Please answer all questions on your Scantron. Select the best answer for each question.

1. The basis of operant conditioning is that:
   a. things that occur together in time or space will become associated and one will evoke the other.
   b. organisms faced with impossible choices will become neurotic.
   c. suppression of the classic fight-flight pattern will produce neurosis.
   d. organisms tend to behave in ways that pay off and avoid behavior associated with bad effects.*
   e. All of the above.

2. A behavioral contract in which a client agrees to donate money to a disliked charity if he violates the terms of the contract, is an example of:
   a. operant conditioning.*
   b. classical conditioning.
   c. desensitization.
   d. biofeedback.
   e. existential-humanist approach.

3. Learning theory approaches to psychotherapy (behavior therapy) had their origins in:
   a. the clinic.
   b. observations of animals in their natural environment.
   c. the experimental laboratory.*
   d. the zoo.
   e. the school.

4. An ongoing inability to form new memories following a trauma is called:
   a. dissociation.
   b. fugue.
   c. anterograde amnesia.*
   d. retrograde amnesia.
   e. Korsakoff’s syndrome.

6. Working in Pavlov’s lab, Yerofeeva produced a neurotic dog (the first one produced experimentally) when she:
   a. selected dogs who were excitable and then presented them with experimental tasks involving unnecessary delay.
   b. made shock the signal for food and then tried to generalize the response to other parts of the animal’s body. *
   c. presented the animal with a judgment task (i.e. discrimination between two similar stimuli) that was difficult for him.
   d. shocked the animal whenever he approached the food dish.

7. “Anxiety” comes from a Latin word meaning:
   a. danger.
   b. unhappiness.
   c. narrow, hemmed in.*
   d. empty.

8. Which of the following would be considered a euphemism?
a. Buffalo, New York
b. Moose Jaw, Canada
d. Cambridge, England
e. None of the above.*

9. Which of the following best expresses the primary function of an art therapist in a mental hospital?
   a. uses art as a therapeutic tool to establish interpersonal relationships with patients.*
   b. teaches patients about art to increase the educational value of the hospital experience.
   c. teaches patients how to draw and paint with the idea that they can earn money working with art.
   d. creating a pleasant diversion for long-stay patients.
   e. uses art as a diagnostic tool.

10. Under the Lanterman-Petris-Short Act, when a person is first brought to a mental health facility as a danger to themselves, they can be committed for a period of _____ on the signature of the admitting physician.
    a. 24 hours
    b. 72 hours*
    c. 2 weeks
    d. 31 days
    e. until they are no longer a danger to themselves.

11. Which of the following is not a criterion for involuntary commitment under the Lanterman-Petris-Short Act?
    a. moral violation*
    b. danger to self
    c. danger to others
    d. grave disabilities
    e. All of these are criteria.

12. A Psychiatric Technician in a California mental hospital would most likely have a:
    a. Ph.D.
    b. M.D.
    c. MFCC
    d. R.N.
    e. None of the above.*

13. To rename “the hole” (isolation room) in a juvenile detention facility as “the meditation room” illustrates the use of:
    a. antinomy.
    b. euphemism.*
    c. dysphemism.
    d. paleologic.
    e. desensitization.

14. As discussed in class, paleologic can best be overcome through:
    a. desensitization.*
    b. flooding.
    c. operant conditioning.
    d. classical conditioning.
    e. a behavioral contract.
15. Which of the following behaviors is common in the recovery stage of response to a flood or tornado:
   a. hysteria.
   b. person appears stunned or dazed.
   c. person repeatedly talks about the catastrophe.*
   d. person tends to be highly suggestible.
   e. person tends to be very inefficient even when doing simple tasks.

17. The theories and rationale of psychoanalysis originally came from:
   a. the clinic.*
   b. the laboratory.
   c. observation of wild animals in their natural habitat.
   d. the work of distinguished university scholars and researchers.
   e. observations of children interacting with their parents.

18. During the Vietnam War, the rate of psychiatric breakdowns in combat was ____ the rate during the Second World War and the Korean Conflict.
   a. lower than*
   b. higher than
   c. equal to

19. Typical symptoms of post-traumatic stress disorder include all of the following except:
   a. re-experiencing the traumatic event.
   b. avoidance of situations reminding the person of the event.
   c. excessive and inappropriate laughter (at wrong times).*
   d. reduced responsiveness.
   e. increased arousal.

