

PSYC2101 Practice Exam 2021

1. **Which of these characteristics is most likely to be found in a child with an internalising disorder?**
 - a. Disruptive behaviour
 - b. Aggression
 - c. Refusing to listen to parents
 - d. Refusing to speak at school

2. **Which of the following was NOT a conclusion from Kim-Cohen et al. (2003) on childhood and adult mental illnesses?**
 - a. Of all adults with mental disorders, 50% of them also had a childhood mental disorder
 - b. 1 in 2 adults receiving intensive MH services had a childhood mental disorder before aged 16
 - c. Conduct disorder was identified as a “priority prevention target” for reducing adult mental illness
 - d. Having an adult anxiety disorder was related to having a childhood anxiety disorder

3. **Leo is a 4-year-old boy displaying behaviours of biting, stealing from classmates and hitting his brother. He is also described as defiant, impulsive and hyperactive. Which tool of assessment is LEAST likely to be used when diagnosing the problem?**
 - a. Conducting a behavioural observation of Leo at school
 - b. Having Leo fill out a self-report questionnaire
 - c. Having both of Leo’s parents rate his behaviour
 - d. A clinical interview to understand Leo’s history and symptoms

4. **Lucas has ODD and primarily displays signs of an angry/irritable mood, including often losing his temper, becoming easily annoyed and acting resentful towards others. Which of these disorders is he predicted to likely develop later in life?**
 - a. A depressive disorder
 - b. Attention-deficit/hyperactivity disorder
 - c. Autism Spectrum disorder
 - d. Psychopathy

5. **Which of these is an example of a dispositional risk factor for Conduct Disorders?**
 - a. Parenting that involves the frequent promise of punishment but never delivering it
 - b. Deviant peers
 - c. Autonomic irregularities
 - d. Frequent exposure to violence

- 6. Max presented many behavioural problems early in childhood, but this desisted as he got older. Which trajectory of conduct problems does this represent, and what is a likely outcome for Max when he is an adult?**
- Childhood-onset persistent - he will have engaged in the most crime and violent behaviour his whole life compared to other groups.
 - Childhood-limited group - he will have very few problems in adulthood.
 - Adolescent-onset group - he will have moderate levels of criminal activity.
 - Non-problem group - he will engage in some criminal activity only during adolescence.
- 7. In classifying panic disorder, an individual is scored on four symptom domains. Which classification approach does this represent?**
- Categorical
 - Dimensional
 - Transdiagnostic
 - All of the above
- 8. Specific phobias have many subtypes. Based on this information, which classification approach does this follow?**
- Categorical
 - Dimensional
 - Transdiagnostic
 - None of the above
- 9. Which of the following is not true about the transdiagnostic classification approach?**
- It highlights the importance of neurodevelopment and the environment.
 - It is not a holistic approach.
 - It can't be used for immediate clinical use.
 - Its domains have been classified.
- 10. A researcher is investigating the levels of intelligence within children. They provide the children with a questionnaire with 10 questions relating to intelligence. However, they decide to increase the number of questions in the questionnaire. What is the researcher aiming to improve?**
- Reliability
 - Validity
 - Both reliability and validity
 - None of the above
- 11. In a study, a participant was in a low mood and this influenced their total score for the given questionnaire. What type of error has occurred?**
- Systematic error
 - Observational error
 - Random error
 - Operational error

12. Which of the following is an example of construct validity?

- a. A test predicts a child's current traits that align with conduct disorder.
- b. A test measures all of the characteristics of conduct disorder.
- c. A test predicts a child's likelihood to develop antisocial personality disorder later in life.
- d. A test that measures traits of conduct disorder doesn't correlate with a test that measures separation anxiety symptoms.

13. Which of the following is true about Eysenck's theory of personality?

- a. It involved using factor analysis to identify 16 personality factors
- b. It is currently the dominant model of personality
- c. Eysenck proved that personality shapes what an individual looks like
- d. The personality factor of psychoticism was later added to the theory

14. In DeYoung et al.'s (2010) study of how volume of the brain correlates with the Big 5 personality traits, the volume of which part of the brain was related to the trait of extraversion?

- a. Medial orbitofrontal cortex (inhibition control)
- b. Superior temporal sulcus (monitoring intentions of others)
- c. Amygdala (fear response)
- d. There was no significant correlation between extraversion and volume of any part of the brain

15. On a test of her Big 5 personality traits, Dana scores the highest on agreeableness. What will be the most likely outcome from a test of her Dark Triad traits?

