MULTIPLE CHOICE

1. The best description of the multidimensional integrative approach to understanding psychopathology is that it is based on
   a. biological and psychological causes.
   b. biological causes only.
   c. learned helplessness and social learning theory.
   d. the physical structure and chemical processes of the brain.
   ANS: A  DIF: Moderate  REF: One-Dimensional versus Multidimensional Models
   OBJ: 1 APALO: 1.3.e  MSC: TYPE: Conceptual

2. Within the multidimensional integrative approach to understanding psychopathology, learned helplessness is considered a __________ dimension.
   a. biological
   b. physiological
   c. emotional
   d. psychological
   ANS: D  DIF: Moderate  REF: One-Dimensional versus Multidimensional Models
   OBJ: 1 APALO: 1.3.e  MSC: TYPE: Conceptual

3. The basis of the multidimensional integrative approach to understanding psychopathology is that each dimension (psychological, biological, emotional, etc.)
   a. operates independently.
   b. is sufficient to cause pathology.
   c. builds on the dimension that precedes it.
   d. is influenced by the other dimensions.
   ANS: D  DIF: Moderate  REF: One-Dimensional versus Multidimensional Models
   OBJ: 1 APALO: 1.3.e  MSC: TYPE: Conceptual

4. Your uncle spent most of his teen years in a hospital undergoing treatment for a severe physical illness. As an adult, he is rather shy and withdrawn, particularly around women. He has been diagnosed with social phobia, and you believe that it is entirely due to lack of socialization during his teen years. Your theory or model of what caused his phobia is
   a. multidimensional.
   b. integrative.
   c. one-dimensional.
   d. biological.
   ANS: C  DIF: Easy  REF: One-Dimensional versus Multidimensional Models
   OBJ: 1 APALO: 1.3.e  MSC: TYPE: Applied

5. Amanda is 12 years old, and her sister Samantha is five. While riding in a car with their parents, the girls witness a major automobile accident where a number of people are injured. The girls react very differently to the accident. This is probably due to
   a. biological differences.
   b. developmental differences.
   c. psychological differences.
   d. sociocultural differences.
   ANS: B  DIF: Moderate  REF: One-Dimensional versus Multidimensional Models
   OBJ: 1 APALO: 1.2.a(4)  MSC: TYPE: Applied  NOT: NEW
6. The most accurate way to think of genes is that they
   a. set boundaries for our development.
   b. determine both our physical and psychological characteristics.
   c. determine physical but not psychological characteristics.
   d. actually have very little to do with any of the characteristics that we display.

   ANS: A  DIF: Difficult  REF: Genetic Contributions to Psychopathology
   OBJ: 2 APALO: 1.2.a(3)  MSC: TYPE: Conceptual

7. Many factors that determine whether genes are “turned on” are in the environment in the form of
   a. social influences.
   b. parental influences.
   c. cultural influences.
   d. social and cultural influences.

   ANS: D  DIF: Moderate  REF: Genetic Contributions to Psychopathology
   OBJ: 2 APALO: 1.2.a(3)  MSC: TYPE: Factual

8. Most psychological disorders appear to be influenced by many individual genes rather than caused by
   one single gene, a type of influence referred to as
   a. multigenic.
   b. polygenic.
   c. unigenic.
   d. morphogenic.

   ANS: B  DIF: Easy  REF: Genetic Contributions to Psychopathology
   OBJ: 2 APALO: 1.2.a(3)  MSC: TYPE: Factual

9. The most recent estimates of the contribution of genetics to the development of personality
   characteristics such as shyness or activity level are approximately __________ percent.
   a. 10 - 20
   b. 30 - 50
   c. 75 - 85
   d. zero.

   ANS: B  DIF: Moderate  REF: Genetic Contributions to Psychopathology
   OBJ: 2 APALO: 1.2.a(3)  MSC: TYPE: Factual

10. Recent evidence regarding genetic influence on most psychological disorders has shown that
    a. single genes are usually responsible for psychological disorders.
    b. genes that influence psychopathology are usually recessive.
    c. there is no evidence that genes influence psychopathology.
    d. multiple genes interact, with each gene contributing a small effect.

    ANS: D  DIF: Moderate  REF: Genetic Contributions to Psychopathology
    OBJ: 2 APALO: 1.2.a(3)  MSC: TYPE: Factual

11. In the diathesis-stress model, “diathesis” refers to
    a. an inherited disorder.
    b. conditions in the environment that can trigger a disorder depending upon how severe the
       stressors are.
    c. an inherited tendency or condition that makes a person susceptible to developing a
       disorder.
    d. the inheritance of multiple disorders.

    ANS: C  DIF: Moderate  REF: Genetic Contributions to Psychopathology
    OBJ: 2 APALO: 1.2.a(3)  MSC: TYPE: Factual
12. In the diathesis-stress model, “stress” refers to
   a. life events, in combination with an inherited tendency, that trigger a disorder.
   b. inherited tendencies, in combination with life events, that trigger a disorder.
   c. defective genes.
   d. exposure to very unusual and extreme environmental conditions.

   ANS: A    DIF: Easy    REF: Genetic Contributions to Psychopathology
   OBJ: 2 APALO: 1.2.a(3)    MSC: TYPE: Factual

13. According to the diathesis-stress model, psychopathology is the result of the
   a. interaction between normal and defective or damaged genes.
   b. stress level of an individual and how stress is managed in a person’s life.
   c. family history of an individual.
   d. interaction of an inherited tendency and events in the person’s life.