20. When tornado survivors appear stunned and dazed, and show disorientation and memory loss, they are in the _____ phase of the disaster syndrome.
   a. surprise
   b. shock*
   c. suggestibility
   d. recovery
   e. PTSD

21. In treating combat disorders, _____ refers to creating a “doing (can do) role” that emphasizes personal responsibility.
   a. immediacy
   b. support
   c. proximity
   d. expectancy*
   e. desensitization

22. Which of the following is generally characteristic of paleologic?
   a. sweet-sounding terms (“verbal sugar coating”)
   b. unwillingness to hear contrary evidence*
   c. attracts attention
   d. short-lived effects
e. can be overcome through rational argument

23. At a mental hospital, the therapist who schedules the movies, the dances, and sports events is most likely to be called a _____ therapist.
   a. occupational
   b. industrial
   c. psychological
   d. recreational*
   e. dance or movement

24. A conflict between two equally valued principles, such as the rights of the individual and the protection of society, is called a(n):
   a. euphemism.
   b. paleologic.
   c. myth of mental illness.
   d. antinomy.*
   e. anxiety hierarchy

25. Dr. Thompson collects information in order to describe and draw inferences about an individual’s psychological disorder. Dr. Thompson is engaged in:
   a. therapy.
   b. predicting dangerousness.
   c. research.
   d. psychodiagnosis.*
   e. psychoanalysis.

26. A psychologist says, “Juan’s abnormal behavior is likely due to a combination of biology and inadequate interpersonal skills.” The psychologist is:
   a. predicting the future symptoms on Juan.
   b. giving Juan a psychodiagnosis.
   c. offering an explanation for Juan’s problems.*
   d. describing how to control Juan’s symptoms.
   e. ignoring Juan’s symptoms.

27. Therapy is most closely related to which of the four objectives of abnormal psychology?
   a. Explanation
   b. Prediction
   c. Control*
   d. Definition
   e. Decision

28. When psychologists talk about the control of abnormal behavior, they mean that they:
   a. seek to understand the underlying cause of that behavior.
   b. restrict the freedom of dangerous clients.
   c. try to anticipate the future behaviors of clients.
   d. take charge of the client’s life.
   e. use therapy to alter client behavior.*
29. Clinical psychologists usually have _____ degrees, unlike psychiatrists, who have _____ degrees.
   a. bachelor’s (B.S.); medical (M.D.)
   b. medical (M.D.); Ph.D.
   c. doctorate (Ph.D. or Psy.D.); medical (M.D.)*
   d. master’s (M.S.); doctorate (Ph.D.)
   e. master’s (M.S.); medical (M.D.)

30. Linda, Jayne, and Sheryl all are called “doctor.” All are mental health professionals. However, Linda has a Psy.D., Jayne has an M.D., and Sheryl has a D.S.W. We can predict that:
   a. Sheryl is a psychiatrist.
   b. Linda is a social worker.
   c. Linda is a clinical psychologist.*
   d. Jayne is a clinical psychologist.
   e. Sheryl is a psychiatric nurse.

31. When it comes to defining abnormal, which terms are accurately paired?
   a. Cultural universality – deviation from ideal mental health
   b. Infrequent – statistical deviation*
   c. Personal discomfort – multicultural perspective
   d. Cultural relativity – deviation from ideal mental health
   e. Personal discomfort – moral violation

32. “There are at least two problems with it: First, it does not distinguish desirable from undesirable behavior; second, it means that anyone who is original or nonconforming is likely to be defined as abnormal.” What criterion for defining abnormality is being discussed?
   a. Subjective discomfort
   b. Deviation from ideal mental health
   c. Statistical deviation*
   d. DSM-IV definition
   e. Danger to self

33. During a diagnostic interview, a psychiatrist asks the client if he or she knows what day it is, what his or her name is, and where he or she is. These questions are designed to assess:
   a. disorientation.*
   b. discomfort.
   c. subjective distress.
   d. dysfunction.
   e. danger to others.

34. Abnormal behavior is defined in the textbook as behavior that:
   a. departs from cultural norms and harms the individual or others.*
   b. is deviant in every culture.
   c. departs from cultural norms.
   d. represents severe mental illness.
   e. is dangerous to self or others.

35. It is generally believed that prehistoric people considered the major cause of serious abnormal behavior to be:
   a. biological disequilibrium.
   b. genetic inheritance.
   c. childhood mistreatment.
d. demonology.*
e. trephination.

36. Trephining refers to the process of:
a. putting leeches on the body to remove bad blood.
b. making a person chant and pray to drive out evil spirits.
c. changing one’s diet to improve one’s physical and mental health.
d. boring a hole in the skull to let demons escape.*
e. talk therapy.

