1. The official position of Alcoholics Anonymous is that alcoholism is:
   a. rooted in childhood.
   b. is heredity.
   c. a disease.*
   d. a personality disorder.
   e. a moral failing.

2. The first objective in treating a person with Anorexia Nervosa is:
   a. insight into reasons for starving oneself.
   b. correcting false interpersonal perceptions.
   c. changing the pathological eating patterns that are endangering the client’s health.*
   d. teaching relaxation techniques.
   e. teaching principles of adequate nutrition.

3. A treatment used with sexual predators such as rapists is:
   a. psychoanalysis.
   b. family therapy.
   c. direct sexual therapy (Masters and Johnson).
   d. victim empathy.*
   e. phenomenology.

4. The legal argument most likely to be used after a person has been found guilty of a crime is:
   a. guilty but mentally ill.
   b. knowledge of right and wrong.
   c. irresistible impulse.
   d. diminished capacity.*
   e. not guilty by reason of insanity.

5. The “knowledge of right and wrong test” is also known as the:
   a. irresistible impulse test.
   b. M’Naghten rule.*
   c. Durham decision.
   d. American Law Institute test.
   e. Diminished Capacity test.

6. The Stanford Prison Study was stopped early because, as Zimbardo explains:
   a. Human Subjects guidelines were not followed.
   b. university officials demanded that the experiment be stopped while the procedures were reviewed.
   c. participants were being emotionally damaged.*
   d. there was fear of a newspaper investigation.
   e. the researchers had learned all they wanted to from the experiment.

9. Impulsiveness, self-destructive behavior, and anger are most characteristic of which personality disorder?
   a. schizotypal
   b. avoidant
   c. dependent
   d. narcissistic
   e. borderline*
10. In the 1970s, deinstitutionalization was popular among state legislators primarily because:
   a. it promoted civil liberties.
   b. it was an alternative to incarceration in prison.
   c. it was less expensive than institutional care.*
   d. it was promoted by staff in mental hospitals.
   e. it was humane.

11. The reaction of communities against deinstitutionalization was based primarily on:
   a. concern for civil liberties.
   b. desire to save money spent in treatment.
   c. resistance to state regulations.
   d. a lack of resources and facilities to handle discharged patients.*
   e. the negative effects of hospital care upon patients.

12. The “inmates” and “guards” in the Stanford Prison study:
   a. were normal, healthy college students.*
   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.

13. The presence of ______ in American mental hospitals during the second world war helped stimulate the reform wave that came after the war:
   a. attendants
   b. psychologists
   c. self-help groups
   d. psychiatrists
   e. conscientious objectors*

14. When a police officer arrests a mentally ill person in a dangerous neighborhood for loitering, and takes them to court where the judge finds the person unable to stand trial and sends the person to Napa State Hospital, this process is called:
   a. deinstitutionalization.
   b. transinstitutionalization.
   c. dumping.
   d. compassionate care.
   e. mercy booking.*

15. Which of the following was most true of the de-institutionalization period in mental hospitals in the 1970s?
   a. relatively easy to get patients committed
   b. relatively easy to get patients discharged*
   c. frequent reports of brutality and abuse
   d. custodial care without much treatment
   e. few professional staff

16. Almost half of the patients currently in California state mental hospitals are:
   a. on judicial commitments.*
   b. addicted to opiates or cocaine (or crack).
   c. voluntary patients.
   d. sent there by the California Department of Corrections.
   e. officially classified as criminally insane.
17. Some civil libertarians believed that there were certain advantages in sending a mentally disturbed offender to jail rather than to a mental hospital. One of these advantages noted by civil libertarians was:
   a. there was better treatment available in jail.
   b. more trained staff in jail.
   c. less chance of abuse or assault in jail than in mental hospital.
   d. prisoners had fixed sentences; mental patients did not.*
   e. jail was less expensive than a mental hospital.

18. When he began his sex research, Alfred Kinsey did not feel he could:
   a. conduct laboratory experiments on sexual behavior.
   b. directly observe sexual behavior.
   c. rely on volunteers recruited through advertisements or notices.
   d. rely on the legal system to maintain the confidentiality of his data.
   e. All of the above.*

19. According to prosecutors, judges, and juries, the chief disadvantage of the Durham decision was that:
   a. it was harsh and punitive.
   b. it removed all discretion from judges and juries.
   c. it was difficult to define knowledge of right and wrong.
   d. definitions of mental disease (mental illness) were vague and ambiguous.*
   e. it is very difficult to predict future violence.