   ANS: D    DIF: Moderate    REF: Genetic Contributions to Psychopathology
   OBJ: 2 APALO: 1.2.a(3)    MSC: TYPE: Factual

14. According to the diathesis-stress model, identical twins raised in the same household will
   a. not necessarily have the same disorders because of potential differences in their diathesis.
   b. have the same disorders because their diathesis and stress are exactly the same.
   c. not necessarily have the same disorders because of potential differences in their stress.
   d. have no more likelihood of sharing a disorder than any other two individuals randomly
      selected from the population.

   ANS: C    DIF: Moderate    REF: Genetic Contributions to Psychopathology
   OBJ: 2 APALO: 1.2.a(3)    MSC: TYPE: Factual

15. According to the diathesis-stress model, which statement is true?
   a. Given a certain level of stress, a disorder will develop.
   b. Once a diathesis for a particular disorder is inherited, the disorder will eventually develop.
   c. An individual’s inherited tendencies will influence the stressful life events the person
      encounters.
   d. It is possible to inherit a diathesis and never develop a disorder.

   ANS: D    DIF: Moderate    REF: Genetic Contributions to Psychopathology
   OBJ: 2 APALO: 1.2.a(3)    MSC: TYPE: Conceptual

16. The model that describes the development of psychopathology as a combination of an inherited
    predisposition and the events that have occurred in the individual’s life is the ________ model.
    a. diathesis-stress
    b. genetic
    c. bio-behavioral
    d. psychoanalytic

   ANS: A    DIF: Moderate    REF: Genetic Contributions to Psychopathology
   OBJ: 2    MSC: TYPE: Factual

17. The idea that our inherited tendencies influence the probability that we will encounter stressful life
    events is a characteristic of the
    a. diathesis-stress model.
    b. reciprocal gene-environment model.
    c. genetic model.
    d. psycho-social model.

   ANS: B    DIF: Moderate    REF: Genetic Contributions to Psychopathology
   OBJ: 2 APALO: 1.2.a(3)    MSC: TYPE: Conceptual
18. John has inherited a personality trait that makes him more likely to keep to himself than to socialize. As a result, he does not have many friends and spends a lot of time alone. If John were to develop depression, the model that would probably best explain this situation and the cause of his depression is the _______ model
   a. diathesis-stress               c. reciprocal gene-environment
   b. biological                     d. interpersonal

   ANS: C  DIF: Difficult  REF: Genetic Contributions to Psychopathology

   OBJ: 2 APALO: 1.2.a(3)  MSC: TYPE: Applied

19. Some people may be genetically predisposed to seek out difficult relationships. These difficult relationships may contribute to their experience of depression. This is an example of the
   a. diathesis-stress model.       c. genetic model.
   b. reciprocal gene-environment model.  d. quantitative genetics.

   ANS: B  DIF: Moderate  REF: Genetic Contributions to Psychopathology

   OBJ: 2 APALO: 1.2.a(3)  MSC: TYPE: Applied

20. Research studies have shown that genetically emotional and reactive young animals raised by calm mothers tended to be
   a. calm.
   b. emotional and reactive.
   c. calm but emotional and reactive when raising their own young.
   d. emotional and reactive but calm when raising their own young.

   ANS: A  DIF: 3  REF: Genetic Contributions to Psychopathology

   OBJ: 2 APALO: 1.2.a(3)  MSC: TYPE: Factual

21. Some of the most recent research studies regarding genetic versus environmental causes of disorders in animals and humans have suggested
   a. genetic influences are greater than originally observed because positive environmental conditions do not prevent disorders.
   b. genetics and the environment share equal roles in the development of all psychological disorders.
   c. the relative contributions of genetics and the environment in the development of psychological disorders are different for lower animals than for humans.
   d. genetic influences may have been overstated by previous studies.

   ANS: D  DIF: Difficult  REF: Genetic Contributions to Psychopathology

   OBJ: 2 APALO: 1.2.d(1)  MSC: TYPE: Factual

22. The central nervous system is made up of the
   a. brain and spinal cord.       c. spinal cord only.
   b. brain only.                 d. nerves leading to and from the brain.

   ANS: A  DIF: Easy  REF: Neuroscience and Its Contributions to Psychopathology

   OBJ: 3  MSC: TYPE: Factual
23. The autonomic and somatic nervous systems are segments of the
   a. peripheral nervous system.  c. parasympathetic nervous system.
   b. somatic nervous system.  d. central nervous system.

   ANS: A   DIF: Easy
   REF: Neuroscience and Its Contributions to Psychopathology   OBJ: 3
   MSC: TYPE: Factual

24. Which of the following statements is true?
   a. Glial cells are passive cells that serve to connect and insulate neurons.
   b. There are less glial cells than there are neurons.
   c. There are different types of glial cells with several specific functions.
   d. None of these

   ANS: A   DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology   OBJ: 3 APALO: 1.2.a(3)
   MSC: TYPE: Conceptual   NOT: NEW

25. The area between the axon of one neuron and the dendrite of another neuron is the
   a. axon terminal.  c. synaptic cleft.
   b. soma.  d. transmission cleft.

   ANS: C   DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology   OBJ: 3
   MSC: TYPE: Factual

26. The synaptic cleft is the area between the
   a. soma of one neuron and the dendrite of another neuron.
   b. axon of one neuron and the dendrite of another neuron.
   c. axon of one neuron and the soma of another neuron.
   d. somas of two neurons.