- a. Highest on the trait of narcissism
- b. High on all Dark Triad traits
- c. Low on the trait of narcissism and psychopathy, but high on Machiavellianism
- d. Low on all Dark Triad traits

16. Which of the following is NOT true of changes in the brain during adolescence?

- a. There are large individual differences in brain changes.
- b. There is evidence that environmental factors, such as socioeconomic status, can lead to differences in brain changes between individuals.
- c. Changes in reward-processing areas of the brain are not influenced by differences in culture.
- d. Effects of puberty on brain development can be divided into permanent changes in structure and temporary changes in activity of the neural system.

- 17. Emma and James are both 16-year-olds with a major depressive disorder based on self-report. What will be the most likely comparison between them, given that Emma is female and James is male?**
- They will engage in similar levels of risk-taking since these behaviours are consistent across gender in adolescents.
 - James will be more likely to engage in risk-taking behaviours of smoking cigarettes, bingeing alcohol and using Cannabis.
 - Emma will be more likely to engage in risk-taking behaviours of smoking cigarettes, bingeing alcohol and using Cannabis.
 - Both of them will be less likely to have had sexual intercourse than a 16-year-old with no mental health disorder.
- 18. Macey has written four lines on adolescence and the socio-emotional disorders for a report. Which one needs to be edited?**
- Increased mental health problems in adolescence are due to greater awareness and thus increased reporting.
 - Socio-emotional disorders are associated with social changes and perceived social risks in adolescence.
 - Brain development plays a major role in adolescent changes.
 - Considering adolescent cognitive, social and brain development can help us improve prevention and treatment interventions.
- 19. Ted Bundy was a psychopath known for his charm, killing several women and escaping from prison multiple times. Based on this description, which of Cleckly's dimensions of psychopathy are evident?**
- Emotional/interpersonal deficits and positive adjustment
 - Chronic behavioural deviance and emotional/interpersonal deficits
 - Positive adjustment and chronic behavioural deviance
 - All three dimensions
- 20. Which of the following is not true regarding Hare's Psychopathy Checklist (PCL)?**
- The cut-off value for a psychopath is arbitrary as it is not based on strong evidence.
 - It only involves a semi-structured face-to-face interview.
 - The facets of the PCL are the antisocial facet, interpersonal facet, lifestyle facet and the affective facet.
 - Factor analytic research was used to create the PCL.
- 21. Paul Frick developed the Antisocial Process Screening Device to measure youth psychopathy. Which facet in the Psychopathy Checklist (PCL) is its focus on callous-unemotional traits congruent to?**
- Interpersonal
 - Antisocial
 - Affective
 - Lifestyle

- 22. Which of the following can make anxiety maladaptive?**
- Intensity
 - Avoidance
 - Attentional narrowing
 - Increased heart rate
- 23. According to the cognitive model of social phobia, similar to the model of panic, which of the following is an example of how social anxiety is maintained?**
- A student irrationally worrying about how they will do in their class presentation.
 - A child hides behind their mother because there is a person walking their dog.
 - A teacher doesn't think about how they made a mistake in their teaching instructions.
 - A worker takes their colleague's constructive feedback to improve on their future work.
- 24. Which anxiety disorder focuses on interoceptive conditioning in its behavioural approach?**
- Generalised anxiety disorder
 - Social anxiety
 - Specific phobia
 - Panic disorder
- 25. Which of the following is not considered a cause of major depressive disorder or dysthymia?**
- Ruminative response style
 - Abnormal circadian rhythms
 - Inheritance from a first-degree relative
 - Dysregulation of neurotransmitters due to low serotonin levels
- 26. Anna receives several compliments for her presentation, however, she can't stop thinking about the one person who fell asleep. This is an example of which cognitive error?**
- Filtering
 - Overgeneralisation
 - Emotional reasoning
 - All-or-nothing thinking
- 27. Inflated self-esteem and grandiose, distractibility, and decreased need for sleep for over a week are symptomatic of:**
- A manic episode
 - A hypomanic episode
 - Schizophrenia
 - Antisocial personality disorder
- 28. Sarah often experiences heightened energy for around 4 days, before falling into periods of depressed mood and loss of interest in activities. A clinical psychologist may classify her as having:**

