 6. Conduct disorder involves many of the same behaviors but usually has its onset at age 9 or later. While about one-quarter of children who have oppositional defiant disorder go on to develop conduct disorder, virtually every child with conduct disorder had oppositional defiant disorder earlier in life.

- 117) Early-onset conduct disorder is associated with later development of antisocial personality disorder, or other social dysfunction. It appears that the earlier that antisocial behavior becomes apparent, the more likely that it will continue and become a lifelong behavioral pattern.
- 118) Sarah illustrates selective mutism. She is probably also quite shy and experiences social anxiety in settings outside her home.
- 119) Depressed mothers tend not to respond effectively to children and to be less attuned to them. They also tend to respond in a more negative manner. The mothers' behavior and modeling of affect may produce similar responses in infants.
- 120) Lack of interest in social relationships, social deficits, absence of speech, self-stimulation, lowered IQ and maintaining sameness.
- 121) Three of: Genetic-chromosomal factors, infections and toxic agents, trauma and physical injury, ionizing radiation and malnutrition.
- 122) While many conditions inevitably result in brain damage and mental retardation, early detection of PKU can prevent any adverse consequences. Children with PKU are unable to metabolize phenylalanine. If they ingest food with this amino acid, it accumulates and causes brain damage that leads to retardation. The mental retardation seen in PKU only occurs if foods with phenylalanine are ingested, therefore it is preventable.
- 123) Three of: child's inability to seek assistance on their own, child's unique vulnerabilities that put them at risk, the need to treat parents as well as children, the problems of placing children outside of the family and the value of intervening before problems become acute.
- 124) Children have a more simplistic view of life than adults. They have less self-understanding and cannot grasp as adults can what situations require of them nor what resources they have to cope with those situations. Therefore immediate threats are more likely to seem overwhelming to children. Given this limited perspective, children use unrealistic ideas to explain events. Children are also more dependent on other people than adults, and while this may provide support, it also makes them vulnerable to rejection and inadequate or inappropriate modeling of behavior.
GRADING RUBRIC: 6 points, 2 for each of 3 special vulnerabilities.
- 125) While oppositional defiant disorder (ODD), conduct disorder (CD), and antisocial personality disorder (APD) are all psychological disorders found in the DSM-IV-TR, juvenile delinquency is a term used to law breaking by minors. Thus, many children with ODD and CD are juvenile delinquents. The behavioral features of ODD, CD, and APD are all similar. In essence, ODD and CD involve age-appropriate antisocial acts. ODD is usually apparent by age 8 and is characterized by negativity, defiance, and hostility that persist for at least 6 months. The child with ODD does not respect authority. Not all children with ODD develop CD, but virtually all children with CD had ODD. CD tends to be seen by about age 9. While the child with ODD is hostile to authority, the child with CD violates the rights of others and repeatedly violates rules. In CD we see an escalation of the antisocial behaviors evident in the child with ODD. Just as not all children with ODD develop CD, those children who develop CD are not destined to develop APD. Those who develop CD at a young age, however, are more likely to develop APD. Thus, it appears that early and persistent antisocial behavior in childhood is a precursor for APD.
GRADING RUBRIC: 12 points, 2 points each for distinguishing between the 4 disorders (8 points), 2 for stating relationship between ODD and CD, 2 for stating the relationship between CD and APD.
- 126) 1. Modeling by overanxious and protective parents can sensitize children to the dangers of the outside world, communicates to them a lack of confidence in the child's ability to cope and reinforces the child's feelings of inadequacy.
2. Indifferent or detached parents or rejecting parents cause the child to not feel adequately supported in mastering essential competencies and gaining a positive self-concept. Either repeated failures from poor learning skills leads to anxiety or withdrawal in the face of a threat or the child performs adequately but is overly self-critical and feels anxious and devalued because of self-perception of failure and loss of parental love.
GRADING RUBRIC: 10 points, 5 for each way.

MULTIPLE CHOICE. Choose the one alternative that best completes the statement or answers the question.

- 1) Efforts at reducing racism as a means of preventing mental illness would be a(n) _____ intervention. 1) _____
A) indicated B) selective C) tertiary D) universal

Answer: B

Diff: 1 Type: MC Page Ref: 451

Topic: Perspectives on Prevention

Skill: Applied

Objective:

- 2) "Efforts that are aimed at influencing the general population" best describes 2) _____
A) crisis interventions. B) selective interventions.
C) universal interventions. D) indicated interventions.

Answer: C

Diff: 1 Type: MC Page Ref: 451

Topic: Perspectives on Prevention

Skill: Factual

Objective:

- 3) Universal interventions are concerned with two key tasks: 3) _____
A) strengthening individuals' psychological coping skills and improving their biological health.
B) altering conditions that cause disorders and establishing conditions that foster positive mental health.
C) identifying people with a particular disorder and referring them for help.
D) providing timely therapy and evaluating its usefulness.

Answer: B

Diff: 1 Type: MC Page Ref: 451

Topic: Perspectives on Prevention/Universal Interventions

Skill: Factual

Objective:

- 4) Which of the following might be a component of a biologically based universal strategy for preventing 4) _____
mental illness?
A) determining whether or not there is a family history of mental illness
B) encouraging regular physical activity
C) offering tuberculosis testing
D) identifying people with a particular disorder and referring them for help

Answer: B

Diff: 1 Type: MC Page Ref: 451

Topic: Perspectives on Prevention/Universal Interventions

Skill: Applied

Objective:

- 5) Which of the following is NOT a requirement for psychosocial health? 5) _____
A) having sound moral judgment
B) having a realistic view of one's self
C) having effective problem solving skills
D) being prepared to deal with the problems one is likely to encounter

Answer: A

Diff: 1 Type: MC Page Ref: 452

Topic: Perspectives on Prevention/Universal Interventions

Skill: Conceptual

Objective:

- 6) Having skills for effective problem solving, possessing an accurate set of assumptions about oneself, and being prepared for problems one is likely to encounter at various life stages are all requirements for _____
- A) cultural adjustment.
 - B) being a candidate for deinstitutionalization.
 - C) psychosocial health.
 - D) biological health.

Answer: C

Diff: 1 Type: MC Page Ref: 452

Topic: Perspectives on Prevention/Universal Interventions

Skill: Factual

Objective:

- 7) All of the following are sociocultural efforts toward universal prevention of mental disorders EXCEPT _____
- A) penal systems.
 - B) economic planning.
 - C) social security.
 - D) public education.