   ANS: B   DIF: Easy
   REF: Neuroscience and Its Contributions to Psychopathology   OBJ: 3
   MSC: TYPE: Factual

27. Neurotransmitters are important because they
   a. allow neurons to send signals to other neurons.
   b. maintain the oxygenation of the brain.
   c. prevent the development of psychopathology.
   d. allow the brain to maintain its structural integrity.

   ANS: A   DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology   OBJ: 4
   MSC: TYPE: Factual

28. The chemicals that allow the transmission of signals between neurons are called
   a. reuptake inhibitors.  c. neurotransmitters.
   b. hormones.  d. genes.

   ANS: C   DIF: Easy
   REF: Neuroscience and Its Contributions to Psychopathology   OBJ: 4
   MSC: TYPE: Factual
29. GABA, dopamine, and norepinephrine are all examples of
   a. electrical brain waves. c. neurotransmitters.
   b. neurons. d. areas of the brain.
   
   ANS: C  DIF: Easy
   REF: Neuroscience and Its Contributions to Psychopathology OBJ: 4
   MSC: TYPE: Factual

30. Most automatic functions such as breathing, sleeping, and motor coordination are controlled by the
    part of the brain called the
   a. brain stem. c. cortex.
   b. forebrain. d. frontal lobe.
   
   ANS: A  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology OBJ: 3 APAQO: 1.2.a(3)
   MSC: TYPE: Factual

31. The part of the brain that controls motor coordination is the
   a. reticular activating system (RAS). c. pons.
   b. medulla. d. cerebellum.
   
   ANS: D  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology OBJ: 3
   MSC: TYPE: Factual

32. The part of the brain stem that regulates vital activities such as heartbeat, breathing, and digestion is
    the
   a. cerebellum. c. hindbrain.
   b. reticular activating system (RAS). d. thalamus.
   
   ANS: C  DIF: Easy
   REF: Neuroscience and Its Contributions to Psychopathology OBJ: 3
   MSC: TYPE: Factual

33. Emotional experiences, expressions, impulse control, and basic drives such as aggression, sex, hunger,
    and thirst are the function of the
   a. endocrine system. c. limbic system.
   b. sympathetic system. d. autonomic system.
   
   ANS: C  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology OBJ: 3
   MSC: TYPE: Factual

34. About 80 percent of the neurons contained in the brain are located in the
   a. cerebral cortex. c. midbrain.
   b. brain stem. d. basal ganglia.
   
   ANS: A  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology OBJ: 3
   MSC: TYPE: Factual
35. The ability to plan, think, reason, and create is located in the part of the brain called the
   a. thalamus.  c. cerebral cortex.
   b. midbrain.  d. brain stem.

   ANS: C  DIF: Easy
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3
   MSC: TYPE: Factual

36. What are the parts of the brain that are involved broadly with regulating behavior and emotion?
   a. Left and right hemisphere  c. Medulla and pons
   b. Midbrain and brain stem  d. Thalamus and hypothalamus

   ANS: D  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3
   MSC: TYPE: Factual

37. Current theories about dyslexia suggest that it may be a result of specific problems in which part of the
   brain?
   a. Right hemisphere of the cerebral cortex  c. Frontal lobe
   b. Left hemisphere of the cerebral cortex  d. Midbrain

   ANS: B  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3
   MSC: TYPE: Factual

38. For most people, verbal and cognitive processes are usually controlled by the
   a. left hemisphere of the cerebral cortex.  c. entire cortex.
   b. right hemisphere of the cerebral cortex.  d. midbrain.

   ANS: A  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3
   MSC: TYPE: Factual

39. For most people, perception and the creation of images are usually handled by the
   a. left hemisphere of the cerebral cortex.  c. midbrain.
   b. entire cerebral cortex.  d. right hemisphere of the cerebral cortex.

   ANS: D  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3
   MSC: TYPE: Factual

40. The part of the brain most associated with memory, thought, and reasoning is the
   a. occipital lobe.  c. left parietal lobe.
   b. brain stem.  d. frontal lobe.

   ANS: D  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3
   MSC: TYPE: Factual
41. The peripheral nervous system is made up of the 
   a. endocrine system. c. somatic and autonomic nervous systems. 
   b. brain stem and cerebral cortex. d. brain and spinal cord. 
   
   ANS: C  DIF: Easy 
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3 
   MSC: TYPE: Factual 

42. The major function of the peripheral nervous system is to 
   a. coordinate with the brain stem. 
   b. process information received from the central nervous system. 
   c. regulate arousal. 
   d. control hormonal activity. 
   
   ANS: A  DIF: Difficult 
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3 
   MSC: TYPE: Factual 

43. The part of the autonomic nervous system primarily responsible for our “emergency” or “alarm” 
   response to stress is the 
   a. parasympathetic nervous system. c. endocrine system. 
   b. sympathetic nervous system. d. cortex. 
   
   ANS: B  DIF: Moderate 
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3 
   MSC: TYPE: Factual 

44. Balancing the “emergency” or “alarm” response to stress and returning the body to a state of “normal 
   arousal” is a function of the 
   a. sympathetic nervous system. c. endocrine system. 
   b. parasympathetic nervous system. d. cortex. 
   
   ANS: B  DIF: Moderate 
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3 
   MSC: TYPE: Factual 

45. When those studying the brain speak of brain circuits, they are referring to 
   a. clusters of similar neurotransmitter-sensitive neurons. 
   b. physical brain structures. 
   c. neurotransmitter pathways. 
   d. brain stem activity. 
   
