

- 1. A panel of gymnastic judges are highly similar in their implementation of a rating system. This is an example of strong:**
 - a. Internal consistency reliability
 - b. Inter-rater reliability
 - c. Test-retest reliability
 - d. Construct validity

- 2. Which of the following is not an assumption of psychometrics?**
 - a. It is possible to measure psychological traits
 - b. Methods used to measure aspects of the same thing should be uniform
 - c. Error is part of the assessment process
 - d. Testing can be conducted in a fair and unbiased manner

- 3. Using an emotional intelligence test to measure neuroticism is an example of poor**
 - a. Internal reliability
 - b. Criterion validity
 - c. Construct validity
 - d. Content validity

- 4. Factors to consider for abnormality include:**
 - a. Statistical deviance, distress, internalisation
 - b. Danger, dysfunction, externalisation of internal worries
 - c. Statistical deviance, distress, dysfunction
 - d. Danger, peculiarity, bizarre dress effect

- 5. Which of the following is false regarding a dimensional approach to classification?**
 - a. Provides a common vocabulary across health workers and legal settings
 - b. The severity of the disorder may not impact the treatment plan
 - c. Very complex as there can be overlaps between the causes and treatments of mental disorders
 - d. Views mental illness on a continuum

- 6. Which neuro-biological correlate of the Big 5 Personality factors is incorrect?**
 - a. Conscientiousness- Posterior Cingulate Cortex
 - b. Extraversion- Medial Orbitofrontal Cortex
 - c. Agreeableness- Superior Temporal Sulcus
 - d. Neuroticism- Medial Temporal Lobe

- 7. In Holtzman and Strube (2013)'s experiment, participants had their photo taken and completed scales assessing their level of Dark Triad factors. What conclusion was drawn from this experiment?**
- Participants who scored high on the Dark Triad were rated as more attractive than those who scored low and also scored high in neuroticism
 - Participants who scored low on the Dark Triad were rated as more attractive than those who scored high and also scored high in conscientiousness
 - Participants who scored high on the Dark Triad were rated as more attractive than those who scored low and also scored high in extroversion
 - Participants who scored low on the Dark Triad were rated as more attractive than those who scored high and also scored high in neuroticism
- 8. Which of the following statements about the Big 5 is incorrect?**
- The Tsimane people had two personalities: prosociality and industriousness
 - There were mostly low correlations after 123 men were tested on the Big 5 factors 45 years later
 - All Big 5 factors are inheritable, agreeableness being the least inheritable
 - American, French and Filipino individuals had all the Big 5 factors
- 9. Which behavioural scenario is most likely to occur, in regards to child psychopathology?**
- Luke is anxious when confronting strangers
 - Luke withdraws from his group of friends at school
 - Jessica continues to disrupt a school class
 - Jessica feels depressed and does not want to go outside
- 10. Rosemary thinks that her son may have conduct disorder. To assess this, she confronts a psychologist who then contacts Rosemary's son's teacher to make observations of any disruptive or antisocial behaviour. This method of assessment is an example of:**
- Clinical Interview
 - Psychological Test
 - Behavioural Observation
 - Third-Party Information
- 11. Which of the following statements is untrue of oppositional defiant disorder?**
- Acts of deceit or theft
 - Noticeable anger and loss of temper
 - Deliberate bothering of others
 - Precedes many other mental illnesses

12. What factor makes the persistence of conduct disorder more likely?

- a. Lack of remorse
- b. Comorbid ADHD
- c. Development of internal controls
- d. Increase physical and mental maturity

13. A mother punishes their child for crying about an unappetising dinner by sending them outside. This has the child calm down, however, this situation occurs every night. To which type of conditioning does the mother's behaviour of sending her child out correspond?

- a. Positive punishment
- b. Negative punishment
- c. Positive reinforcement
- d. Negative reinforcement

14. Which of the following is not a callous-unemotional trait?

- a. Lack of remorse or guilt
- b. Shallow or deficient emotions
- c. Lack of concern for others' feelings
- d. Insensitivity to punishment

15. Which of these is not a potential core deficit?

- a. Fearless/socially uninhibited temperament
- b. Thrill-seeking and punishment dominant
- c. Insensitive to punishment
- d. Insensitive to others' distress cues

16. Tommy has developed callous-unemotional traits. What is expected of his behaviour?

- a. After a transgression with a victim's distress, Tommy will experience guilt and empathy
- b. After a transgression with his parent's threats, Tommy will experience guilt and empathy
- c. Tommy does not respond quickly to tasks involving distressing or emotional stimuli
- d. Tommy has increased amygdala activation and vmPFC connectivity

17. What was the main difference between twin studies of children with conduct problems only and children with conduct problems + CU traits?

