Answer all multiple choice questions on your Scantron. Select the best answer for each question.

1. Which of the following effects is least likely to be associated with amphetamine use?
   a. increased alertness.
   b. increased self-confidence.
   c. stimulates sex drive.
   d. increased relaxation and sleep. x
   e. reduced feelings of fatigue and tiredness.

2. Alcohol is technically classed as a(n):
   a. stimulant drug.
   b. depressant or sedative drug x.
   c. narcotic drug.
   d. opiate.
   e. hallucinogen.

3. Which of the following is a drug sometimes used to treat alcoholism?
   a. PCP.
   b. DT.
   c. methadone.
   d. antabuse. x
   e. serotonin.

4. The general philosophy of Alcoholics Anonymous (AA) is that alcoholism is primarily:
   a. a social problem.
   b. an individual character defect.
   c. a disease. x
   d. treatable with drugs.
   e. best treated by individual psychotherapy.

5. Today the term “transinstitutionalization” is used to describe the shift from _______ to _________ in dealing with the mentally ill.
   a. hospital – jail x
   b. custody - treatment
   c. policy - mental health system
   d. untrained staff - trained staff
   e. psychotherapy - drug treatment

6. Using a combination of drug treatment and psychotherapy, the chances for a successful treatment outcome for someone with an antisocial personality disorder are likely to be:
   a. excellent.
   b. very good.
   c. sometimes good, sometimes poor.
   d. poor. x
   e. cannot say.

7. The “inmates” and “guards” in the Stanford Prison study:
   a. were normal, healthy college students. x
   b. were selected on the basis of personality tests as likely to break down under pressure.
   c. were friends and associates of the researcher (Phil Zimbardo).
   d. had previous experience with the criminal justice system.
   e. did not learn anything of value from the experience.
8. As described in class, the single argument in favor of deinstitutionalization that proved to be most persuasive to legislators was:
   a. more humane care.
   b. more effective treatment.
   c. less expensive care. x
   d. respect for individual rights.
   e. least restrictive environment.

9. If a defendant’s mental state is an issue in a court case, it is necessary to first determine __________ before raising the question of __________.
   a. intelligence; competence
   b. competence; insanity x
   c. the adequacy of the McNaughton rule; the Durham rule
   d. wrongfulness; mental defect
   e. insanity; competence

10. A psychiatrist is testifying in relation to a criminal defendant’s insanity plea. This expert witness asserts that the defendant has a several mental illness that caused the criminal action. This evidence is MOST critical to the _______ rule.
    a. mens rea
    b. Durham x
    c. McNaughton
    d. ALI
    e. GBI

11. Client “S” has been diagnosed as having a paraphilia. Client S is most likely to be:
    a. female.
    b. psychotic.
    c. an adolescent.
    d. over age 60.
    e. male. x

12. Civil War veterans helped make the addictive potential of _______ widely known.
    a. opioids x
    b. benzadrine
    c. cannabis
    d. cocaine
    e. amphetamines

13. Which of the following was not characteristic of the "bad old days" in mental hospitals in the 1920s and 1930s?
    a. warehousing
    b. custodial care
    c. difficult to get patients admitted x
    d. lack of treatment
    e. some brutality

14. Starting in the late 1940s, the possibility of discharging chronic mental patients into the community, produced an emphasis on ___ rather than ___.
    a. psychotherapy; psychoanalysis
    b. civil liberties; psychology
    c. psychology; civil liberties
    d. custody; brutality
    e. treatment; custody x

15. Supporters of deinstitutionalization in the 1970s promised:
    a. treatment closer to home
    b. protection of civil liberties
    c. more effective treatment
    d. smaller, more effective treatment facilities
    e. all of the above x
16. In their eagerness to reduce mental health costs in the 1970s, state legislators heard only half the reformers call. Which part did they not hear?  
   a. close the large and ineffective state hospitals  
   b. reduce patient populations in state hospitals  
   c. discharge more patients into the community  
   d. create more social and activity programs in state hospitals  
   e. replace state hospitals with small, active treatment community programs \( \times \)  