   ANS: A  DIF: Moderate 
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3 
   MSC: TYPE: Factual 

46. Virtually all drugs that are used to treat psychopathology work by influencing 
   a. neurotransmitters. c. brain structure. 
   b. the electrical conductivity of neurons. d. neuronal structure. 
   
   ANS: A  DIF: Easy 
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3 
   MSC: TYPE: Factual
47. Drugs that increase the activity of a neurotransmitter are called
   a. agonists.  c. enhancers.
   b. antagonists. d. inverse agonists.

   ANS: A  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 4
   MSC: TYPE: Factual

48. Drugs that decrease the activity of a neurotransmitter are called
   a. agonists.  c. reuptake inhibitors.
   b. blockers.  d. antagonists.

   ANS: D  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 4
   MSC: TYPE: Factual

49. Drugs that produce effects opposite to those produced by the neurotransmitter are called
   a. agonists.  c. blockers.
   b. antagonists. d. inverse agonists.

   ANS: D  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 4
   MSC: TYPE: Factual

50. The neurotransmitter associated with the regulation of mood, behavior, and thought processes is
   a. GABA.  c. serotonin.
   b. norepinephrine. d. dopamine.

   ANS: C  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 4
   MSC: TYPE: Factual

51. The neurotransmitter associated with the inhibition of anxiety is
   a. norepinephrine. c. serotonin.
   b. dopamine.  d. GABA.

   ANS: D  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 4
   MSC: TYPE: Factual

52. The neurotransmitter thought to regulate or moderate certain behavioral tendencies rather than directly
    influencing specific patterns of behavior or psychological disorders is
   a. norepinephrine. c. dopamine.
   b. GABA.  d. serotonin.

   ANS: A  DIF: Moderate
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 4
   MSC: TYPE: Factual
53. The neurotransmitter associated with both schizophrenia and Parkinson’s disease is
a. GABA.  c. dopamine.
b. norepinephrine.  d. serotonin.

ANS: C  DIF: Moderate
REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 4
MSC: TYPE: Conceptual

54. Extremely low activity levels of serotonin are associated with
a. aggression, suicide, and impulsive behavior.
b. schizophrenia.
c. anxiety disorders and general feelings of nervousness.
d. mania.

ANS: A  DIF: Moderate
REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 4
MSC: TYPE: Factual

55. Extremely high levels of GABA are associated with
a. decreased anxiety.  c. increased anxiety.
b. increased depression.  d. decreased depression.

ANS: A  DIF: Moderate
REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 4
MSC: TYPE: Factual

56. Extremely low levels of dopamine activity are associated with
a. muscle rigidity, tremors, and impaired judgment.
b. schizophrenia.
c. pleasure seeking.
d. exploratory behaviors.

ANS: A  DIF: Moderate
REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 4
MSC: TYPE: Factual

57. Recent research and increased understanding about the role of neurotransmitters in psychopathology point out that
a. each psychological disorder is caused by a deficit in a specific neurotransmitter.
b. chemical imbalances of the brain are the cause of psychopathology.
c. simple cause/effect conclusions that an individual neurotransmitter abnormality causes a disorder are incomplete.
d. neurotransmitters have very little to do with psychopathology for most individuals but may be the single cause of disorders for others.

ANS: C  DIF: Moderate
REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 4
MSC: TYPE: Conceptual
58. In the 1992 studies conducted by Baxter et al., OCD patients were provided with cognitive-behavioral therapy (exposure and response prevention) but no drugs. This study is important because brain imaging showed that
   a. the neurotransmitter circuits of the brain had been normalized.
   b. the patients’ OCD symptoms improved without changes in neurotransmitter function.
   c. neither OCD symptoms nor neurotransmitter function had improved.
   d. neurotransmitter circuits are the direct and only cause of OCD.

   ANS: A
   DIF: 3
   REF: Neuroscience and Its Contributions to Psychopathology
   OBJ: 4
   MSC: TYPE: Applied

59. What is one of the conclusions generally drawn from the 1990s studies of OCD, brain imaging, and cognitive-behavioral therapy?
   a. Neurotransmitters affect how people feel and act.
   b. Drugs are the only way to impact faulty neurotransmitter circuits.
   c. Neurotransmitters are a result of how people feel and act, not a cause.
   d. Psychosocial factors such as therapy affect neurotransmitters.

   ANS: D
   DIF: Difficult
   REF: Neuroscience and Its Contributions to Psychopathology
   OBJ: 4
   MSC: TYPE: Conceptual

60. The most recent research evidence suggests that the relationship between the brain (structure, function, neurotransmitters) and psychosocial factors (socialization, rearing, life events) is best described as
   a. a system where the brain directly influences behavior and psychosocial factors but not the other way around.
   b. an interaction where the brain affects psychosocial factors and psychosocial factors affect the brain.
   c. a system where behavior and psychosocial factors impact the brain but not the other way around.
   d. far too complex to ever understand how one system influences the other.

   ANS: B
   DIF: Difficult
   REF: Neuroscience and Its Contributions to Psychopathology
   OBJ: 4
   MSC: TYPE: Conceptual

61. When comparing the brains of rats raised in a rich environment requiring lots of learning and motor behavior with the brains of rats raised as “couch potatoes” (Greenough, et al., 1990), the cerebellums of the more active rats
   a. contained more neuronal connections and dendrites.
   b. contained fewer neuronal connections but more axons and dendrites.
   c. were less likely to possess pathological neurotransmitter circuits.
   d. were exactly the same as the inactive rats.

