Chapter 01 Test Bank

1. Which of the following does *not* form part of the definition of abnormal behaviour?

A. rarity

**B.** treatment

C. distress

D. dysfunction

E. norm violation

*Blooms: Analysis
Difficulty: Easy
Learning Objective: 1.1 Describe the difficulties inherent in defining abnormality and mental disorder.
Topic: Defining Abnormal Behaviour and Mental Disorder*

2. Which of the following is *not* true of electroconvulsive therapy (ECT)?

A. It was found to be an effective treatment for severe depression.

B. It is still used today.

C. It was developed in the 1930s.

D. It was found to have a calming effect on patients.

**E.** The way it works is well understood.

*Blooms: Analysis
Difficulty: Medium*

*Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Causes of Abnormal Behaviour*

3. According to psychoanalytic theory, the reasons for much human behaviour are:

A. genetic.

B. learned.

C. sociocultural.

**D.** hidden in the unconscious mind.

E. situational.

*Blooms: Knowledge
Difficulty: Easy
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Causes of Abnormal Behaviour*

4. Behaviourists and psychoanalysts agree that:

A. learning explains most problem behaviours.

B. unconscious conflicts explain most problem behaviours.

C. therapy commences with functional analysis.

**D.** normal and abnormal behaviours are on a continuum.

E. problematic family relationships explain most psychopathology.

*Blooms: Analysis
Difficulty: Medium
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Causes of Abnormal Behaviour*

5. Which of these is *not* a recognised disadvantage of diagnostic labelling of mental disorders?

A. the illusion that the diagnosis explains the symptoms

B. the sick role

**C.** standardised research

D. stigma

E. oppression of non-conformist behaviour

*Blooms: Analysis
Difficulty: Hard
Learning Objective: 1.3 Evaluate the changes made in psychiatric classification over time.
Topic: Diagnosis of Abnormal Behaviour*

6. Prior to the twentieth century, the concept of mental illness was virtually identical to the concept of:

A. sin.

B. neurosis.

C. retardation.

D. paralysis.

**E.** insanity.

*Blooms: Knowledge
Difficulty: Easy
Learning Objective: 1.3 Evaluate the changes made in psychiatric classification over time.
Topic: Causes of Abnormal Behaviour*

7. Psychoanalysts believe that defence mechanisms operate by:

A. activating the fight–flight response.

B. reducing re-uptake of neurotransmitters and hormones.

**C.** distorting impulses into acceptable forms or making them unconscious.

D. correcting dysfunctional thought patterns.

E. overcoming negative behaviour patterns.

*Blooms: Analysis
Difficulty: Medium
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Causes of Abnormal Behaviour*

8. The rational-emotive therapist Albert Ellis believed that people respond to:

A. their conditioning.

**B.** their interpretations of events.

C. social expectations.

D. modelling.

E. interpersonal relationships.

*Blooms: Analysis
Difficulty: Easy
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Causes of Abnormal Behaviour*

9. As a psychiatrist treating patients, Aaron Beck noticed repeated patterns, which he labelled as:

**A.** cognitive distortions.

B. defence mechanisms.

C. systematic desensitisation.

D. conditioned responses.

E. rational behaviours.

*Blooms: Knowledge
Difficulty: Easy
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Causes of Abnormal Behaviour*

10. Which of the following does Maslow's hierarchy of needs *not* include?

A. safety

B. warm relationships with other people

C. self-actualisation

D. basic biological needs

**E.** social skills

*Blooms: Analysis
Difficulty: Medium
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Causes of Abnormal Behaviour*

11. Critical psychologists argue that:

A. mental health professionals can be agents of oppression.

B. the social perspective is neglected in mental health services.

C. abnormal behaviour must be considered within its context.

**D.** All of the given options are correct.

E. None of the given options is correct.

*Blooms: Knowledge
Difficulty: Medium
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Causes of Abnormal Behaviour*

12. Most modern explanations of mental disorder include:

A. an evolutionary model.

B. a categorical model.

C. a continuum model.

**D.** a diathesis-stress model.

E. a family systems model.

*Blooms: Analysis
Difficulty: Easy
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Defining Abnormal Behaviour and Mental Disorder*

13. The main drawback of drug treatment for psychological problems is the:

**A.** high rate of relapse once the drug is stopped.

B. cost of the drug.

C. need for the drug to be prescribed by a doctor.

D. side effects of the drug.

E. lack of efficacy.

*Blooms: Comprehension
Difficulty: Medium
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Treatment of Abnormal Behaviour*

14. The basic principle of classical conditioning is that:

A. all behaviours can be understood in terms of their function.

**B.** all behaviours can be explained in terms of conditioned and unconditioned responses.

C. all behaviours followed by positive consequences are likely to be repeated.

D. all behaviours can be interpreted as a product of cognitive patterns.

E. scientific research must confine itself to events which can be observed.

*Blooms: Knowledge
Difficulty: Easy
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Emergence of Modern Perspectives on Abnormality*

15. A functional analysis of behaviour:

**A.** describes behaviour and its environmental determinants objectively.

B. reduces incongruence and results in self-actualisation.

C. interprets behaviour in terms of unconscious conflicts.

D. associates a relaxation response with imagined feared stimuli.

E. connects behavioural responses to cognitive distortions.

*Blooms: Comprehension
Difficulty: Medium
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Treatment of Abnormal Behaviour*

16. According to Carl Rogers, the main determinant of whether people fulfil their potential is whether or not they have experienced which of the following?