Answer: A

Diff: 2 Type: MC Page Ref: 452

Topic: Perspectives on Prevention/Universal Interventions

Skill: Conceptual

Objective:

- 8) Which of the following is a sociocultural effort towards universal prevention? _____
- A) deinstitutionalization of the mentally ill
 - B) public education
 - C) hospitalizing the mentally ill
 - D) teaching adolescents to not use drugs

Answer: B

Diff: 2 Type: MC Page Ref: 452

Topic: Perspectives on Prevention/Universal Interventions

Skill: Applied

Objective:

- 9) All of the following are social forces that affect teen drug use EXCEPT _____
- A) peer pressure.
 - B) increased potency of street drugs.
 - C) parental drug use.
 - D) depiction of drugs in television and film.

Answer: B

Diff: 1 Type: MC Page Ref: 543

Topic: Perspectives on Prevention/Selective Interventions

Skill: Conceptual

Objective:

- 10) Efforts to counterbalance the social factors that entice adolescent binge drinking are examples of _____
- A) indicated interventions.
 - B) crisis interventions.
 - C) selective interventions.
 - D) social-learning programs.

Answer: C

Diff: 1 Type: MC Page Ref: 543

Topic: Perspectives on Prevention/Selective Interventions

Skill: Factual

Objective:

- 11) Alcohol and marijuana use has decreased, _____
- A) but adolescents use of pain killers has increased.
 - B) particularly binge drinking.
 - C) especially among adolescents from minority groups.
 - D) but adult use has increased.

Answer: A

Diff: 1 Type: MC Page Ref: 543

Topic: Perspectives on Prevention/Selective Interventions

Skill: Factual

Objective:

- 12) Why has the attempt to reduce the drug supply from other countries not reduced the rate of adolescent substance abuse? 12) _____
- A) Drug abusers are traveling to other countries to obtain their supply.
 - B) The drugs most abused by adolescents are alcohol and tobacco, which are easily available.
 - C) Most smugglers are still able to find a way to bring drugs in.
 - D) Local residents account for most of the illegal drug traffic.

Answer: B

Diff: 1 Type: MC Page Ref: 453

Topic: Perspectives on Prevention/Selective Interventions

Skill: Conceptual

Objective:

- 13) Why is it important to prevent teen alcohol use? 13) _____
- A) Teens are more prone to violence while drinking than adults.
 - B) Teens are more susceptible to alcoholism than adults.
 - C) Most teens who drink go on to do "harder drugs."
 - D) Early alcohol use is associated with later alcohol abuse and dependence.

Answer: D

Diff: 1 Type: MC Page Ref: 454

Topic: Perspectives on Prevention/Selective Interventions

Skill: Conceptual

Objective:

- 14) What is the goal of school-based drug and alcohol education programs? 14) _____
- A) to scare children away from using drugs
 - B) to teach children how to recognize the drugs that they might be exposed to
 - C) to ensure that children are educated consumers
 - D) to teach children about drugs so that they can make informed choices

Answer: D

Diff: 1 Type: MC Page Ref: 454

Topic: Perspectives on Prevention/Selective Interventions

Skill: Applied

Objective:

- 15) Family-oriented alcohol prevention programs have been developed because 15) _____
- A) teen drinking frequently starts when problems in the home have become unmanageable.
 - B) parents need to help their children resist peer pressure.
 - C) teen views of alcohol typically reflect those of their parents.
 - D) most underage alcohol use occurs at home.

Answer: C

Diff: 1 Type: MC Page Ref: 454

Topic: Perspectives on Prevention/Selective Interventions

Skill: Factual

Objective:

- 16) Which of the following strategies has been found to be of particular benefit to high-risk, unsupervised teens in reducing problem behaviors? 16) _____
- A) Extracurricular strategies.
 - B) Antidepressant medication and other biological strategies.
 - C) Punitive strategies
 - D) Interpersonal therapy.

Answer: A

Diff: 2 Type: MC Page Ref: 477

Topic: Perspectives on Prevention/ Selective Interventions

Skill: Factual

Objective:

- 17) Combined prevention programs that educate about drugs and teach skills needed to refuse alcohol and drug use demands 17) _____
- A) are rarely as successful as family-based programs.
 - B) have proven to be powerful interventions.
 - C) have failed to show any significant impact when evaluated with control groups.
 - D) are most effective when targeted at college students.

Answer: B

Diff: 1 Type: MC Page Ref: 455

Topic: Perspectives on Prevention/Selective Interventions

Skill: Factual

Objective:

- 18) Dr. Jones says, "These projects have clearly shown an effective path toward reducing the extent of substance abuse in young people." What projects is Dr. Jones talking about? 22) _____
- A) ones that involve the interdiction or reduction in supply of drugs
 - B) ones that contradict the movies and TV commercials that glamorize drugs
 - C) ones that combine different intervention strategies
 - D) ones that use teachers to tell students why drugs are bad for their health

Answer: C

Diff: 1 Type: MC Page Ref: 455

Topic: Perspectives on Prevention/Selective Interventions

Skill: Conceptual

Objective:

- 19) It has been demonstrated that 23) _____
- A) lasting reductions in drug use occur when social resistance skills are taught and booster sessions are provided.
 - B) there is no way of counteracting the positive representation of drugs in the media.
 - C) parental involvement is the key ingredient in most drug prevention efforts.
 - D) the development of peer pressure resistance skills can decrease drug use by 44%.

Answer: A

Diff: 1 Type: MC Page Ref: 455

Topic: Perspectives on Prevention/Selective Interventions

Skill: Factual

Objective:

- 20) In order to prevent long-term consequences, _____ interventions are provided immediately after a disaster such as a plane crash. 20) _____
- A) selective B) indicated C) universal D) education

Answer: B

Diff: 1 Type: MC Page Ref: 455

Topic: Perspectives on Prevention/Indicated Interventions

Skill: Factual

Objective:

- 21) Indicated prevention emphasizes 21) _____
- A) teaching social skills and problem-solving as a way of improving self-esteem.
 - B) genetic screening.
 - C) education efforts to an entire population regardless of the individual's social situation.
 - D) the early detection and prompt treatment of maladaptive behavior in a person's community setting.

Answer: D

Diff: 1 Type: MC Page Ref: 455

Topic: Perspectives on Prevention/Indicated Interventions

Skill: Factual

Objective:

- 22) All of the following are elements of "milieu therapy" EXCEPT 22) _____
A) staff expectations are clearly communicated.
B) patients are encouraged to participate in making decisions.
C) group cohesiveness.
D) teaching social skills and problem-solving.