- a. Children with CP + CU had a genetic makeup of .81
- b. Children with CP only had purely genetic contributions to problems
- c. Children with CP + CU had an equal percentage of environmental and genetic influences
- d. Children with CP only had a shared environment makeup of .90

18. Mary starts to get anxious and worried right before presenting her speech for PsychSoc's AGM Executive position. She begins to sweat profusely and her heart rate spikes as well as starts assuming that the audience will laugh at her during her speech. What components of anxiety is she experiencing?

- a. Emotional, Behavioural, Physiological
- b. Emotional, Behavioural, Cognitive
- c. Emotional, Physiological, Cognitive
- d. All of them

19. Which statement does not describe a panic attack?

- a. It is an abrupt surge of intense fear/discomfort that reaches a peak within minutes
- b. The false suffocation alarm hypothesis describes increased self-reported fear responses following low levels of hydrogen
- c. Includes palpitations, sweating, trembling
- d. A panic attack does not mean panic disorder

20. Which of these is true of generalised anxiety disorder?

- a. A persistent fear of one or more social or performance situations
- b. Antidepressant medication (like SSRIs) can be used as treatment
- c. Common safety behaviours include avoiding eye contact or talking to safe people
- d. Group therapy, vicarious learning and role play can be used as treatments

21. Alex experiences a depressed mood for most of the day, for at least 2 years, has a poor appetite, low-self esteem and low energy and fatigue. His age of onset was 15 years and has other comorbid personality disorders. What does this characterise?

- a. Persistent Depressive Disorder (Dysthymia)
- b. Major Depressive Disorder
- c. Substance Depressive disorder
- d. Disruptive Mood Dysregulation Disorder

22. What is not a biological and psychological cause of depression?

- a. Family studies where relatives of parents with mood disorders show lower age of onset
- b. Neurotransmitter systems studies showcase an imbalance of various neurotransmitters in regulating serotonin and other neurotransmitter levels
- c. Learned helplessness demonstrates similar patterns to depression when organisms believe they do not have control over circumstances
- d. Cognitive models showcase positive thoughts, with positive schemas and positive automatic thoughts in response to situations

23. Which is not a correct description of treatment for depression?

- a. Monoamine Oxidase Inhibitors stop the breakdown of serotonin and norepinephrine neurotransmitters
- b. Tricyclics block the reuptake of neurotransmitters
- c. SSRIs specifically inhibit serotonin reuptake
- d. Cognitive Behavioural Therapy helps identify and modify behaviour so it becomes positive and beneficial

24. Yisha is diagnosed with bipolar disorder, in which her mood episodes have been reported as being 1 month long each. With which bipolar disorder would you diagnose Yisha?

- a. Bipolar I Disorder
- b. Bipolar II Disorder
- c. Cyclothymia
- d. Minor Depressive Disorder

25. Which of the following is not a characteristic of a manic episode, according to the DSM-V?

- a. Atypically talkative
- b. Inflated self-esteem
- c. Thoughts of suicide
- d. Decreased need to sleep

26. Which treatment scenario for an individual currently experiencing a manic episode is most appropriate?

- a. Taking selective serotonin reuptake inhibitors
- b. Engaging in behavioural activation
- c. Scheduling pleasant events
- d. Motivational interviewing about medication compliance

27. Which criterion of bulimia nervosa was updated from the DSM-IV to the DSM-V? (i.e. what is a new feature of the disorder as described in the DSM-V which differs from the DSM-IV?)

- a. A large amount of eating in a discrete period
- b. Lack of control over eating behaviours
- c. Binge and compensatory behaviours once per week for at least three months
- d. Self-evaluation influenced by shape/weight

28. Anthony believes that he has anorexia nervosa, however, according to the DSM-IV does not qualify for the disorder. Which criterion makes his diagnosis problematic?

- a. Amenorrhea
- b. Intense fear of becoming fat
- c. Anhedonia
- d. Refusal to maintain minimally normal body weight

29. Gwendoline often forces herself to vomit after uncontrollably eating large dinners when she goes out. What disorder and subtype is she most characteristic of?