A. empathy

B. client-centred therapy

C. positive reinforcement

D. supportive family relationships

**E.** unconditional positive regard

*Blooms: Comprehension
Difficulty: Easy
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Treatment of Abnormal Behaviour*

17. Humanistic theories and therapies are *not*:

**A.** easy to measure and evaluate.

B. used widely in counselling.

C. influential in the personal growth movement.

D. inclusive of human individuality and choices.

E. non-pathologising of the individual.

*Blooms: Comprehension
Difficulty: Medium
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Treatment of Abnormal Behaviour*

18. The *DSM-5* is based on the:

**A.** medical model.

B. psychological model.

C. diathesis-stress model.

D. sociocultural model.

E. humanistic model.

*Blooms: Analysis
Difficulty: Medium
Learning Objective: 1.3 Evaluate the changes made in psychiatric classification over time.
Topic: Diagnosis of Abnormal Behaviour*

19. The key issues raised in the construction of the *DSM-5* include all of the following *except*:

A. a rating system indicating the extent and quality of empirical research.

B. explicit guidelines for changing criteria from one edition of the *DSM* to the next.

C. the possibility of a dimensional approach.

**D.** the inclusion of a psychoanalytic perspective.

E. All of the options are key issues relevant to the construction of the *DSM-5*.

*Blooms: Comprehension
Difficulty: Medium
Learning Objective: 1.3 Evaluate the changes made in psychiatric classification over time.
Topic: Diagnosis of Abnormal Behaviour*

20. The authors of the *DSM-5* research agenda emphasised that one of the main shortcomings of the *DSM-IV-TR* was:

A. the lack of specific diagnostic criteria to define each disorder.

B. the dimensional classification system.

C. the absence of personality disorders.

D. the presence of theoretical models for each of the diagnoses.

**E.** the presentation of various diagnostic categories as if they were equal in validity.

*Blooms: Comprehension
Difficulty: Hard
Learning Objective: 1.3 Evaluate the changes made in psychiatric classification over time.
Topic: Diagnosis of Abnormal Behaviour*

21. Which of the following is *not* one of the reasons experts have proposed a dimensional system of classification for the *DSM-5*?

A. Psychiatric disorders are shown to exist on a continuum of severity.

**B.** Psychiatric disorders are separate and independent.

C. There are high rates of comorbidity among psychiatric disorders.

D. The point on a continuum at which a diagnosis is made is largely arbitrary.

E. It may improve the validity of the diagnostic system.

*Blooms: Comprehension
Difficulty: Hard
Learning Objective: 1.3 Evaluate the changes made in psychiatric classification over time.
Topic: Diagnosis of Abnormal Behaviour*

22. Which one of the following has *not* been suggested as an advantage of using both a categorical and a dimensional system of diagnosis for psychiatric disorders?

**A.** Clinicians will find the combination system simpler to use than the current system.

B. Clinicians can still use familiar categories to facilitate efficient communication.

C. Clinicians can use the dimensions to identify a patient's strengths and weaknesses.

D. Clinicians will be able to use the dimensional approach to assess initial severity.

E. Clinicians can use the dimensions to note changes in severity during treatment.

*Blooms: Comprehension
Difficulty: Hard
Learning Objective: 1.3 Evaluate the changes made in psychiatric classification over time.
Topic: Diagnosis of Abnormal Behaviour*

23. The pattern and rates of co-occurrence among the mental disorders are thought to reflect:

A. the presence of personality disorders.

B. separate, independent causation.

**C.** the existence of higher-order dimensions of psychopathology.

D. classical conditioning.

E. clinical bias.

*Blooms: Analysis
Difficulty: Hard
Learning Objective: 1.3 Evaluate the changes made in psychiatric classification over time.
Topic: Diagnosis of Abnormal Behaviour*

24. The diathesis-stress model explains mental disorders in terms of:

A. brain abnormalities.

**B.** an interaction between biological and psychological factors.

C. neurotransmitter imbalance.

D. adverse life events.

E. personality types.

*Blooms: Comprehension
Difficulty: Easy
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Defining Abnormal Behaviour and Mental Disorder*

25. Emil Kraepelin classified mental disorders in terms of their:

A. causes.

B. severity.

**C.** symptoms.

D. adverse life events.

E. All of the given options are correct.

*Blooms: Analysis
Difficulty: Medium
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Diagnosis of Abnormal Behaviour*