Answer: D

Diff: 1 Type: MC Page Ref: 456

Topic: Perspectives on Prevention/The Mental Hospital as a TC

Skill: Factual

Objective:

- 23) Which of the following is a characteristic of a therapeutic community? 23) _____
A) extensive use of medications B) many restrictions
C) minimal interaction amongst the patients D) individual responsibility

Answer: D

Diff: 1 Type: MC Page Ref: 456

Topic: Perspectives on Prevention/The Mental Hospital as a TC

Skill: Conceptual

Objective:

- 24) Residential treatment 24) _____
A) has been found to be the best treatment for children, adolescents and adults.
B) has been found to be the most useful treatment for depression at any age.
C) is often ineffective and may even be harmful for children.
D) only is effective for children if they are on medication.

Answer: C

Diff: 1 Type: MC Page Ref: 479-480

Topic: Perspectives on Prevention/The Mental Hospital as a TC

Skill: Factual

Objective

- 25) In a study by Paul and Lentz designed to assess the effectiveness of different approaches to the treatment of chronically hospitalized patients, what treatment approach was found to yield the best results? 25) _____
A) traditional mental hospital treatments B) social learning
C) psychotherapy alone D) milieu therapy

Answer: B

Diff: 1 Type: MC Page Ref: 456

Topic: Perspectives on Prevention/The Mental Hospital as a TC

Skill: Factual

Objective:

- 26) At Rush General, the inpatient mental ward employs a program that focuses on modifying the behavior of the patients by giving them gold stars for good behavior and ignoring undesirable behavior. What type of treatment program does this appear to be? 26) _____
A) psychotherapy alone B) milieu therapy
C) traditional mental hospital treatments D) social learning

Answer: D

Diff: 1 Type: MC Page Ref: 456

Topic: Perspectives on Prevention/The Mental Hospital as a TC

Skill: Conceptual

Objective:

- 27) A major difference between social-learning programs and milieu therapy is that social-learning programs 27) _____
A) require each patient to be involved in groups that "govern" the ward.
B) are never provided in mental hospitals.
C) target specific behaviors for reinforcement.
D) expect patients to care for one another.

Answer: C

Diff: 2 Type: MC Page Ref: 456
Topic: Perspectives on Prevention/The Mental Hospital as a TC
Skill: Conceptual
Objective:

- 28) Community-based treatment programs are now referred to as 28) _____
A) aftercare programs. B) crisis intervention.
C) deinstitutionalization. D) managed care initiatives.

Answer: A

Diff: 1 Type: MC Page Ref: 456
Topic: Perspectives on Prevention/The Mental Hospital as a TC
Skill: Factual
Objective:

- 29) Community-based facilities that provide aftercare are typically run by 29) _____
A) trained paraprofessionals. B) mental health professionals.
C) community activists. D) the residents themselves.

Answer: D

Diff: 1 Type: MC Page Ref: 457
Topic: Perspectives on Prevention/The Mental Hospital as a TC
Skill: Factual
Objective:

- 30) For which person is aftercare likely to be helpful because the person will fit the services typically offered? 30) _____
A) Bart, who has a lengthy criminal record
B) Ned, who has had several schizophrenic episodes
C) Vera, who has few psychological problems but who frequently moves from place to place
D) Helen, who has developed posttraumatic stress disorder after having been attacked

Answer: B

Diff: 2 Type: MC Page Ref: 457
Topic: Perspectives on Prevention/The Mental Hospital as a TC
Skill: Applied
Objective:

- 31) In order for community-based aftercare for psychiatric patients to be successful 31) _____
A) the facilities must be run by mental health professionals.
B) milieu methods must be used rather than social-learning methods.
C) there must be a crisis intervention component.
D) the community must be educated so it will be tolerant of troubled people.

Answer: D

Diff: 2 Type: MC Page Ref: 457
Topic: Perspectives on Prevention/The Mental Hospital as a TC
Skill: Factual
Objective:

- 32) Which of the following is a barrier to effective deinstitutionalization? 32) _____
A) deinstitutionalized patients do not fair better than those who remain hospitalized
B) society's desire to free previously confined persons
C) the lack of sufficient mental health services in the community
D) the use of antipsychotic medications

Answer: C

Diff: 2 Type: MC Page Ref: 457
Topic: Perspectives on Prevention/Deinstitutionalization
Skill: Factual
Objective:

- 33) Which of the following was an unforeseen consequence of deinstitutionalization? 33) _____
- A) a rise in homelessness
 - B) the need for mental health services in the community
 - C) an increased demand on the welfare system
 - D) abuses of antipsychotic and anxiolytic medications

Answer: A

Diff: 1 Type: MC Page Ref: 458

Topic: Perspectives on Prevention/Deinstitutionalization

Skill: Factual

Objective:

- 34) The most recent research on deinstitutionalization has found inpatient hospitalization 34) _____
- A) has been increasing due to increasing numbers of mentally ill.
 - B) has continued to decrease and communities have stepped up their response to improve outpatient care.
 - C) has been increasing due to the failures to provide adequate care in the community.
 - D) has continued to decrease, despite an increase in problems as a result.

Answer: C

Diff: 1 Type: MC Page Ref: 458

Topic: Perspectives on Prevention/Deinstitutionalization

Skill: Factual

Objective:

- 35) Dr. McDougal's specialty is forensic psychology. We can imagine that she 35) _____
- A) provides preventive services to prevent criminal behavior.
 - B) is concerned with the legal status of the mentally ill.
 - C) works for a managed care organization.
 - D) does research on the impact of deinstitutionalization.

Answer: B

Diff: 2 Type: MC Page Ref: 458

Topic: Controversial Legal Issues and the Mentally Disordered

Skill: Applied

Objective:

- 36) One difference between voluntary hospitalization and involuntary commitment is that people who are in 36) _____
the hospital voluntarily
- A) need to be assessed as dangerous to themselves or others.
 - B) must be treated in the least restrictive environment.
 - C) can, with sufficient notice, leave the hospital when they want to.
 - D) are eligible for aftercare services following.

Answer: C

Diff: 1 Type: MC Page Ref: 459

Topic: Controversial Legal Issues/The Commitment Process

Skill: Factual

Objective:

- 37) Which of the following can be committed against their will to a psychiatric hospital? 37) _____
- A) Kathie, who has schizophrenia and has been threatening to hurt people on the street.
 - B) Carole, who has schizophrenia and won't take her medications because they make her feel ill.
 - C) Tina, who has schizophrenia and is homeless.
 - D) Any of these three—schizophrenia is a serious enough disorder for the person to be forced into the hospital.

Answer: A

Diff: 2 Type: MC Page Ref: 459

Topic: Controversial Legal Issues/The Commitment Process

Skill: Applied

Objective:

- 38) Once a person is committed to a mental hospital 38) _____
A) they must establish their sanity before they can be released.
B) the court establishes the minimum treatment necessary as indicated by testimony from two examiners.
C) the hospital must report to the court as to whether or not continued confinement is necessary.
D) they must participate in whatever treatment they are prescribed.