17. The dramatic reduction in state hospital populations that has occurred in the past 50 years is largely due to:  
   a. new cures for mental illness  
   b. the deinstitutionalization movement \( \times \)  
   c. new social and activity programs in state hospitals  
   d. court decisions requiring smaller state hospitals  
   e. Dorothea Dix  

18. An innovation in jail design that puts inmates and guards side-by-side, round the clock, not separated by interior bars is called:  
   a. normalization  
   b. minimum security jail  
   c. mainstreaming  
   d. direct supervision jail \( \times \)  
   e. simulation  

19. According to Zimbardo (Quiet Rage video), the major lesson of the Stanford Prison Study is that:  
   a. people are basically good  
   b. people are basically evil  
   c. people's actions are largely determined by the situations they are in \( \times \)  
   d. People's actions are largely determined by their personalities  
   e. ethics are not important in behavioral research  

20. Many users of ___ claim that the drug increases empathy and insight, has strong sensual and euphoric (pleasant emotion) effects, with the advantages over traditional psychedelics that there are fewer sensory distortions and unpleasant emotional reactions.  
   a. ecstasy \( \times \)  
   b. LSD  
   c. crack cocaine  
   d. powder cocaine  
   e. PCP  

21. Before he started doing sex research, Alfred Kinsey was a:  
   a. descriptive biologist \( \times \)  
   b. clinical psychologist  
   c. psychiatrist  
   d. general practice physician  
   e. sociologist  

22. Which of the following is an example of malingering?  
   A) intentionally faking a tic(a motor disorder) in order to avoid military service \( \times \)  
   B) intentionally faking back problems because the person likes being a patient  
   C) experiencing chest pains in response to intense stress  
   D) enjoying unnecessary medical tests  

23. If a person were experiencing numerous physical complaints, visiting doctors frequently, and expressed great concern about normal bodily symptoms, one would most likely suspect:  
   A) somatization.  
   B) body dysmorphic disorder.  
   C) pain disorder associated with psychological factors.  
   D) hypochondriasis. \( \times \)  

24. A man was certain that his chin was too big and was misshapen. He was very anxious in public and tried to work at home whenever possible. His condition could best be diagnosed as:  
   A) somatization disorder.  
   B) hypochondriacal disorder.
26. Behavioral therapists treating an hysterical disorder would be most likely to focus on:
A) identifying underlying emotional causes for the disorder.
B) helping the patient gain insight into how the disorder is reinforcing.
C) reducing the rewards available for displaying the disorder. x
D) replacing the primary gain with a secondary gain.

27. A clinician says, “I've studied the literature carefully, and I really doubt the legitimacy of that particular diagnostic category.” The “particular diagnostic category” to which that clinician refers probably is:
A) dissociative fugue.
B) dissociative identity disorder. x
C) dissociative amnesia.
D) dementia.

28. One reason that the personality disorders are difficult to treat is that the afflicted individuals:
A) enjoy their symptoms and do not seek change.
B) are frequently unaware that they have a problem. x
C) experience no distress and do not want treatment.
D) have accompanying mood disorders that must be treated first.

29. An individual with a diagnosed personality disorder is emotionally unstable, as well as impulsive and reckless.
   This person's diagnosis is most likely to be which of the following personality disorders?
A) borderline x
B) schizotypal
C) obsessive-compulsive
D) avoidant
E) dependent

30. Which of the following statements regarding the treatment of paranoid personality disorder is most accurate?
A) Drug therapy generally works best.
B) Psychodynamic therapy involving hypnotic regression is often effective.
C) Behavioral therapy usually works well, and in relatively few sessions.
D) Most therapies are of limited effectiveness, and progress slowly. x

31. The schizoid personality disorder differs from paranoid personality disorder in that:
A) those with schizoid personality disorder seek close affiliations with others, while those with paranoid personality do not.
B) paranoid personality disorder is treatable only through drug therapy; schizoid personality can be treated with psychotherapy.
C) women are more likely to have schizoid personality disorder than paranoid personality disorder; the opposite is true for men.
D) those with schizoid personality disorder desire to be alone; those with paranoid personality are alone because of suspiciousness. x

32. Which of the following statements is most accurate regarding antisocial personality disorder?
A) Most who have it are not treated, and most who are treated are not helped much. x
B) Most who have it are not treated, but most who are treated are helped substantially.
C) Most who have it are treated, but most who are treated are not helped much.
D) Most who have it are treated, and most who are treated are helped substantially.