37. The first biogenic approach to abnormal behavior can be traced to:
a. the rise of the Christian Church during the Dark Ages.
c. Hippocrates in ancient Greece.*
d. Galen in ancient Rome.
e. Freud in 19th Century Vienna.

38. Imagine that half the clerical employees in one building of a school begin to have headaches, feel agitated, scratch themselves furiously, feel numbness in their fingers, and faint. There is no biological explanation. This incident would most likely be seen by psychologists as an example of:
a. mass hysteria.*
b. exorcism.
c. hypnotic susceptibility.
d. mesmerism.
e. trephination.

39. Who ordered the chains to be removed from inmates at a mental asylum and is considered a founder of the moral treatment movement?
a. Clifford Beers
b. Johann Weyer
   c. Philippe Pinel  *
d. Dorothea Dix
e. Sigmund Freud

40. A psychologist who uses the words patient, mental illness, and cure when discussing disorders is using the _____ model.
a. psychodynamic
b. psychogenic
c. statistical
d. medical*
e. humanistic

41. A person’s observable physical or behavioral characteristics are the:
a. same thing as their genotype.
b. result of inheritance only.
c. result of environmental factors only.
d. same thing as their phenotype.*

e. result of diet and exercise.

42. The two main distinguishing ideas in the psychodynamic model are:
a. childhood experiences explain adult personality; anxiety results from unconscious conflicts.*
b. the causes of disorders are largely conscious; culture determines the expression of symptoms of disorder.
c. diathesis and stress.
d. parents teach children abnormality; symptoms start with biology.
e. people strive for rewards; people avoid punishment.

43. If a loud siren is sounded, any newborn infant will automatically scream. In classical conditioning terminology, the siren is:
a. a conditioned response.
b. an unconditioned response.
c. an unconditioned stimulus.*
d. a conditioned stimulus.
e. an extinguished response.

44. In his original experiments, Pavlov paired a bell tone with the presentation of food. After a while, the bell tone alone could provide salivation. When this happened:
a. the bell became a conditioned stimulus.*
b. the animal learned a new operant.
c. the animal showed a neurotic pattern of behavior.
d. the salivation became an unconditioned response.
e. the bell became the conditioned response.

45. Watson and Rayner’s classic experiment with “Little Albert” was designed to explain the development of:
a. cognitive disorders.
b. neuroses.
c. depression.
d. stress.
e. phobias.*

46. A kindergarten teacher wants to reduce the amount of aggressiveness children display in her class and on the playground. Using operant conditioning principles, the teacher should:
a. use negative reinforcers to decrease the behavior.
b. pair aggressiveness with some pleasant stimulus.
c. eliminate the reinforcement associated with aggressiveness.*
d. encourage the children to get the aggressiveness out of their systems.
e. ask children to discuss aggressiveness.

47. Cognitive theorists emphasize that disturbed individuals:
a. come from disturbed families.
b. live in stressful environments.
c. have irrational and maladaptive thoughts.*
d. are deficient in interpersonal skills.
48. The humanistic and existential approaches have been most successful at:
   a. explaining the relationship between inheritance and stress.
   b. creating a coherent theory of behavior.
   c. describing the human condition.*
   d. developing a scientific body of evidence for its concepts.
   e. explaining the origin of phobias.

49. Changes in the DSM-IV acknowledge that different populations show disorders in different ways, suggesting that the _____ model of psychopathology is growing in influence in the mental health profession.
   a. behavioral
   b. multicultural*
   c. family systems
   d. psychoanalytic
   e. existential

50. Alma has recurrent terrifying episodes that last twenty minutes. Her heart beats so fast she thinks she is having a heart attack, she sweats profusely, and she feels a sense of doom. For more than a month she has feared having another episode. An appropriate diagnosis is:
   a. panic disorder.
   b. panic attack.*
   c. agoraphobia.
   d. generalized anxiety disorder.
   e. posttraumatic stress disorder.

51. Laurel has been diagnosed with generalized anxiety disorder. To meet the criteria for making this diagnosis,
   a. she must have a specific situation that she fears and avoids.
   b. she must fear leaving home.
   c. her symptoms must have lasted for six months or more.*
   d. she must have had four or more panic attacks in the past year.
   e. she must avoid social situations.