   ANS: A
   DIF: Difficult
   REF: Neuroscience and Its Contributions to Psychopathology
   OBJ: 3
   MSC: TYPE: Applied
62. Regarding biological influences on the development of psychopathology, the most accurate statement is that
   a. both genetics and life events play a part in the development of brain structure and function that can affect vulnerability to psychopathology.
   b. life events can only cause changes in brain structure or function for those with genetic defects.
   c. early life events play a much greater role in the development of brain structure or function than genetics.
   d. vulnerability to psychopathology has little to do with the brain changes associated with genetics or early life events.

   ANS: A  DIF: Moderate  
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3  
   MSC: TYPE: Conceptual

63. Regarding the current state of knowledge regarding genetics and life experience effects on brain structure and function, the best overall conclusion is that most psychological disorders are
   a. the result of a complex interaction of genetics and faulty neurotransmitter circuits.
   b. the result of stressful early life experiences and the negative effects such experiences have on brain structure or function.
   c. the result of both biological and psychosocial factors.
   d. beyond our current ability to understand in any meaningful way.

   ANS: C  DIF: Easy  
   REF: Neuroscience and Its Contributions to Psychopathology  OBJ: 3  
   MSC: TYPE: Conceptual

64. Cognitive-behavior therapy facilitates changes in thinking patterns in the cortex, which in turn affects the emotional brain. This is called
   a. confabulation.
   b. consolidation.
   c. top-down processing.
   d. bottom-up processing.

   ANS: C  DIF: Moderate  
   REF: Behavioral and Cognitive Psychology  
   OBJ: 5  
   MSC: TYPE: Conceptual

65. Drugs often seem to work in a manner by reaching higher areas of the cortex where thinking occurs last. This is called
   a. consolidation.
   b. confabulation.
   c. top-down processing.
   d. bottom-up processing.

   ANS: D  DIF: Moderate  
   REF: Behavioral and Cognitive Psychology  
   OBJ: 5  
   MSC: TYPE: Conceptual

66. Learned helplessness is demonstrated in laboratory animals by
   a. creating aversive stimuli (such as electrical shocks to the foot) that the animal can control.
   b. creating aversive stimuli (such as electrical shocks to the foot) that the animal cannot control.
   c. creating pleasant stimuli (such as a food pellet) that the animal cannot control.
   d. creating pleasant stimuli (such as a food pellet) that the animal can control.

   ANS: B  DIF: 3  
   REF: Behavioral and Cognitive Psychology  
   OBJ: 5  
   MSC: TYPE: Factual

Full file at https://testbankgo.info/p/
67. Rescorla (1988) demonstrated that simply pairing two events closely in time
   a. demonstrates the simplicity of classical conditioning.
   b. does not allow us to make predictions.
   c. becomes more meaningful as the pairings continue.
   d. is not what’s important in this type of learning.

   ANS: D          DIF: Difficult          REF: Behavioral and Cognitive Psychology
   OBJ: 5 APALO: 1.2.a(1)      MSC: TYPE: Conceptual   NOT: NEW

68. A rat is placed in a cage and given electrical shocks, over which it has no control. When placed in a
   shuttle box, the rat does not attempt to escape the shock due to
   a. social learning.
   b. learned helplessness.
   c. unconscious learning.
   d. one angry rat.

   ANS: B          DIF: Moderate          REF: Behavioral and Cognitive Psychology
   OBJ: 5      MSC: TYPE: Factual

69. It is important to understand the process of how learned helplessness is created in laboratory animals
   because learned helplessness in animals resembles the human disorder of
   a. panic disorder.
   b. depression.
   c. mania.
   d. schizophrenia.

   ANS: B          DIF: Moderate          REF: Behavioral and Cognitive Psychology
   OBJ: 5 APALO: 1.2.a(1)      MSC: TYPE: Conceptual

70. Marsha believes that no matter how hard she studies, she will never succeed in college. Her belief is
    best explained by
   a. personality disorder.
   b. faulty neurotransmitter circuits.
   c. learned helplessness.
   d. internal conflicts.

   ANS: C          DIF: Easy          REF: Behavioral and Cognitive Psychology
   OBJ: 5      MSC: TYPE: Applied

71. In a study by Levy, Slade, Kunkel, & Kasl (2002), individuals between the ages of 50 and 94 who had
    positive views about themselves as well as positive attitudes toward aging
    a. lived four years longer than those without such positive attitudes.
    b. lived seven and a half years longer than those without such positive attitudes.
    c. were found to be less likely to have heart disease.
    d. were found to be more likely to be involved with positive community activities.

   ANS: B          DIF: 3          REF: Behavioral and Cognitive Psychology
   OBJ: 5      MSC: TYPE: Factual

72. The work of Albert Bandura regarding modeling helps us to understand the development of
    psychopathology because it demonstrates that animals
    a. can learn patterns of behavior by observing others.
    b. must learn through direct experience such as classical or operant conditioning.
    c. will only learn behavior patterns if they are reinforced by a model.
    d. acquire all of their behavior patterns by imitating the actions of others.