33. “There's nothing out there for me. I can't stand other people, and I can't stand myself, either. I'm just really mad right now.” Such a statement would most likely be made by someone with which personality disorder?
A) borderline x
B) antisocial
C) narcissistic
D) paranoid


34. Psychodynamic theorists explain obsessive-compulsive personality disorder as a fixation at the _____ stage.
A) oral
B) anal  x
C) phallic
D) genital

35. Defendants who are actively hallucinating and experiencing delusions during the time of their trials are most likely to be:
A) judged not guilty of the crime by reason of insanity.
B) judged not guilty of the crime due to severe mental instability.
C) committed for treatment until they improve enough to be released.
D) committed for treatment until they improve enough to defend themselves.  x

36. Which of the following people would never have to stand trial for an act he or she might have committed?
A) one judged not guilty by reason of insanity  x
B) one judged mentally unstable at the time of the trial
C) one unable to assist in his or her defense at the time of the trial
D) one who had experienced criminal commitment

37. Who makes the final decision as to whether or not a person may be tried by the judicial system?
A) the courts  x
B) a panel of psychiatrists
C) a panel of psychologists
D) a court-appointed psychologist or psychiatrist

38. Which of the following situations would fit the criteria of insanity established by the M'Naghten rule?
A) a person experiencing a mental disorder at the time of the crime
B) a person who did not know right from wrong at the time of the crime  x
C) a person who did not know right from wrong and was experiencing a mental disorder at the time of the crime.
D) None of the answers is true.

40. If a mentally ill person committed murder, was convicted and sent to prison, but was also given treatment while in prison, that person probably lived in a state that had a _____ option.
A) guilty but mentally ill  x
B) guilty with diminished capacity
C) not guilty by reason of insanity
D) guilty by reason of insanity

41. A person who is accused of a crime cannot be convicted if he or she is mentally unstable either at the time of the crime or at the time of the trial. Competence to stand trial is important to ensure that the person:
A) knows whether he or she is guilty.
B) may argue coherently on the witness stand.  x
C) understand the charges and can consult with counsel.
D) can show the jury his or her state of mind at the time of the crime.

43. If a patient is assigned to a community mental health center inpatient facility instead of a mental hospital, the decision makers are applying the principle of:
A) minimum wage.
B) aftercare.  x
C) community residence/group home.
D) least restrictive facility.

44. The current code of ethics declares that a therapist should break confidentiality even without the client's consent:
A) never.
B) only when the client might cause self harm.
C) when the client or another person is threatened.  x
D) when it is deemed necessary to protect another person's property.

45. A person who becomes sexually aroused in the presence of stimuli most people in that person's society would not think appropriate is experiencing:
A) sexual dysfunction.
B) gender identity disorder.
C) paraphilia. x
D) hyperactive sexual desire.

47. What is the term for the use of and attraction to inanimate objects as a preferred method of achieving sexual excitement?
A) fetishism  x
B) pedophilia
C) voyeurism
D) exhibitionism

48. A man derives sexual arousal exclusively from dressing in women's clothing. Most likely, that person would be diagnosed as:
A) normal and healthy.
B) an exhibitionist.
C) a transvestite.  x
D) a homosexual.

49. Which of the following is not a DSM-IV-TR diagnostic category?
A) voyeurism
B) transvestism
C) homosexuality  x
D) frotteurism

51. In the 1940s a group of volunteers was put on a semistarvation diet for 6 months. During the latter part of the study:
A) several of the volunteers became anorexic.
B) the volunteers thought about food all the time.  x
C) they never thought about food because it made them hungry.
D) they tended to avoid meals because they did not get enough food.