Answer: C

Diff: 1 Type: MC Page Ref: 460

Topic: Controversial Legal Issues/The Commitment Process

Skill: Factual

Objective:

- 39) Emergency hospitalization without a commitment hearing is permitted when 39) _____
A) a judge declares that imminent danger exists.
B) the person to be hospitalized has a criminal history.
C) a physician signs a formal statement saying that imminent danger exists.
D) the person to be hospitalized is found to be insane.

Answer: C

Diff: 1 Type: MC Page Ref: 460

Topic: Controversial Legal Issues/The Commitment Process

Skill: Factual

Objective:

- 40) Suppose a family is quite alarmed about the threatening behavior of a relative. They want to petition the court for commitment but there is no time to get a court order. What option does the family have? 40) _____
A) They can ask the police to declare the person "insane."
B) None. They must wait until there is a court evaluation of the person's dangerousness.
C) After getting a police officer to examine the person, they can require the person's attendance in a crisis intervention program.
D) After getting a physician to state that the person is dangerous, they can have the police pick up and detain the person for up to 72 hours.

Answer: D

Diff: 2 Type: MC Page Ref: 460-461

Topic: Controversial Legal Issues/The Commitment Process

Skill: Applied

Objective:

- 41) Once a person has been involuntarily committed to a mental institution, he or she 41) _____
A) may refuse treatment. B) may refuse medication but not therapy.
C) may not refuse treatment. D) may refuse therapy but not medication.

Answer: A

Diff: 2 Type: MC Page Ref: 461

Topic: Controversial Legal Issues/The Commitment Process

Skill: Factual

Objective:

- 42) Although the majority of currently disordered persons show no tendency toward violence, an increased risk of violence is likely among those who 42) _____
A) currently experience psychotic symptoms.
B) have just experienced a natural or man-made form of disaster.
C) have been extremely emotionally rigid in the past.
D) are religiously preoccupied.

Answer: A

Diff: 1 Type: MC Page Ref: 461

Topic: Controversial Legal Issues/The Assessment of "Dangerousness"

Skill: Factual

Objective:

- 43) Homicidal behavior amongst former patients is greatest with a diagnosis of _____
A) schizophrenia. B) bipolar depression.
C) major depression. D) alcoholism.

Answer: D

Diff: 1 Type: MC Page Ref: 461

Topic: Controversial Legal Issues/The Assessment of "Dangerousness"

Skill: Factual

Objective:

- 44) Which phrase best captures how well mental health professionals do in predicting the occurrence of dangerous acts? _____

- A) poorly, especially with people who are actively schizophrenic or delusional
B) rather well, as long as the patient provides honest information
C) exceedingly well, especially if the person has a diagnosed mental condition
D) not as well as we would like

Answer: D

Diff: 1 Type: MC Page Ref: 461

Topic: Controversial Legal Issues/The Assessment of "Dangerousness"

Skill: Conceptual

Objective:

- 45) What kind of mistake do most mental health professionals make when assessing dangerousness? _____

- A) They over-predict violence.
B) They underestimate the likelihood of violence in psychotic patients.
C) They overemphasize the importance of situational factors.
D) They make many "false negatives."

Answer: A

Diff: 1 Type: MC Page Ref: 461

Topic: Controversial Legal Issues/The Assessment of "Dangerousness"

Skill: Factual

Objective:

- 46) One of the main reasons it is so hard to predict future dangerousness is _____

- A) there are no psychological tests to help measure dangerousness.
B) there is very little research into who becomes violent and who doesn't, and why.
C) most potentially violent people refuse to talk to therapists.
D) situational circumstances play as large a role as an individual's personality traits.

Answer: D

Diff: 2 Type: MC Page Ref: 461

Topic: Controversial Legal Issues/The Assessment of "Dangerousness"

Skill: Conceptual

Objective:

- 47) What is one of the best predictors of future violence? _____

- A) compliance with treatment B) past history of violence
C) employment history D) family support

Answer: B

Diff: 2 Type: MC Page Ref: 461

Topic: Controversial Legal Issues/The Assessment of "Dangerousness"

Skill: Factual

Objective:

- 48) Predicting dangerousness is most comparable to _____

- A) figuring your taxes at the end of the year.
B) preparing a team for a sports competition.
C) preparing a weather forecast.
D) reviewing for a comprehensive examination.

Answer: C

Diff: 1 Type: MC Page Ref: 461
Topic: Controversial Legal Issues/The Assessment of "Dangerousness"
Skill: Conceptual
Objective:

- 49) Under what circumstances can a therapist violate a client's confidence? 49) _____
A) never B) when someone is in danger
C) only when the client gives permission D) when a crime has been committed

Answer: B

Diff: 1 Type: MC Page Ref: 461-462
Topic: Controversial Legal Issues/The Assessment of "Dangerousness"
Skill: Factual
Objective:

- 50) What doctrine came out of the original *Tarasoff v. Regents of the University of California et al.* case? 50) _____
A) the duty to protect
B) the right-versus-wrong principle in insanity cases
C) treatment in the least restrictive environment
D) the duty to warn

Answer: D

Diff: 1 Type: MC Page Ref: 461-462
Topic: Controversial Legal Issues/The Assessment of "Dangerousness"
Skill: Factual
Objective:

- 51) In most states that have a Tarasoff-type rule, when a client threatens someone, a therapist must 51) _____
A) make a reasonable effort to warn potential victims.
B) not break confidentiality.
C) continue trying to warn potential victims until they reach them.
D) warn as many people who know the client as possible.

Answer: A

Diff: 2 Type: MC Page Ref: 462
Topic: Controversial Legal Issues/The Assessment of "Dangerousness"
Skill: Factual
Objective:

- 52) The Tarasoff rule usually applies 52) _____
A) anytime a client threatens to do a violent act.
B) only if the client has given an informed consent.
C) only to violent acts against people.
D) only if the target of violence is clearly identifiable.

Answer: D

Diff: 2 Type: MC Page Ref: 462
Topic: Controversial Legal Issues/The Assessment of "Dangerousness"
Skill: Factual
Objective:

- 53) Tarasoff-style laws 53) _____
A) are no longer law in most states.
B) are in a majority of states but vary quite a bit.
C) are in every state.
D) are in a minority of states.