   ANS: A          DIF: 3          REF: Behavioral and Cognitive Psychology
   OBJ: 5      MSC: TYPE: Conceptual
73. One important contribution of the work of Albert Bandura regarding modeling or observational learning is that
   a. much of our learned behavior depends upon our interactions with those around us.
   b. our learned behavior has much more to do with the types of consequences (reinforcements and punishments) of our actions than our interactions with those around us.
   c. it is impossible to learn behavioral patterns without observing those around us.
   d. learning acquired through observation is much more resistant to extinction than behavior acquired through classical or operant conditioning.

   ANS: A  DIF: Moderate  REF: Behavioral and Cognitive Psychology
   OBJ: 5 APALO: 1.2.a(1)  MSC: TYPE: Conceptual

74. The major difference between the modern cognitive science idea of the unconscious and Freud’s view of the unconscious is that Freud saw the unconscious as ________, whereas modern cognitive science views the unconscious as ________.
   a. the function of the id; the result of multiple neuronal pathways interacting with the stimuli presented to the individual
   b. a seething caldron of emotional conflicts; neuronal pathways interacting with the stimuli presented to the individual
   c. the function of the superego; the ability to process, store, and act upon information without awareness
   d. a seething caldron of emotional conflicts; the ability to process, store, and act upon information without awareness

   ANS: D  DIF: Moderate  REF: Behavioral and Cognitive Psychology
   OBJ: 5 APALO: 1.2.a(1)  MSC: TYPE: Conceptual

75. According to modern cognitive science, the unconscious
   a. clearly exists in much the same way that Freud imagined.
   b. may or may not exist, as it is impossible to study material that we are not aware of.
   c. clearly does not exist.
   d. clearly exists but in a very different way than Freud imagined.

   ANS: D  DIF: Moderate  REF: Behavioral and Cognitive Psychology
   OBJ: 5 APALO: 1.2.a(1)  MSC: TYPE: Conceptual

76. In the Stroop color-naming paradigm, a patient with a blood phobia would be expected to name the color of the printed word “wound”
   a. more quickly than a neutral word.
   b. in about the same time it takes to name the color of a neutral word.
   c. more slowly than a neutral word.
   d. with a great deal of difficulty or not at all.

   ANS: C  DIF: Difficult  REF: Behavioral and Cognitive Psychology
   OBJ: 5 APALO: 1.2.a(1)  MSC: TYPE: Applied
77. Meno is 64 years old. Although continuously faced with considerable stress and difficulty in his life, he always displays an optimistic, upbeat attitude. According to research, Meno should
a. probably live longer than those without such positive attitudes. 
b. live about the same length of time as those without such positive attitudes. 
c. be less likely to have heart disease than those without such positive attitudes. 
d. be more likely to be involved with positive community activities than those without such positive attitudes.

ANS: A  DIF: Difficult  REF: Behavioral and Cognitive Psychology
OBJ: 5  APALO: 1.2.a(1)  MSC: TYPE: Applied  NOT: NEW

78. According to Seligman, if a person who is faced with considerable stress and difficulty in his or her life displays an optimistic, upbeat attitude, he or she is likely to function better psychologically and physically. He called this
a. learned optimism. 
b. learned helplessness. 
c. learned awareness. 
d. learned predictability.

ANS: A  DIF: Moderate  REF: Behavioral and Cognitive Psychology
OBJ: 5  APALO: 1.2.a(1)  MSC: TYPE: Factual
NOT: NEW

79. Strong emotional reactions such as extreme fear are generally experienced as unpleasant to the individual. In panic disorder, for example, patients may experience these sensations quite frequently. The primary function of human capability for such strong emotion appears to be
a. survival. 
b. recreation. 
c. empathy. 
d. creativity.

ANS: A  DIF: Moderate  REF: Emotions
OBJ: 6  APALO: 1.3.e  MSC: TYPE: Conceptual

80. Emotion is generally thought to be comprised of
a. behavior, physiology, and cognition. 
b. mood and affect. 
c. cognition, behavior, and affect. 
d. behavior physiology and mood.

ANS: A  DIF: Moderate  REF: Emotions
OBJ: 6  APALO: 1.3.e  MSC: TYPE: Conceptual

81. You and a friend are lost while walking on a street in a foreign city. A stranger approaches, and you are concerned that the stranger may try to mug you. Your friend assumes that the stranger is approaching to give you directions. As the stranger approaches, you experience fear, but your friend experiences relief. Your different emotional reactions can be explained by the ________ theory of emotion.

a. physiological 
b. neurological 
c. affective 
d. cognitive

ANS: D  DIF: Moderate  REF: Emotions
OBJ: 6  APALO: 1.2.a(1)  MSC: TYPE: Applied
82. The relationship between emotion and health is demonstrated by the fact that
   a. panic is related to poor concentration.
   b. people with chronic diseases are often angry about their care.
   c. those in poor physical health almost always develop psychological disorders.
   d. anger increases the risk of heart disease.

   ANS: D  
   DIF: Moderate  
   REF: Emotions  
   OBJ: 6 APALO: 1.3.e  
   MSC: TYPE: Factual

83. Studies examining the effects of anger and hostility on the cardiovascular system have demonstrated
   that anger results in
   a. decreased pumping efficiency of the heart.
   b. increased pumping efficiency of the heart.
   c. heart changes similar to those found when exercising.
   d. few if any measurable changes in the heart.