20. Which of the following least describes someone with an anti-social personality?
   a. inadequate conscience development
   b. pleasure seeking, with unrealistic goals
   c. ability to put up a good front, charming
   d. many close friends*
   e. low anxiety level

21. Philip Zimbardo (the Stanford jail study) attributes the major problems in American prisons to:
   a. difficulties in recruiting qualified staff.
   b. the types of inmates coming into prison (younger and more violent).
   c. lack of mental health resources in most prisons and jails.
   d. illegal drugs coming into the prison.
   e. social and situational stresses inside the prison.*

22. Many people who have been diagnosed as “Anti-social Personalities” are likely to improve:
   a. with psychotherapy.
   b. with drug therapy.
   c. with confinement in a psychiatric hospital.
   d. after the age of 40.*
   e. following a sex change operation.

23. The weight of people with bulimia nervosa usually:
   a. is considerably lower than normal.
   b. is slightly lower than normal.
   c. stays within a normal range.*
   d. is slightly higher than normal.
   e. is considerably higher than normal.

24. In treating sexual dysfunction Masters and Johnson recommend:
a. depth interviews.
b. token economy.
c. working with couples.*
d. a change in sexual orientation.
e. anti-depressive drugs.

25. LSD was first isolated from:
   a. a fungus in rye (ergot).*
   b. “magic mushrooms” (amanita muscaria)
   c. morning glory seeds.
   d. a small cactus growing in the Southwestern U.S.
   e. an animal tranquillizer.

26. Which of the following is an addicting drug?
   a. LSD
   b. mescaline
   c. marijuana
   d. hashish
   e. None of the above.*

27. PCP was first developed to be:
   a. an anesthetic or pain-killer *
   b. a safe substitute for heroin and other opiates.
   c. a stimulant.
   d. a treatment for over-active (hyper-kinetic) children.
   e. a sleeping pill.

28. Drugs like LSD and mescaline were originally called psychotomimetic because:
   a. they increased colored imagery.
   b. they affected the mind.
   c. they were “mind manifesting” they sometimes brought creative thoughts and revelations.
   d. they produced states of mind and behavior that resembled psychoses.*
   e. they were addictive.

31. The absence of parental love results in emotional detachment and the use of power to form relationships. This is most like a _______ explanation of the development of antisocial personality disorder.
   a. cognitive
   b. biological
   c. behavioral
   d. existential
   e. psychodynamic*

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.*
   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. Most types of treatment with histrionic patients focus on developing:
   a. independence from other people.
   b. an ability to relate to other people.
   c. greater reliance on guidance by parents.
   d. empathetic understanding of others’ feelings.*
   e. guilt as to the effect of the person’s behavior upon others.

34. A client being treated for avoidant personality disorder must increase the number of social contacts per day – defined as people greeted with at least the phrase, “Hello: How are you doing?” – in order later to engage in some desired activity. Most likely, the therapist has which theoretical background?
   a. psychodynamic
   b. cognitive
   c. behavioral*
   d. sociocultural
   e. existential

35. Group therapy is particularly useful in the treatment of avoidant personality disorder primarily because group therapy:
   a. allows those in the group to see that others have avoidant personality disorder, too.
   b. involves an eclectic combination of theoretical approaches.
   c. provides practice in social interactions.*
   d. requires attendance at therapy sessions.

37. 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.*

38. Who makes the final decision as to whether or not a person may be tried by the judicial system?
   a. the courts*
   b. a panel of psychiatrists
   c. a panel of psychologists
   d. a court-appointed psychologist or psychiatrist
   e. a public defender

40. Merv got into a fight and killed his opponent. When he went to trial, he had a mental breakdown. He did not know where he was and had hallucinations. He was unable to answer questions. He is likely to be sent to a mental institution because:
   a. he had a mental disorder.
   b. no crime was committed.
   c. he was mentally unstable at the time of the crime.
   d. he was mentally unstable at the time of the trial and unable to defend himself.*

41. The version of the insanity defense that declares that a person cannot be held responsible for his or her actions if they were the result of mental disease of mental defect is called the:
   a. Durham test.*
   b. M’Naghten rule.
   c. organic deficiency test.
d. irresistible impulse test.
e. ALI test.

42. Which of the following cases caused the uproar and outrage that led to a return to the M’Naghten rule in determining insanity?
a. Sirhan Sirhan’s assassination of Robert F. Kennedy.
b. Oliver North’s indictment in the Iran-Contra scandal.
d. A Bulgarian zealot’s attempted assassination of Pope John Paul II.

43. Civil commitment is for a person who:
a. has committed a crime but is judged not guilty by reason of insanity.
b. has committed a crime but is judged not able to tell right from wrong.
c. has voluntarily sought treatment for mental problems.
d. refuses treatment others think he or she needs.*

44. Why is the plea of not guilty by reason of insanity generally unsuccessful for serial killers?
a. Their crimes are motivated by their sexual fantasies.
b. They know what they are doing and that it is wrong.*
c. They do not have mental disorders.
d. They do not benefit from mental health service.
e. Their lawyers are often incompetent.