26. The behavioural perspective considers all behaviour, both normal and abnormal, as the product of:

A. genetics.

B. brain abnormalities.

C. neurotransmitter imbalance.

**D.** learning.

E. hormone deficiency.

*Blooms: Analysis
Difficulty: Medium
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Emergence of Modern Perspectives on Abnormality*

27. Which of the following is *not* an example of a cognitive distortion?

A. black and white thinking

B. over-generalising

C. catastrophising

**D.** repressing

E. jumping to negative conclusions

*Blooms: Analysis
Difficulty: Medium
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Emergence of Modern Perspectives on Abnormality*

28. The dimensional approach to mental disorders argues that disorders:

A. are categorical in nature.

B. are comorbid.

**C.** exist along a continuum.

D. are arbitrary.

E. are socially constructed.

*Blooms: Comprehension
Difficulty: Easy
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Diagnosis of Abnormal Behaviour*

29. According to psychoanalytic theory, both normal and abnormal behaviours are the result of:

A. the pleasure principle.

B. the Oedipus complex.

C. conflict between the Oedipus complex and the pleasure principle.

**D.** conflict between the id, ego and superego.

E. repressed memories.

*Blooms: Comprehension
Difficulty: Easy
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Emergence of Modern Perspectives on Abnormality*

30. Which of these does *not* typically form part of cognitive-behavioural treatment?

A. cognitive restructuring

B. behavioural experiments

**C.** dream analysis

D. thought diaries

E. altering behaviours

*Blooms: Analysis
Difficulty: Easy
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Treatment of Abnormal Behaviour*

31. What of these was an important limitation of the first two editions of the *DSM*?

A. too many diagnostic categories

B. too few diagnostic categories

**C.** a lack of reliability of the diagnostic categories

D. diagnostic categories that were too broadly defined

E. diagnostic categories that were too narrowly defined

*Blooms: Analysis
Difficulty: Easy
Learning Objective: 1.3 Evaluate the changes made in psychiatric classification over time.
Topic: Diagnosis of Abnormal Behaviour*

32. A mental disorder is a syndrome characterised by:

A. extreme anger.

B. heightened sensations.

C. disturbances in social skills.

**D.** disturbances in cognitions and behaviour.

E. depression.

*Blooms: Analysis
Difficulty: Easy
Learning Objective: 1.1 Describe the difficulties inherent in defining abnormality and mental disorder.
Topic: Diagnosis of Abnormal Behaviour*

33. With reference to Wakefield’s 'harmful dysfunction' analysis of mental disorders, what does the word 'dysfunction' refer to?

**A.** where a psychological process has failed to carry out its natural function

B. where an individual is unable to function in society

C. where an individual is behaving in a threatening manner

D. where an individual is unable to empathise

E. where an individual is unable to relate to others

*Blooms: Analysis
Difficulty: Hard
Learning Objective: 1.1 Describe the difficulties inherent in defining abnormality and mental disorder.
Topic: Diagnosis of Abnormal Behaviour*

34. The *DSM-5* adopted what approach in its classification of disorders?

A. a psychoanalytic approach

**B.** a neo-Kraepelinian approach

C. an eclectic approach

D. a causation approach

E. a theoretical approach

*Blooms: Analysis
Difficulty: Easy
Learning Objective: 1.3 Evaluate the changes made in psychiatric classification over time.
Topic: Diagnosis of Abnormal Behaviour*

35. According to the biopsychosocial approach**,** human behaviour can best be explained by:

A. genetics.

B. the diathesis-stress model.

C. upbringing.

D. an individual’s biological and psychological vulnerabilities.

**E.** a variety of biological, psychological and sociocultural factors.

*Blooms: Comprehension
Difficulty: Easy
Learning Objective: 1.2 Distinguish among the main theoretical approaches to understanding the classification, aetiology and treatment of mental disorders.
Topic: Defining Abnormal Behaviour and Mental Disorder*

36. Among mental health professionals, a crucial element of defining dysfunctional behaviour is:

A. if a person engages in risky behaviours.

B. if a person experiences elevated mood, self-esteem and creativity.

**C.** if a person’s behaviour interferes with his/her ability to carry on with everyday life.

D. if a person defines his/her own behaviour as abnormal.

E. if an individual imposes suffering on his/her own self.

*Blooms: Knowledge
Difficulty: Hard
Learning Objective: 1.1 Describe the difficulties inherent in defining abnormality and mental disorder.
Topic: Defining Abnormal Behaviour and Mental Disorder*

37. Which is *not* part of the general definition of a ‘mental disorder’ in the *DSM-5*:

A. a disturbance in an individual’s thoughts, feelings or behaviours.

B. dysfunction in an individual’s underlying psychological, biological or developmental functioning.

C. distress in social, occupational or other important activities.

**D.** culturally expected responses to a common stressor.

E. socially deviant behaviour as a result of a dysfunction in the individual.

*Blooms: Knowledge
Difficulty: Hard
Learning Objective: 1.1 Describe the difficulties inherent in defining abnormality and mental disorder.
Topic: Defining Abnormal Behaviour and Mental Disorder*

Chapter 01 Test Bank Summary

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