   ANS: A  
   DIF: Easy  
   REF: Emotions  
   OBJ: 6 APALO: 1.3.e  
   MSC: TYPE: Factual

84. The “evil eye,” Latin American *susto*, and the Haitian phenomenon of voodoo death are currently viewed as examples of the
   a. unsubstantiated myths that people can become ill without physical cause.
   b. power of the cultural environment on our physical and psychological health.
   c. power of the supernatural model of psychopathology.
   d. isolated cultural phenomena with little practical significance.

   ANS: B  
   DIF: Moderate  
   REF: Cultural, Social, and Interpersonal Factors  
   OBJ: 6 APALO: 1.3.e  
   MSC: TYPE: Conceptual

85. The fact that women are more likely to suffer from insect phobias than men is most likely due to
   a. biological differences.  
   b. differences in neurochemical pathways.  
   c. cultural expectations.  
   d. genetic influences.

   ANS: C  
   DIF: Easy  
   REF: Cultural, Social, and Interpersonal Factors  
   OBJ: 6 APALO: 1.3.e  
   MSC: TYPE: Conceptual

86. The victims of the disorder bulimia nervosa are predominantly young females. One likely explanation for this is that young females are
   a. more likely to feel an intense cultural pressure to be thin.
   b. have weaker eating control than older females and males.
   c. objectified by fashion designers and gay men.
   d. naturally more likely to suffer from “nervous stomach” disorders than other groups.

   ANS: A  
   DIF: Easy  
   REF: Cultural, Social, and Interpersonal Factors  
   OBJ: 6  
   MSC: TYPE: Conceptual

87. The influences of culture and gender on psychopathology are most clearly evident in the disorder of
   a. bulimia nervosa.  
   b. panic disorder.  
   c. bipolar disorder.  
   d. depression.

   ANS: A  
   DIF: Easy  
   REF: Cultural, Social, and Interpersonal Factors  
   OBJ: 6 APALO: 1.3.e  
   MSC: TYPE: Conceptual
88. People who have many social contacts and live their lives continually interacting with others
   a. develop more infections and have poorer overall health.
   b. have not been found to differ on any health outcome.
   c. often suffer from psychological disorders such as dependency.
   d. live longer and healthier lives.

   ANS: D  DIF: Easy  REF: Cultural, Social, and Interpersonal Factors
   OBJ: 6 APALO: 1.3.e  MSC: TYPE: Factual

89. Research in which subjects were exposed to the virus that causes the common cold demonstrated that
   a. the lower the individual’s socialization, the lower the chances of contracting a cold.
   b. the greater the individual’s socialization, the lower the chances of contracting a cold.
   c. the extent of socialization and chances of contracting a cold were unrelated.
   d. the quality of social contact predicted whether the individual would contract a cold, but the
      frequency of social contact did not.

   ANS: B  DIF: Moderate  REF: Cultural, Social, and Interpersonal Factors
   OBJ: 6 APALO: 1.3.e  MSC: TYPE: Factual

90. Regarding the research on socialization and health, the safest conclusion is that
   a. social support is important, but more so for those individuals who are at high risk for
      various physical or psychological disorders.
   b. having a supportive group of people around us is important to our physical health but not
      our psychological well-being.
   c. having a supportive group of people around us is important to our psychological
      well-being but not our physical health.
   d. having a supportive group of people around us is one of the most important parts of
      maintaining our physical and mental health.

   ANS: D  DIF: Difficult  REF: Cultural, Social, and Interpersonal Factors
   OBJ: 6 APALO: 1.3.e  MSC: TYPE: Factual

91. Research with the elderly has found that depression is more likely in those individuals who
   a. have frequent social contacts.
   b. live in group settings.
   c. have fewer social contacts.
   d. receive increased attention from their families when they are sick.

   ANS: C  DIF: Easy  REF: Cultural, Social, and Interpersonal Factors
   OBJ: 6 APALO: 1.3.e  MSC: TYPE: Factual

92. When we compare the incidence of psychological disorders across countries and cultures, we find that
   a. there is remarkable similarity in the rates of various disorders in different countries and
      cultures.
   b. all Western countries have a similar rate of common disorders, but this is not true for
      developing countries.
   c. developing countries have a much higher rate of psychological disorder than Western
      countries.
   d. there are enormous differences in the rates of various disorders in different countries and
      cultures.

   ANS: D  DIF: Moderate  REF: Cultural, Social, and Interpersonal Factors
   OBJ: 6 APALO: 1.3.e  MSC: TYPE: Factual
93. A lifespan psychologist would point out that the only way to understand a patient’s disorder is to understand how the individual
a. developed and changed throughout his or her life.
b. developed during the psychosexual stages of his or her life.
c. resolved conflicts in early life.
d. sees himself or herself as part of a family, a community, and a culture.

ANS: A  DIF: Easy  REF: Lifespan Development  
OBJ: 6 APALO: 1.2.a(4)  MSC: TYPE: Conceptual

94. When therapists ask patients how they are feeling and how they are experiencing their disorder today, it is essentially taking “snapshots” of their lives at the moment. This approach to understanding psychopathology is criticized as incomplete by
a. lifespan psychologists.  c. humanists.
b. cognitive behaviorists.  d. all mental health workers.

ANS: A  DIF: Easy  REF: Lifespan Development  
OBJ: 6 APALO: 1.2.a(4)  MSC: TYPE: Conceptual

95. In an experiment by Kolb, Gibb, and Gorny (2003), animals of varying ages were placed in complex environments. Their findings suggest that
a. the impact of the environment on the brain is different at varying stages of life.
b. the impact of the environment on the brain is significant but uniform throughout the lifespan.
c. environments that are beneficial to the aged may be harmful to the young.
d. the environment has little effect on the brain throughout the lifespan.