Answer: B

Diff: 2 Type: MC Page Ref: 462
Topic: Controversial Legal Issues/The Assessment of "Dangerousness"
Skill: Factual
Objective:

- 54) The underlying basis of the insanity defense is 54) _____
- A) some people who have a mental illness are not able to fully comprehend their behavior, so are not able to form the needed intent for a crime, and thus shouldn't be punished.
 - B) people who have a mental illness cannot ever form the intent needed to commit a crime, so shouldn't be punished.
 - C) even if they had the required intent for a crime, the mentally ill still shouldn't be punished.
 - D) people who have a mental illness should not be punished.

Answer: A

Diff: 2 Type: MC Page Ref: 462
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Conceptual
Objective:

- 55) What was unusual about the Hinckley case? 55) _____
- A) He used the insanity defense.
 - B) He was successful in pleading the insanity defense.
 - C) His petitions for release have been consistently denied.
 - D) The public believed that he did not need to pay for his crime.

Answer: B

Diff: 2 Type: MC Page Ref: 461-462
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Applied
Objective:

- 56) An attorney says, "My client has a mental disorder that made it impossible, at the time of the crime, to have intended to do harm. Because of this, he is not legally responsible for his actions." The attorney is arguing for 56) _____
- A) the Tarasoff principle.
 - B) deinstitutionalization of his client.
 - C) an insanity defense.
 - D) involuntary commitment.

Answer: C

Diff: 1 Type: MC Page Ref: 461-462
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Applied
Objective:

- 57) Why should defense lawyers be cautious about using the insanity defense? 57) _____
- A) Most defendants feign mental illness in order to escape punishment.
 - B) Hospitalization is not an appropriate consequence for those who have committed violent crimes.
 - C) No reason—□it is frequently successful.
 - D) It rarely works.

Answer: D

Diff: 2 Type: MC Page Ref: 462
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Factual
Objective:

- 58) A typical defense strategy, to try to counteract public anger about the insanity defense, is to 58) _____
- A) portray the defendant as someone who was themselves a victim.
 - B) portray the victim as negatively as possible.
 - C) portray the defendant as tremendously likeable.
 - D) portray the defendant as suffering terribly from their mental illness.

Answer: A

Diff: 2 Type: MC Page Ref: 463
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Factual
Objective:

- 59) The insanity defense is employed in _____ percent of capital cases in the United States. 59) _____
A) 33 B) less than two C) 20 D) roughly 10-15

Answer: B

Diff: 1 Type: MC Page Ref: 463
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Factual
Objective:

- 60) People who are mentally ill but were not successful using the insanity defense 60) _____
A) can never be executed.
B) can be executed unless it can be proved on appeal that execution would be cruel and unusual punishment because of their mental illness.
C) can be executed and cannot use their mental illness for an appeal because they were unsuccessful using that issue at trial.
D) can only be executed after treatment has been provided.

Answer: B

Diff: 2 Type: MC PageRef: 487
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Factual
Objective

- 61) According to the M'Naghten Rule, insanity is defined as 61) _____
A) not knowing right from wrong.
B) acting on an irresistible impulse.
C) lacking the capacity to understand that an action violates the law.
D) failing to understand the consequences of one's actions.

Answer: A

Diff: 1 Type: MC Page Ref: 464
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Factual
Objective:

- 62) Darryl has schizophrenia, disorganized type. He has visual hallucinations, and one day he saw a giant bug standing in front of him. He picked up a large knife and stabbed it. In reality, Darryl stabbed his mother who had come to tell him dinner was ready. His lawyer argues that Darryl cannot be found guilty because he had no idea what he was doing or that it was wrong. His lawyer is arguing the 62) _____
A) American Law Institute standard. B) irresistible impulse rule.
C) Durham rule. D) M'Naughten rule.

Answer: D

Diff: 3 Type: MC Page Ref: 464
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Applied
Objective:

- 63) Knowing right from wrong is to _____ as "unlawful act was the product of mental disease" is to _____ 63) _____
A) Durham Rule; M'Naughten Rule B) M'Naughten Rule; Durham Rule
C) irresistible impulse; Durham Rule D) M'Naughten Rule; irresistible impulse

Answer: B

Diff: 2 Type: MC Page Ref: 464
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Conceptual
Objective:

- 64) The Durham Rule 64) _____
A) established that one was sane unless they did not know right from wrong.
B) focused on the cause of an unlawful act.
C) made the criteria for establishing insanity more objective.
D) is often referred to as the "substantial capacity test."

Answer: B

Diff: 2 Type: MC Page Ref: 464
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Conceptual
Objective:

- 65) The broadest of the insanity rules is the _____
- A) Federal Insanity Defense Reform Act. B) M'Naughten Rule.
C) irresistible impulse rule. D) Durham Rule.

Answer: D

Diff: 1 Type: MC Page Ref: 464
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Factual
Objective:

- 66) Which of the following changed with the Federal Insanity Defense Reform Act of 1984? _____
- A) It became much easier for defendants to qualify for the insanity defense.
B) It put the burden of proof on the defense.
C) It abolished the "knowing right from wrong" principle.
D) It narrowed the definition of insanity to the "product test" (Durham Rule).

Answer: B

Diff: 1 Type: MC Page Ref: 464
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Factual
Objective:

- 67) Which of the following has the best chance of successfully pleading not guilty by reason of insanity? _____
- A) Susie, who has schizophrenia, has been in and out of hospitals all her life, who tried to break the arm of a romantic rival.
B) Tim, who is depressed, has never been hospitalized and murdered his wife.
C) Ernie, who has schizophrenia, was in the hospital once a long time ago and murdered three former co-workers.
D) Lori, who has bipolar disorder, has never been hospitalized and tried to murder a stranger.

Answer: A

Diff: 2 Type: MC Page Ref: 464
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Applied
Objective:

- 68) The verdict of Guilty but Mentally Ill _____
- A) means people with mental illness that are found guilty of a crime go to the hospital until they are better, then return to jail to serve out their sentence.
B) means people with mental illness that are found guilty of a crime go to jail but get mental health treatment while in jail.
C) means people with mental illness that are found guilty of a crime are put in jail but in a special section.
D) means people with mental illness that are found guilty of a crime get shorter sentences.

Answer: A

Diff: 2 Type: MC Page Ref: 465
Topic: Controversial Legal Issues/The Insanity Defense
Skill: Factual
Objective:

- 69) Why did World War II lead to a greater recognition of the pervasiveness of mental illness? _____
- A) Many women developed psychiatric conditions when left to raise families and make a living on their own.
B) Over 70% of veterans suffered from either PTSD or substance abuse after the war.
C) Two out of seven potential military recruits were rejected for psychiatric reasons.
D) The military was unable to provide adequate mental health services to men in the field.