45. A person who becomes sexually aroused in the presence of stimuli most people in that person’s society would not be aroused by is experiencing:
a. sexual dysfunction.
b. gender identity disorder.
c. paraphilia.*
d. hyperactive sexual desire.
e. transference.

46. Which of the following is a sociocultural cause for male erectile disorder?
a. diabetes
b. loss of a job*
c. mild depression
d. performance anxiety
e. heavy use of marijuana

47. A client suffering from sexual aversion learns to think thoughts like, “It’s OK to enjoy intercourse; sharing love with my spouse is a good thing, not a sin” whenever negative thoughts about sexual activity occur. Most likely, the therapist treating this client is approaching the dysfunction from which theoretical perspective?
a. affectual awareness
b. psychodynamic
c. cognitive*
d. biological
e. humanistic-existential

48. What is the term for the use of and attraction to inanimate objects as a preferred method of achieving sexual excitement?
a. bestiality
b. pedophilia
c. voyeurism

d. exhibitionism

e. fetishism*

49. A man derives sexual arousal from dressing in women’s clothing. Most likely, that person would be diagnosed as:
   a. normal and healthy.
   b. an exhibitionist.
   c. a transvestite*.
   d. a homosexual.
   e. a pedophile.

51. What is the most common outcome for individuals with anorexia nervosa?
   a. recovery*
   b. starving to death
   c. suffering irreversible physical harm
   d. suffering lifelong physiological trauma

52. The peak age range for the development of anorexia nervosa is:
   a. 3-5.
   b. 7-10.
   c. 10-13.
   d. 14-19.*
   e. 20-25.

53. A modern explanation of why many anorexic people continually have food-related thoughts and dreams is that:
   a. thoughts of food occur in order to avoid eating.
   b. fantasy about food fulfills basic needs of the id.
   c. such thoughts and dreams are the cause of food deprivation.
   d. such thoughts and dreams are the result of food deprivation.*

54. The psychological disorder that anorexia nervosa most resembles is:
   a. simple phobia.
   b. narcissistic personality disorder.
   c. borderline personality disorder.
   d. social phobia.
   e. obsessive-compulsive disorder.*

55. The treatment that is currently the most popular for restoring weight among anorexic persons is:
   a. drug therapy.
   b. intravenous feeding.
   c. supportive psychotherapy.
   d. supportive nursing care and a high-calorie diet.*
   e. aversive conditioning.

56. Tanya is a behavioral therapist who exposes bulimic patients to situations that usually cause binge episodes and then prevents them from binge eating. The technique that she is using is called:
   a. skillful frustration.
   b. temptation-restriction.
   c. willpower reinforcement.
d. aversive conditioning.
e. exposure and response prevention.*

57. A college professor’s work performance recently has deteriorated, and the professor’s colleagues find the professor difficult to talk to. If this is due to a problem with drugs, the best description of this professor’s behavior as detailed above would be:
   a. substance dependence.
   b. substance abuse.*
   c. tolerance.
   d. withdrawal.
   e. substance addiction.

58. Intoxication is actually a form of:
   a. tolerance.
   b. withdrawal.
   c. hallucination.
   d. substance dependence.
   e. poisoning.*

59. A person’s hands and eyelids are shaking, and that person is experiencing visual and tactile hallucinations. Of the following, that person is most likely experiencing:
   a. Korsakoff’s syndrome.
   b. narcotic attraction.
   c. delirium tremens.*
   d. cannabis toxicity.
   e. amphetamine psychosis.

60. The scarring of the liver caused by alcohol consumption is known as:
   a. cirrhosis.*
   b. hemorrhaging.
   c. vasoconstriction.
   d. Korsakoff’s syndrome.
   e. hallucinosis.

61. Unlike the opioid drugs morphine and heroin, methadone:
   a. is not narcotic.
   b. is a central nervous system depressor.
   c. causes nausea.
   d. is synthetic.*

62. Mario felt awake and alive after taking the drug. He felt as though he could conquer the world after taking:
   a. heroin.
   b. alcohol.
   c. cocaine.*
   d. a barbiturate.
   e. LSD.

63. Lola’s physician prescribed diet pills. Which of the following drugs are they most likely to have contained?
a. cocaine  
b. morphine  
c. barbiturates  
d. ergot  
e. amphetamines*  

64. The stimulant used by more people in the world than any other is:  
a. nicotine.  
b. cocaine (including free-based and crack forms).  
c. amphetamines.  
d. ergot.  
e. caffeine.*  

65. The chief danger of LSD use is:  
a. the risk of developing drug tolerance.  
b. the possibility of very powerful, sometimes negative, reactions.*  
c. the severity of withdrawal symptoms among even occasional users.  
d. the universal occurrence of “flashbacks” among former users.  
e. the possibility of becoming addicted.  

67. 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.*  
e. studies using placebos.