52. The most common cognitive disturbance in anorexia nervosa is:
A) a distorted body image.  x
B) a revulsion toward food.
C) a major clinical depression.
D) views of others.

54. Most people with bulimia nervosa ______ compared to people with anorexia nervosa.
A) are younger
B) have less education
C) are of more normal weight  x
D) have obsessive thoughts about food

55. For people with bulimia nervosa, binge episodes produce feelings of:
A) control.
B) satisfaction.
C) anxiety and mania.
D) guilt and depression.  x

56. One would be most likely to hear cruel jokes on TV related to:
A) obesity.  x
B) anorexia.
C) bulimia.
D) gender.

57. The first step in treating anorexia nervosa is to:
A) correct family coping patterns.
B) resolve unresolved oral conflicts.
C) correct maladaptive thought patterns.
D) help the person to start to regain the lost weight.  x

58. An example of a disturbed cognition that might be present in one being treated for anorexia is:
A) I don't talk about my feelings; I never have.
B) My weight and shape determine my value.  x
C) I am free to speak my mind and others shouldn't turn away.
D) Whatever I feel, she has to feel too.

59. Intoxication is actually a form of:
A) tolerance.
B) poisoning.  x
C) hallucination.
D) substance dependence.

60. A frequent drug user finds that more and more drug is necessary to produce the same “high” that much lower doses once produced. That drug user is developing:
A) withdrawal symptoms.
B) tolerance.  x
C) hallucination.
D) intoxication.

61. According to a recent study by Henry Wechsler and his colleagues at the Harvard School of Public Health, the best predictor of college binge drinking is:
A) being an athlete.
B) being a white male.
C) having a business major.
D) living in a fraternity or sorority house.  x

62. The severe withdrawal symptoms seen in alcohol withdrawal are known as:
A) intoxication.
B) delirium tremens.  x
C) deleterious tremors.
D) alcohol-induced psychotic disorder.

63. A patient in an alcohol rehabilitation center tells you a detailed story about growing up in the mountains of Tennessee. Later, you find out that the person in fact never even visited Tennessee. A day later you visit the patient again, and the patient does not recognize you. Most likely, the patient is suffering from:
A) fetal alcohol syndrome.
B) cirrhosis.
C) withdrawal of delirium.  x
D) Korsakoff’s syndrome.  x

64. After the accident, Kendra was taken to the hospital with broken legs and arms. They almost immediately gave her a shot that reduced her pain. The shot was probably:
A) morphine.  x
B) a sedative.
C) a barbiturate.
D) an amphetamine.

65. All the opioid drugs are known as:
A) narcotics.  x
B) endorphins.
C) depressants.
D) hallucinogens.

67. “Why is crack becoming more popular in the high schools?” a friend asks. Your best data-based reply is:
A) “Because it's relatively cheap and fast acting.”  x
B) “Because it's relatively cheap, with a prolonged effect.”
C) “Because it's less addictive than snorted or injected cocaine.”
D) “Because it's less likely to produce overdose effects than snorted or injected cocaine.”

68. The chief danger of LSD use is:
A) the risk of developing drug tolerance.
B) the possibility of very powerful, sometimes negative, reactions.  x
C) the severity of withdrawal symptoms among even occasional users.
D) the universal occurrence of “flashbacks” among former users.
E) the likelihood of addiction

70. Most evidence for the effectiveness of self-help programs comes from:
A) carefully monitored longitudinal studies.
B) laboratory experimentation and generalization of findings.
C) cross-sectional surveys of self-help program participants.
D) testimonials from those who have gone through such a program. x

Optional Essay

The following essay question is completely optional. If you choose to answer it (and there is no pressure on you to do so) your 70 multiple choice questions will automatically count 1 credit each and the essay will count up to 30 credits.

If you do not choose to answer the essay, your multiple choice questions will count 1.429 each (70 X 1.429 = 100%)

Only for students who answer the essay question: NAME ________________________________

STUDENT ID# ________________________________

This question has 2 parts. Answer both of them. If you need more pages, ask the instructor.
Describe the unintended consequences of deinstitutionalization, and how it pitted state mental health systems against county mental health systems.