Answer: C

Diff: 1 Type: MC Page Ref: 465

Topic: Organized Efforts for Mental Health

Skill: Factual

Objective:

70) Which of the following funds research on mental disorders and assists communities in establishing effective mental health services? 70) _____

- A) the American Psychological Association (APA)
- B) the National Institute on Mental Health (NIMH)
- C) the National Association for Mental Health (NAMH)
- D) health maintenance organization (HMO)

Answer: B

Diff: 1 Type: MC Page Ref: 465

Topic: Organized Efforts for Mental Health

Skill: Factual

Objective:

71) Which of the following activities does NIMH perform? 71) _____

- A) pay for the hospital care of the chronically mentally ill
- B) support professional training and provide the public with information on mental health
- C) do nationwide universal and selective preventive interventions
- D) provide communities with psychologists and psychiatrists who do individual and group therapy

Answer: B

Diff: 1 Type: MC Page Ref: 465

Topic: Organized Efforts for Mental Health

Skill: Factual

Objective:

72) Most of NIMH's programs are 72) _____

- A) actually planned and run by state and local organizations.
- B) much larger and better funded than they were in the 1960s and 1970s.
- C) designed, controlled, and implemented by the federal government.
- D) actually focused on the prevention of crime rather than mental disorder.

Answer: A

Diff: 1 Type: MC Page Ref: 465

Topic: Organized Efforts for Mental Health

Skill: Factual

Objective:

73) What is an important function of organizations such as the American Psychological Association, the American Psychological Society, and the American Medical Association? 73) _____

- A) They fund most of the treatment and prevention research done in the United States.
- B) They set and maintain professional and ethical standards.
- C) They draw up the policies that determine which clients get treatment and of what duration.
- D) They control forensic issues such as the insanity defense and the policies for committing patients against their will.

Answer: B

Diff: 1 Type: MC Page Ref: 466

Topic: Organized Efforts for Mental Health

Skill: Conceptual

Objective:

74) Which of the following is a volunteer mental health agency? 74) _____

- A) the National Association for Mental Health (NAMH)
- B) the National Institute on Mental Health (NIMH)
- C) the American Psychological Association (APA)
- D) a health maintenance organization (HMO)

Answer: A

Diff: 1 Type: MC Page Ref: 466

Topic: Organized Efforts for Mental Health

Skill: Factual

Objective:

- 75) What do the National Association for Mental Health, the National Association for Retarded Citizens, and the National Alliance for the Mentally Ill (NAMI) have in common? 75) _____
- A) They all try to improve services and educate the government and public about various problems.
 - B) They are all government-funded organizations that do research on mental disorders and related problems.
 - C) They are all working to increase the awareness of work-related stress and its impact on mental health.
 - D) They all provide training for psychologists and psychiatrists.

Answer: A

Diff: 1 Type: MC Page Ref: 466

Topic: Organized Efforts for Mental Health

Skill: Factual

Objective:

- 76) Which of the following was a result of the Americans with Disabilities Act? 76) _____
- A) Employers cannot discriminate against people with psychiatric problems.
 - B) Employers are now supposed to provide treatment through employee assistance programs.
 - C) Employers now must pay for mental health benefits for all of their employees.
 - D) Employers are encouraged to support universal and selective prevention interventions in the workplace.

Answer: A

Diff: 1 Type: MC Page Ref: 466

Topic: Organized Efforts for Mental Health

Skill: Factual

Objective:

- 77) Which of the following is TRUE regarding the use of mental health resources in private industry? 77) _____
- A) Many companies have recently begun providing psychological services through employee assistance programs.
 - B) Psychological services are provided on an extremely limited basis, even at the most elite private corporations.
 - C) Primary prevention programs have been routinely used in private industry for many decades.
 - D) Private industry typically does not acknowledge the importance of mental health-promoting factors in the work place and therefore dramatically underutilizes mental health resources.

Answer: A

Diff: 1 Type: MC Page Ref: 466

Topic: Organized Efforts for Mental Health

Skill: Factual

Objective:

- 78) In understanding and treating mental disorders, the World Health Organization at the present time has 78) _____
- A) almost completely ignored the impact of physical disease on mental health.
 - B) focused exclusively on physical diseases, not on mental health.
 - C) been very much aware of the interrelationship between physical, psychosocial, and sociocultural factors.
 - D) almost completely ignored ethnic and cultural differences.

Answer: C

Diff: 1 Type: MC Page Ref: 467

Topic: Organized Efforts for Mental Health/International Efforts

Skill: Factual

Objective:

- 79) The history of abnormal psychology makes it clear that 79) _____
A) international efforts in dealing with mental disorders are doomed to failure because there is no agreement on the definition of "disorder."
B) we are no further today in understanding mental disorders than we were in the time of Pinel, Dix, and Beers.
C) the field can be profoundly changed and improved through individual effort.
D) more domestic and fewer international efforts are needed.

Answer: C

Diff: 1 Type: MC Page Ref: 468

Topic: Challenges for the Future

Skill: Conceptual

Objective:

- 80) What impact have HMOs had on mental health care? 80) _____
A) Mental health treatment is more readily available.
B) The cost of mental health services has risen.
C) Greater emphasis has been placed on finding treatment approaches that are time and cost efficient.
D) The reliance on medical therapies has decreased.

Answer: C

Diff: 1 Type: MC Page Ref: 469

Topic: Unresolved Issues/The HMOs and Mental Health Care

Skill: Conceptual

Objective:

- 81) What treatment approach is most likely to be employed by an HMO to treat an anxiety disorder? 81) _____
A) pharmacotherapy B) aversion therapy
C) systematic desensitization D) flooding

Answer: A

Diff: 1 Type: MC Page Ref: 469-470

Topic: Unresolved Issues/The HMOs and Mental Health Care

Skill: Conceptual

Objective:

TRUE/FALSE. Write 'T' if the statement is true and 'F' if the statement is false.