- a. Anorexia Nervosa, restricting type
- b. Anorexia Nervosa, binge-eating/purging type
- c. Bulimia Nervosa, non-purging type
- d. Bulimia Nervosa, purging type

30. Select the most accurate statement that describes the factors that cause eating disorders.

- a. Cultural factors describe African and Hispanic Americans as more likely to internalise the thin ideal body image
- b. Psychological factors describe increased self-esteem, increased sense of control and confidence in causing eating disorders
- c. Social factors describe a timeline that encourages weight gain and the influence of social media in supporting realistic body images
- d. Biological factors describe genetics in increasing the risk of eating disorders and possible neuroendocrine dysfunction causing starvation and inappropriate compensatory behaviours

31. What is incorrect regarding the steps of Cognitive Behavioural Therapy (CBT) in treating Bulimia Nervosa (BN)?

- a. Step 1: Stabilising eating with behavioural strategies
- b. Step 2: Implementing strategies to modify cognitions, attitudes, and beliefs
- c. Step 3: Maintenance and relapse prevention
- d. Step 4: Adding in pharmacological treatments

32. A patient with schizophrenia experiences hallucinations, delusions, bizarre clothing and deficits in normal behaviour and cognition. Which of these is not part of the 3-factor model for schizophrenia?

- a. Disorganisation

- b. Reality distortion
- c. Positive symptoms
- d. Negative symptoms

33. Which of these is considered a model of schizophrenia?

- a. Schizophrenia is a Freudian defence mechanism against latent homosexuality
- b. There are grey and white matter abnormalities/deficits in the brain
- c. People with schizophrenia score lower on every measure of quality of life
- d. A & B

34. Choose the correct statement regarding risk factors for schizophrenia.

- a. Schizophrenia is highly heritable, but there is NO single gene for schizophrenia
- b. Velocardiofacial syndrome (VCFS) occurs with an addition of a piece of chromosome 22
- c. Recreational drugs minimise the risk of developing schizophrenia
- d. Gene x environment interactions do not exist, it is one or the other

35. Cultural knowledge and general knowledge facts are what type of intelligence?

- a. Street Smart Intelligence
- b. Fluid intelligence
- c. Crystallised intelligence
- d. Creative intelligence

36. Which of the following is most likely not an advantage of intelligence assessments?

- a. IQ tests can identify children who might benefit from extra education
- b. IQ tests can be used to substantiate claims about genetic differences between ethnicities
- c. IQ tests can track efforts to rectify differences in social disadvantage
- d. IQ tests can be used to select candidates in employment contexts

37. Pen and paper testing of intellectual ability are _____ valid for those who were schooled versus those who were not schooled (less familiar with reading and writing).

- a. predictively
- b. constructively
- c. convergently
- d. differentially

38. An employment test to measure the suitability of applicants for a role should not just be another IQ test. This is an example of consistency in

- a. rank ordering of difficulty
- b. factor analysis

- c. convergent validity
- d. divergent validity

39. Which of the following statements is incorrect?

- a. Cognitive ability is best assessed when intense exercise is followed by a short delay
- b. In low socioeconomic status, genetics only accounts for 8% of the variance in intelligence
- c. Music only has the temporary effects on boosts in performance
- d. Chess players have stronger memory skills

40. What do working memory and brain training games have in common?

- a. They both reliably improve fluid intelligence
- b. They improve performance on the trained tasks
- c. They improve performance on closely related tasks
- d. All of the above

41. Bellamy is unable to shower himself each morning. What stage of dementia would he be considered to have progressed?

- a. Mild
- b. Moderate
- c. Severe
- d. Permanent

42. Which of the following is not a clinical risk factor for dementia?

- a. High blood pressure
- b. High cholesterol
- c. Diabetes Mellitus
- d. Serotonin deficiency

43. Which statement about dementia is not true?

- a. There is a higher prevalence of dementia amongst the elderly, compared to youthful
- b. There is a higher prevalence of dementia amongst men than amongst women.
- c. There is a higher percentage of dementia attributed to genetics amongst elderly individuals than youthful
- d. There is a higher percentage of individuals diagnosed with dementia in Australia now than in the past

44. Which of these is not a DSM-5 criterion for PTSD?

- a. Exposure to actual or threatened death, serious injury or sexual violence
- b. Duration of more than 3 weeks
- c. Clinically significant impairment/distress

- d. Intrusion symptoms

45. Which accurately describes the theoretical models of PTSD?

- a. Lang's model (1977) describes a mental fear structure of stimuli, response and meaning elements
- b. Mowrer's Two Factor Theory (1947) explains poor elaborative processing and integration of trauma memories
- c. Ehlers & Clark's cognitive model (2000) accounts for symptoms of PTSD
- d. All of the above

46. A patient was diagnosed with PTSD. Treatment was recommended for the patient, in particular two types of treatment. The first involved increasing a sense of safety and connectedness to others, and the second involved gradually exposing the patient to a hierarchy of feared situations. What are these two treatments?