ANS: A  DIF: Moderate  REF: Lifespan Development  
OBJ: 6 APALO: 1.2.a(4)  MSC: TYPE: Conceptual

96. The principle that a behavior or disorder may have several causes (e.g., delusions can be a result of amphetamine abuse or of schizophrenia) is
a. equifinality.  c. pathogenesis.
b. psychopathology.  d. orthogonal causation.

ANS: A  DIF: Difficult  REF: Lifespan Development  
OBJ: 6 APALO: 1.2.a(4)  MSC: TYPE: Conceptual

97. The term equifinality refers to the fact that
a. once a process has begun, it will always lead to a final outcome.
b. many causes of psychopathology are equal in influence.
c. a number of paths can lead to the same outcome.
d. all forms of psychopathology have similar causes.

ANS: C  DIF: Difficult  REF: Lifespan Development  
OBJ: 6 APALO: 1.2.a(4)  MSC: TYPE: Factual
98. The “Abnormal Psychology Live!” presentation for this chapter deals with how biological, social, and psychological factors
   a. each have unique implications in psychopathology and therefore each must be studied in
   isolation.
   b. interact and influence one another in an integrated system in psychopathology.
   c. cannot be fully understood until we learn the brain’s structure, in terms of the number of
   receptors on cells in the brain.
   d. have not been studied with much depth in the past.
ANS: B DIF: Moderate REF: CD

99. During the “Abnormal Psychology Live!” presentation for this chapter, Dr. Barlow suggests it is
   possible that psychological treatments we know to affect brain function may in fact also
   a. change patient outlook.
   b. change brain structure.
   c. affect the attitudes of the psychologist providing treatment.
   d. affect the physical health of the patient.
ANS: B DIF: Moderate REF: CD

100. In the “Abnormal Psychology Live!” presentation for this chapter, Dr. Barlow relates to us that we
    now know that the application of pharmacological therapies can not only affect brain function but also
    a. thoughts, feelings, and behaviors.       c. physical strength and well-being.
    b. sensory sensitivities.                  d. our understanding of psychopathology.
ANS: A DIF: Moderate REF: CD

101. In the “Abnormal Psychology Live!” presentation for this chapter, Dr. Barlow suggests that we now
    have the tools, the technology, and the ________ with which to understand psychopathology.
    a. expertise       c. beginnings of knowledge
    b. knowledge        d. in-depth knowledge
ANS: C DIF: Moderate REF: CD

ESSAY

1. Describe the diathesis-stress model, and use it to explain how one identical twin might suffer from
   clinical depression while the other does not.

   ANS: Sample Answer: This model argues that a diathesis is a vulnerability and that a stress is an
   unpleasant experience, which together can cause behavioral and emotional disorders. Identical twins
   typically share the same genetic vulnerability but may not have the same life experiences.

2. Psychoactive medications (drugs that impact our thoughts, emotions, and behavior) usually work as
   either agonists or antagonists for various neurotransmitters. Explain how both an agonist and an
   antagonist operate on a neurotransmitter. Explain, also, the process of reuptake inhibition and the
   effect it has on a neurotransmitter.

   ANS: Sample Answer: Agonists increase the effects of a transmitter, while antagonists decrease their
   effects. Reuptake involves the process of neurons reabsorbing their own transmitters from the synapse.
   When reuptake is inhibited, the neurotransmitter stays in the synapse longer, which tends to prolong its
   effects in an agonistic way.
3. Describe the basic components of the multidimensional integrative model. What are the dimensions, and what does the term *integrative* mean in this model?

ANS: Sample Answer:
-Behavioral includes causal factors from behavioral and cognitive processes, including learned helplessness, social learning, prepared learning, and even unconscious processes.
-Biological includes causal factors from the fields of genetics and neuroscience.
-Emotional influences contribute in a variety of ways, as do social and interpersonal influences.
-Social influences and cultural factors contribute to biology and behavior.
-Developmental influences figure in any discussion of causes of psychological disorders.

This use of the term “integrative” refers to the model’s premise that many factors interact to cause any given disorder.

4. Describe learned helplessness. How is it developed in laboratory animals, and how does it help us to understand human depression?

ANS: Sample Answer: Martin Seligman described the phenomenon of *learned helplessness*, which occurs when animals encounter conditions over which they have no control. If rats are confronted with a situation in which they receive occasional foot shocks, they can function well if they learn to cope with these shocks by doing something to avoid them (say, pressing a lever). But if the animals learn that their behavior has no effect on their environment—sometimes they get shocked and sometimes they don’t, no matter what they do—they become “helpless”; they give up attempting to cope and seem to develop the animal equivalent of depression.
Seligman theorized that the same phenomenon may happen with people who are faced with uncontrollable stress. People become depressed if they “decide” or “think” they can do little about the stress in their lives, even if it seems to others that there is something they could do. This finding illustrates, again, the necessity of recognizing that different people process information about events in different ways. These cognitive differences are an important component of psychopathology.

5. Describe the concept of equifinality. What does this concept say regarding the causes of psychopathology?

ANS: Sample Answer: Equifinality indicates that a number of paths to a given outcome must be considered, for example, a hallucinatory syndrome may be the result of schizophrenia or the result of taking LSD. The different paths can also be the result of the interaction of psychological and biological factors during various stages of development.