- 82) Selective interventions are aimed at decreasing the incidence of a particular disease or disorder. 82) _____

Answer: True True False

Diff: 1 Type: TF Page Ref: 451

Topic:

Skill:

Objective:

- 83) Increasing the influence or presence of positive factors is an example of a universal intervention aimed at the prevention of psychological disorders. 83) _____

Answer: True False

Diff: 1 Type: TF Page Ref: 451

Topic:

Skill:

Objective:

- 84) Decreasing sociocultural risk factors for the development of psychological disorders is a common form of indicated prevention. 84) _____

Answer: True True False

Diff: 1 Type: TF Page Ref: 455

Topic:

Skill:

Objective:

- 85) Combined prevention programs are not as effective as those that use a single intervention strategy. 85) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 455
Topic:
Skill:
Objective:
- 86) Milieu therapy has been found to be superior to social learning programs. 86) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 456
Topic:
Skill:
Objective:
- 87) Community-based treatment programs typically provide the same services as hospitals, but at a lower cost. 87) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 456
Topic:
Skill:
Objective:
- 88) Aftercare programs are intended to reduce the occurrence of relapses. 88) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 456
Topic:
Skill:
Objective:
- 89) The deinstitutionalization effort was motivated, in part, by a desire to prevent the negative effects of long-term hospitalization. 89) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 457
Topic:
Skill:
Objective:
- 90) Deinstitutionalization has contributed substantially to both the homeless and prison populations. 90) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 457-458
Topic:
Skill:
Objective:
- 91) One of the main criteria for an involuntary commitment is whether the individual is a danger to him/herself or others. 91) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 459
Topic:
Skill:
Objective:
- 92) Once committed, a patient must accept treatment. 92) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 461
Topic:
Skill:
Objective:

- 93) Trained professionals are highly accurate in predicting who will commit a dangerous act. 93) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 461
Topic:
Skill:
Objective:
- 94) Mental health professionals tend to overpredict violence. 94) _____
Answer: True False
Diff: 2 Type: TF Page Ref: 461
Topic:
Skill:
Objective:
- 95) The duty-to-warn ruling, known commonly as the Tarasoff decision, requires therapists to act when suicide is suspected. 95) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 461-462
Topic:
Skill:
Objective:
- 96) The term insanity is a legal term, not a psychological one. 96) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 462
Topic:
Skill:
Objective:
- 97) The insanity defense is rarely used, but when it is, it is usually successful. 97) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 462-463
Topic:
Skill:
Objective:
- 98) The M'Naghten rule defines sanity as knowing right from wrong. 98) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 464
Topic:
Skill:
Objective:
- 99) Broadened definitions of insanity were a consequence of the Hinckley trial. 99) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 464
Topic:
Skill:
Objective:
- 100) A key function of professional organizations such as APA and APS is lobbying for mental health issues. 100) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 466
Topic:
Skill:
Objective:

101) The Americans with Disabilities Act protects the mentally ill from workplace discrimination. 101) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 466
Topic:
Skill:
Objective:

102) It is extremely difficult and unusual for a single person to have had an impact on the mental health system. 102) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 468
Topic:
Skill:
Objective:

103) Pharmacotherapy is the treatment for psychological conditions most frequently provided by HMOs. 103) _____
Answer: True False
Diff: 1 Type: TF Page Ref: 469
Topic:
Skill:
Objective:

SHORT ANSWER. Write the word or phrase that best completes each statement or answers the question.

104) Name and briefly describe the three subcategories of preventive interventions. 104) _____
Answer: Universal: efforts aimed at influencing the general population. Selective: efforts aimed at specific subgroups that are considered to be at risk for developing mental health problems. Indicated: efforts directed at high-risk individuals identified as having minimal symptoms of a mental disorder but who do not meet criteria for clinical diagnosis.
Diff: 1 Type: SA Page Ref: 451
Topic:
Skill:
Objective:

105) Discuss the three requirements for psychosocial health. 105) _____
Answer: Developing the skills needed for problem solving and relating to others, accurate frame of reference on which to build an identity and preparation for types of problems one is likely to encounter.
Diff: 1 Type: SA Page Ref: 452
Topic:
Skill:
Objective:

106) What are the three strategies that the United States government has used to address the drug abuse problem? How effective have these strategies been? 106) _____
Answer: Reducing the supply of drugs, providing treatment for those with substance abuse or dependence, and encouraging prevention are all approaches taken to combating the "drug problem." All have been found to be insufficient.
Diff: 1 Type: SA Page Ref: 453
Topic:
Skill:
Objective:

107) What principles guide the approach called milieu therapy? 107) _____
Answer: Staff in psychiatric hospitals communicate both negative and positive feedback to patients to encourage appropriate actions. Patients are encouraged to participate in decisions concerning them. There is self-government. Group cohesiveness is encouraged so that patients feel supported and so group pressure exerts control over patient behavior.

Diff: 1 Type: SA Page Ref: 456
Topic:
Skill:
Objective:

108) What are aftercare programs? Who is least likely to benefit from such programs? 108) _____

Answer: Aftercare programs are programs designed to facilitate adjustment back into the community following hospitalization. These are community-based live-in programs that typically help ease the former patient back into society. Those who have a criminal history or who tend to be transient tend to not do well in aftercare programs. Interestingly, those who have less severe symptoms may also not do well as facility staff do not recognize that they need assistance as much as those with more severe symptoms.

Diff: 1 Type: SA Page Ref: 456-457
Topic:
Skill:
Objective:

109) What have been some of the negative effects of deinstitutionalization? 109) _____

Answer: Despite the well-meaning intentions of the movement to release the mentally ill from inpatient facilities, this has led to many negative consequences. Many went from institutions to the streets, with little or no care. The community-based services that were to be available to this population were not there at all, or were insufficient. Many of the mentally ill do not receive that care that they desperately need.

Diff: 1 Type: SA Page Ref: 457-458
Topic:
Skill:
Objective:

110) What are the conditions, in addition to mental illness, that must be met in most states for someone to be involuntarily committed? 110) _____

Answer: Dangerous to self or others, incapable of providing for basic needs, unable to make responsible treatment decisions about hospitalization and in need of treatment in a hospital.

Diff: 2 Type: SA Page Ref: 459
Topic:
Skill:
Objective:

111) What factors increase the risk of violence in someone with mental illness? 111) _____

Answer: A history of violent behavior, psychotic symptoms, antisocial personality disorder, alcoholism and situational factors.

Diff: 2 Type: SA Page Ref: 461
Topic:
Skill:
Objective:

112) What is the importance of the Tarasoff case? 112) _____

Answer: This ruling established the legal obligation for a mental health professional to violate confidentiality in order to warn someone that a client has threatened to harm them. In Tarasoff II, the duty to warn was changed to the duty to protect a prospective victim. The duty to protect may be discharged if the therapist makes "reasonable efforts" to inform potential victims and an appropriate law enforcement agency of the pending threat. However, numerous other lawsuits in other jurisdictions have been adjudicated in confusing and inconsistent ways.

Diff: 1 Type: SA Page Ref: 461-462
Topic:
Skill:
Objective:

ESSAY. Write your answer in the space provided or on a separate sheet of paper.

113) What are the key tasks involved in universal interventions? Why is epidemiological research particularly important to these efforts?

Answer: Universal interventions focus on altering conditions that can cause or contribute to mental disorders (risk factors) and establishing conditions that foster positive mental health (protective factors). Epidemiological research supplies data on the incidence and prevalence of various disorders and the populations that are most affected. Equipped with this information, those who design universal interventions know where to look and what to look for.