- a. Psychological debriefing and psychoeducation
- b. Psychological first aid and relapse prevention
- c. Psychological debriefing and imaginal exposure therapy
- d. Psychological first aid and in vivo exposure therapy

47. Which of the following statements about schizophrenia is correct?

- a. Dopamine antagonists produce 'paranoid psychosis' symptoms
- b. The performance of a therapeutic dose is related to the drug's ability to bind to D1 receptors
- c. Even after dopamine was blocked for addicts, they continued to exhibit psychotic symptoms
- d. Schizophrenia patients have high levels of dopamine receptors

48. In Schultz's dopamine experiment with monkeys who were conditioned to a light that predicted the delivery of juice, when the light flashed but no juice was presented, what dopamine pattern was displayed?

- a. Increase in dopamine during light, increase in dopamine response during the absence of juice
- b. Decrease in dopamine during light, negative dopamine response during the absence of juice
- c. Increase in dopamine during light, negative dopamine response during the absence of juice
- d. Decrease in dopamine during light, increase in dopamine response during the absence of juice

49. A side effect of antipsychotics for schizophrenia in which there are facial tics in the eyes, lips etc. is known as _____

- a. Agranulocytes
- b. Dysphoric effects

- c. Tardive dyskinesia
- d. Sedative effects

Answers and Rationales

1. B (because inter-rater reliability is the extent to which observers agree on a score)
2. B (because various methods used to measure aspects of the same thing can be useful)
3. D (because content validity is the extent to which the item adequately samples the mental construct i.e. Neuroticism is not indicated by EQ)
4. C (statistical deviance, distress, and dysfunction are factors for abnormality)
5. A (because in contrast to a categorical approach which has clearly defined boundaries, a dimensional approach does not have a common vocabulary)
6. A (because the neurobiological correlate of conscientiousness is the Middle Frontal Gyrus. The Posterior Cingulate Cortex is the neurobiological correlate of agreeableness)
7. C (because participants who scored **high** on the Dark Triad were rated as more attractive than those who scored low. They scored high in extroversion and openness but low in neuroticism, conscientiousness and agreeableness)
8. B (because there were high correlations between baseline and follow-up for Neuroticism, Openness to Experience and Extraversion after 45 years)
9. A (because specific loss of insight is a factor of Cleckley's psychopathy criteria)
10. D (because Jessica is a girl, and is more likely to show an internalising dimension of psychopathology, such as depression. Boys are more likely to externalise, thus the examples of Luke (a boy) internalising is less likely, and Jessica externalising (by disrupting the class) is not characteristic of female child psychopathologies)
11. C (because behavioural observations of children involve any adult, such as their parents or teachers, making observations on their behaviour to examine if any of their behaviour is problematic)
12. A (because acts of deceit or theft are characteristic of conduct disorder, not oppositional defiant disorder)
13. B (because A is one symptom of antisocial personality disorder, whilst C and D are factors that contribute to desistance in the developmental course. B is the only factor that contributes to a predicted persistence of conduct disorder)
14. D (because negative reinforcement occurs when an individual behaves in such a way that an aversive stimulus is removed; since the aversive stimulus is removed, the behaviour is reinforced. In this scenario, the mother removes the aversive stimulus of her child complaining about dinner, and her behaviour of sending her child out is reinforced to remove the aversive stimulus)
15. D (because insensitivity to punishment is a developmental origin for callous-unemotional traits, but not a trait itself)
16. B (B is the only incorrect one, the correct developmental origin is thrill-seeking and REWARD dominant, not punishment dominant)
17. C (C is the only correct answer, Tommy will not experience guilt/empathy following transgressions with victims/parents or has decreased neurological function)
18. A (A is the only correct answer, .81 was in lecture slides, B is false because CP only has genetic + environment, C is not true, it is not equal, D is not true, shared environment makeup number was made up)
19. C (While you can argue all of them, the more accurate answer is C, worriensness is part of the emotional response, increased heart rate/sweating is part of physiological and attentional reorienting in the form of negative reappraisal is under cognitive, behavioural refers to more of fight, flight, freeze and avoidance)