52. Which explanation for panic disorder would most likely be offered by a cognitive-behavioral theorist?
   a. “A malfunction in the receptors monitoring oxygen in the blood causes the patient to feel that he or she is suffocating when, in fact, he or she isn’t.”
   b. “If intense unconditioned stimuli are paired with many environmental stimuli, the disorder is likely to develop.”
   c. “When ego defenses have weakened because of overuse, forbidden sexual impulses threaten to break into consciousness, causing an attack.”
   d. “When small changes in the body are misinterpreted as dreadful events, these beliefs start a positive-feedback loop that brings on an attack.”*

53. Karen suffers from panic disorder and has been taking antidepressant medication. We can expect that:
   a. her anxiety will be permanently reduced after she stops taking the medication.
   b. the medication will increase the rate of panic attacks.
c. the medication was of no use in treating her.
d. her anxiety will return when she stops taking the medication.*

55. Agoraphobia seems to be most closely related to which of these disorders?
   a. Posttraumatic stress disorder
   b. Obsessive-compulsive disorder
   c. Panic disorder*
   d. Dissociative disorder
   e. Generalized Anxiety Disorder

56. Phobias seem to run in families. Assuming that this conclusion comes from family studies, why can’t we state that the disorder is caused by genetics?
   a. Because it is just as likely that children model the behavior of their parents.*
   b. Because classical conditioning can account for these results.
   c. Because we do not know how genetics influences the central nervous system.
   d. Because preparedness influences the likelihood of defective genes being transmitted to offspring.
   e. Because operant conditioning can account for these results.

57. Julie suffers from agoraphobia. Her therapist urges her to take longer and longer walks outside of the home with the therapist. What kind of therapy is Julie receiving?
   a. Cognitive restructuring
   b. Modeling
   c. Systematic desensitization
   d. Substitution therapy
   e. Exposure therapy*

58. A psychologist who supports a cognitive-behavioral approach would be likely to say which of the following when explaining the cause of obsessive-compulsive disorder?
   a. “Excessive use of defense mechanisms helps the person redirect his or her unacceptable impulses into more acceptable behaviors.”
   b. “Thoughts and actions that reduce anxiety are done repetitively.”*
   c. “Some individuals’ personalities need high levels of autonomic nervous system arousal, and repetitive thoughts and behaviors satisfy that need.”
   d. “Certain thoughts and actions are the result of abnormal activity in particular brain centers.”

59. Pedro has the most common form of dissociative amnesia. He was a witness to his father’s murder but has no memory of the event. This illustrates:
   a. depersonalization.
   b. fugue.
   c. localized amnesia.*
   d. generalized amnesia.
   e. conversion reaction.

60. Teresa has an intense and terrifying feeling that she is no longer real and that she is looking at herself and the world from a distance. These feelings have caused major impairments in her work and personal life. The most likely diagnosis is:
   a. dissociative amnesia.
   b. dissociative identity disorder.
   c. somatoform disorder.
d. depersonalization disorder.*
e. conversion disorder.

61. As Will approached the witness stand, he stopped and clutched his throat. He had to leave the courtroom because he was unable to speak. His condition might be diagnosed as:
a. panic disorder.
b. social phobia.
c. agoraphobia.
d. depersonalization disorder.
e. conversion disorder.*

62. Zelda became very angry at her therapist for not being willing to lower her therapy fees. Zelda’s therapist replied, “You are angry at me now just like you have been angry at your mother for not giving you the love you needed as a child.” Zelda’s therapist is:
a. working through.
b. interpreting transference.
c. interpreting free association.
d. interpreting counter-transference.*
e. making a diagnosis.

63. A belief in free will and an emphasis on self-concept and phenomenology underscore the ____ approach to therapy.
a. action-oriented
b. psychoanalytic
c. humanistic-existential*
d. cognitive-behavioral
e. biological

64. Marcel is a pianist but is terribly frightened to give recitals. His therapist first teaches him how to relax. Then Marcel develops a hierarchy of scenes having to do with playing the piano, which increase in the amount of anxiety they cause him. Finally, he relaxes while imagining each scene. This best illustrates:
a. covert sensitization.
b. gestalt therapy.
c. systematic desensitization.*
d. implosion.
e. flooding.

65. When an unacceptable behavior is paired with an unpleasant stimulus, the therapy being used is called:
a. systematic desensitization.
b. aversive conditioning.*
c. a shaping procedure.
d. a non-contingent reinforcement procedure.
e. flooding.

66. Stacey is frightened of flying in airplanes. Lana is addicted to cigarettes. Which of the following is the best match of client and behavior therapy?
a. Stacey – systematic desensitization; Lana – aversive conditioning*
b. Stacey – token economy; Lana – flooding
c. Stacey – aversive conditioning; Lana – token economy
d. Stacey – punishment; Lana – systematic desensitization