GRADING RUBRIC: 8 points, 2 for each of two key tasks, 4 for explaining the importance of epidemiological data.

Diff: 1 Type: ES Page Ref: 451-452
Topic:
Skill:
Objective:

114) Discuss three principles that are commonly used to define insanity. How is insanity most commonly defined today?

Answer: The M'Naghten Rule emphasizes not knowing right from wrong at the time of the crime, while the irresistible impulse rule that holds that the person is not responsible if they could not avoid doing the act in question. The Durham rule or "product test" says the accused is not criminally responsible if the unlawful act was the product of a mental disease or defect. Thus, we see a movement from not knowing right from wrong, an emphasis on thought processes, to establishing if some illness was the cause of the behavior. Over time, the insanity defense has become more difficult to use, as a consequence of a number of controversial cases. Today the burden of proof is on the defense; the defense must establish that the defendant is insane, as opposed to the prosecution establishing sanity. Most states today employ the M'Naghten or the American Law Institute (ALI) Standard. The ALI standard requires a combination of M'Naghten and irresistible impulse - the individual must not know right from wrong and be moved by an irresistible impulse.

GRADING RUBRIC: 2 points each for each of 3 principles, 4 points for status of insanity today - 10 total.

Diff: 1 Type: ES Page Ref: 464-465
Topic:
Skill:
Objective:

- 1) B
- 2) C
- 3) B
- 4) B
- 5) A
- 6) C
- 7) A
- 8) B
- 9) B
- 10) C
- 11) A
- 12) B
- 13) D
- 14) D
- 15) C
- 16) A
- 17) B
- 18) C
- 19) A
- 20) B
- 21) D
- 22) D
- 23) D
- 24) C
- 25) B
- 26) D
- 27) C
- 28) A
- 29) D
- 30) B

- 31) D
- 32) C
- 33) A
- 34) C
- 35) B
- 36) C
- 37) A
- 38) C
- 39) C
- 40) D
- 41) A
- 42) A
- 43) D
- 44) D
- 45) A
- 46) D
- 47) B
- 48) C
- 49) B
- 50) D
- 51) A
- 52) D
- 53) B
- 54) A
- 55) B
- 56) C
- 57) D
- 58) A
- 59) B
- 60) B

- 61) A
- 62) D
- 63) B
- 64) B
- 65) D
- 66) B
- 67) A
- 68) A
- 69) C
- 70) B
- 71) B
- 72) A
- 73) B
- 74) A
- 75) A
- 76) A
- 77) A
- 78) C
- 79) C
- 80) C
- 81) A
- 82) FALSE
- 83) TRUE
- 84) FALSE
- 85) FALSE
- 86) FALSE
- 87) FALSE
- 88) TRUE
- 89) TRUE
- 90) TRUE

- 91) TRUE
- 92) FALSE
- 93) FALSE
- 94) TRUE
- 95) FALSE
- 96) TRUE
- 97) FALSE
- 98) TRUE
- 99) FALSE
- 100) TRUE
- 101) TRUE
- 102) FALSE
- 103) TRUE
- 104) Universal: efforts aimed at influencing the general population. Selective: efforts aimed at specific subgroups that are considered to be at risk for developing mental health problems. Indicated: efforts directed at high-risk individuals identified as having minimal symptoms of a mental disorder but who do not meet criteria for clinical diagnosis.
- 105) Developing the skills needed for problem solving and relating to others, accurate frame of reference on which to build an identity and preparation for types of problems one is likely to encounter.
- 106) Reducing the supply of drugs, providing treatment for those with substance abuse or dependence, and encouraging prevention are all approaches taken to combatting the "drug problem". All have been found to be insufficient.
- 107) Staff in psychiatric hospitals communicate both negative and positive feedback to patients to encourage appropriate actions. Patients are encouraged to participate in decisions concerning them. There is self-government. Group cohesiveness is encouraged so that patients feel supported and so group pressure exerts control over patient behavior.
- 108) Aftercare programs are programs designed to facilitate adjustment back into the community following hospitalization. These are community-based live-in programs, typically, that help ease the former patient back into society. Those who have a criminal history or who tend to be transient tend to not do well in aftercare programs. Interestingly, those who have less severe symptoms may also not do well as facility staff do not recognize that they need assistance as much as those with more severe symptoms.
- 109) Despite the well-meaning intentions of the movement to release the mentally ill from inpatient facilities, this has led to many negative consequences. Many went from institutions to the streets, with little or no care. The community-based services that were to be available to this population were not there at all, or were insufficient. Many of the mentally ill do not receive that care that they desperately need.
- 110) Dangerous to self or others, incapable of providing for basic needs, unable to make responsible treatment decisions about hospitalization and in need of treatment in a hospital.
- 111) A history of violent behavior, psychotic symptoms, antisocial personality disorder, alcoholism and situational factors.

- 112) This ruling established the legal obligation for a mental health professional to violate confidentiality in order to warn someone that a client has threatened to harm them. In *Tarasoff II*, the duty to warn was changed to the duty to protect a prospective victim. The duty to protect may be discharged if the therapist makes "reasonable efforts" to inform potential victims and an appropriate law enforcement agency of the pending threat. However, numerous other lawsuits in other jurisdictions have been adjudicated in confusing and inconsistent ways.
- 113) Universal interventions focus on altering conditions that can cause or contribute to mental disorders (risk factors) and establishing conditions that foster positive mental health (protective factors). Epidemiological research supplies data on the incidence and prevalence of various disorders and the populations that are most affected. Equipped with this information, those who design universal interventions know where to look and what to look for.
GRADING RUBRIC: 8 points, 2 for each of two key tasks, 4 for explaining the importance of epidemiological data.
- 114) The M'Naghten Rule emphasizes not knowing right from wrong at the time of the crime, while the irresistible impulse rule that holds that the person is not responsible if they could not avoid doing the act in question. The Durham rule or "product test" says the accused is not criminally responsible if the unlawful act was the product of a mental disease or defect. Thus, we see a movement from not knowing right from wrong, an emphasis on thought processes, to establishing if some illness was the cause of the behavior. Over time, the insanity defense has become more difficult to use, as a consequence of a number of controversial cases. Today the burden of proof is on the defense; the defense must establish that the defendant is insane, as opposed to the prosecution establishing sanity. Most states today employ the M'Naghten or the American Law Institute (ALI) Standard. The ALI standard requires a combination of M'Naghten and irresistible impulse - the individual must not know right from wrong and be moved by an irresistible impulse.
GRADING RUBRIC: 2 points each for each of 3 principles, 4 points for status of insanity today - 10 total.