20. B (the only incorrect answer, the false suffocation alarm hypothesis occurs as a result of low oxygen, not hydrogen levels, all other answers are correct)
21. B (B is the only correct answer, all other answers are not features of GAD, and hopefully you noticed that they represent social phobia)
22. A (These are characteristics of PDD (Dysthymia, you should typically know based off the fact it said 2 years, so it was persistent, these symptoms are similar to MDD but age of onset for MDD is 26.2 years and PDD is 10-25 years, it can't be substance depressive disorder or disruptive mood dysregulation disorder since the question didn't mention any substance abuse/medication or mood fluctuations)
23. D (D is false, A, B, and C are all correct in describing theory relevant to the causes of depression whereas D is false because there are negative thoughts implicated in depression with negative schemas, beliefs and automatic thoughts)
24. D (Self-explanatory, all pharmacological descriptions of treatment for depression are correct, CBT is modifying negative and maladaptive behaviour)
25. B (Mood episodes in bipolar I disorder typically last 2-6 months, whereas in bipolar II disorder they last less than this. Therefore, a one-month episode is more characteristic of bipolar II disorder.)
26. C (A, B and D are all characteristics of a manic episode. Bipolar I disorder can increase the risks of suicide/suicidal thoughts, however, this is when coming off of a manic episode, rather than an element of the episode)
27. D (D is an approach to preventing manic episodes from causing negative consequences by having the patient understand the importance of taking their medications. The other options are all appropriate for patients when experiencing a depressive episode.)
28. C (The DSM-IV prescribed the frequency of binge and compensatory behaviours as occurring twice per week for three months rather than once per week.)
29. A (Anthony is a male, therefore cannot have amenorrhea since he cannot menstruate. This criterion renders males disqualified to the disorder, which is problematic.)
30. D (She suffers from bulimia nervosa as she uncontrollably often eats large amounts of food, and is the purging type since she attempts to get rid of food through vomiting.)
31. D (D is the only correct answer, cultural factors describe African/Hispanic Americans as LESS likely to internalise, psychological factors describe decreased self-esteem, sense of control and confidence and social factors describe a recent historical timeline of discouraging weight gain and unrealistic body images)
32. D (D is incorrect, there are 3 steps in CBT for BN, step 4 is made up and while pharmacological treatments are used in adjunct with CBT, it is not relevant to the purpose of the question)
33. C (C is the answer, disorganisation refers to disconnected thought, speech and bizarre behaviour, reality distortion refers to hallucinations and delusions and lastly negative symptoms, not positive symptoms. A good way to know the difference is that positive symptoms are abnormal by their presence (eg hallucinations) while negative symptoms are abnormal by their absence (eg negative affect)
34. D (A & B are both correct, schizophrenia was actually considered a defence mechanism against latent homosexuality, it's just that there is very little evidence in supporting this, there are grey and white matter deficits in the brain and C is correct, but irrelevant to the question and is a cost of schizophrenia, not a model.)
35. A (VCFS is a deletion of a piece of chromosome 22, drugs increase the risk of developing schizophrenia and gene x environment interactions do exist)
36. C (because Raymond Cattell argued that fluid intelligence- mechanics of thinking/ the

way one processes info and crystallised intelligence- facts we know/cultural knowledge should be studied further)

37. B (because (IQ tests used to highlight genetic differences between ethnicities implies exclusion and negative stereotyping of particular groups of people. It may be argued that using IQ tests in employment contexts is unfair but the problem in that scenario is the use of the IQ test, there is no disadvantage with the IQ test itself in this situation)
38. D (because differential validity is when test bias exists when conclusions are appropriate for one subgroup, but not for others... that is to say, differentially valid. (accurate for some but not all)
39. D (because the employment test should not have a strong correlation with IQ scores. This is an example of divergent validity in which there should be a low correlation between the test and other measures that it should not correlate with)
40. D (because memory skills associated with chess players do not transfer to other memory domains or other domains of intelligence)
41. B (because working memory and brain training games only improve working memory so you get training effects on the trained task but not necessarily on other broader effects related to fluid intelligence)
42. B (because the moderate stage of dementia occurs when the individual is unable to complete basic activities of daily living, such as showering)
43. D (because serotonin deficiency is related to mood disorders, not dementia)
44. C (because whilst the prevalence of dementia is higher amongst the elderly, those who are younger and develop dementia usually have the condition due to genetic factors)
45. B (B is the incorrect answer, all other answers are correct criteria for PTSD)
46. A (A is the only correct answer, B and C are swapped around, D is not true)
47. D (D is the only correct answer and the answer that correctly describes both psychological first aid and in vivo exposure therapy)
48. D (Dopamine agonists produce 'paranoid psychosis' symptoms, the drugs bind to D2 receptors and addicts stop showing psychotic symptoms after their antipsychotic medication is high)
49. C (Light is surprising (increased dopamine response), and absence of juice is also surprising (negative dopamine response- start firing below baseline))
50. C (Extra-pyramidal symptoms of movement are known as Tardive dyskinesia in which there are facial tics in the eyes, lips etc. (like symptoms of Parkinson's)).