- a. Bipolar 1
 - b. Bipolar 2
 - c. Cyclothymia
 - d. Major depressive disorder
- 29. The most effective treatment for mania is:**
- a. Cognitive behavioural therapy
 - b. Mood stabilisers
 - c. Antidepressants
 - d. A and B
- 30. Which of the following is an example of upward social comparison?**
- a. Lenny feels happy as he sees his favourite actor's gym routine
 - b. Lenny laughs as he sees an obese person in an advertisement
 - c. Lenny feels sad as he watches a movie showcasing men with strong bodies
 - d. Lenny is comforted as he sees images of men larger than him in a magazine
- 31. Men may be different to women in terms of the manifestation of eating disorders, in that men:**
- a. Are more likely to develop eating disorders
 - b. Are more likely to develop muscle dysmorphia
 - c. Present with more extreme symptoms
 - d. Present with more genetic contribution to their condition
- 32. Agnes cannot control how much she eats, feasting on large quantities of food in discrete periods. She distresses greatly over this behaviour and feels guilty, yet persists in eating a lot. Which disorder is Agnes' behaviour most characteristic of?**
- a. Anorexia Nervosa
 - b. Bulimia Nervosa
 - c. Binge Eating Disorder
 - d. Other specified feed or eating disorder
- 33. Weight restoration is an effective treatment for:**
- a. Anorexia Nervosa
 - b. Bulimia Nervosa
 - c. Binge Eating Disorder
 - d. Other specified feed or eating disorder
- 34. Which of the following is NOT a true psychological factor that may contribute to one's eating disorder behaviours?**
- a. Having overconfidence in one's self-control
 - b. Overeating to avoid confrontation with negative emotions
 - c. Feeling unstable in one's identity
 - d. Attempting to practice perfectionism

- 35. Which of the following is not a current criterion of Anorexia Nervosa?**
- Extreme fear of gaining much weight
 - Restricting the amount of food consumed
 - Disturbed body perception
 - Absence of menstrual period of 3+ months
- 36. Jacob returns home before dark each day and sleeps with a shotgun next to him each night. This is a result of an irrational fear that someone is plotting to harm him despite having done no crimes and keeping a low profile. In relation to schizophrenia, this is most representative of:**
- Paranoid delusions
 - Grandiose delusions
 - Delusions of reference
 - Delusions of control
- 37. Which of the following is an example of a negative symptom?**
- Brendan dresses like a normal civilian
 - Brendan sees giraffes in his bedroom
 - Brendan does not smile at his caring friends
 - Brendan is comorbidly diagnosed with anorexia nervosa
- 38. What factor does not significantly influence the likelihood of developing schizophrenia?**
- Interaction between genetics and cannabis exposure in adolescents
 - Genetic inheritance
 - Amphetamine exposure in adulthood
 - Aberrant salience
- 39. CBT for positive symptoms of schizophrenia involves:**
- Behavioural activation
 - Thought challenging
 - Removing auditory hallucinations
 - Teaching coping skills
- 40. Which of the following is an example of aberrant salience?**
- Jules is shocked when he sees two trucks collide with each other
 - Jules is shocked when he sees an orange in a fruit bowl
 - Jules is calm when a magpie swoops over his head
 - Jules is calm when a man emerges from a bathroom with a gun
- 41. Alicia is able to continue her daily activities such as brushing her teeth but experiences a modest decline in executive functioning. What is the name of this disorder?**
- Major Neurocognitive Disorder
 - Schizophrenia

- c. Major Depressive Disorder
 - d. Mild Neurocognitive Disorder
- 42. The most common causes of dementia include:**
- a. Parkinson's disease and Vascular disease
 - b. Huntington's disease and Prion disease
 - c. Vascular disease and Alzheimer's disease
 - d. Huntington's disease and Alzheimer's disease
- 43. Amongst all dementia cases, what is the prevalence of developing late-onset dementia?**
- a. 5%
 - b. 20%
 - c. 95%
 - d. 80%
- 44. Which is not a criterion in the DSM-5 for PTSD?**
- a. Duration of more than one month
 - b. Alteration in cognition or mood
 - c. Intrusion symptoms
 - d. Persistent avoidance or external or internal stimuli associated with trauma
- 45. Which of these are risk factors for developing PTSD?**
- a. Gender
 - b. Perceived life threat
 - c. Level of support
 - d. Controllability
- 46. Which intervention is most effective in addressing chronic PTSD?**
- a. Narrative exposure therapy
 - b. Psychoeducation
 - c. Stress Inoculation
 - d. Relaxation Training
- 47. Which theory is 'reaction formation' associated with:**
- a. Cognitive Theory
 - b. Behaviour Theory
 - c. Humanistic Theory
 - d. Psychoanalytic Theory
- 48. Iris receives a token for not smoking in the last three days and has eventually collected enough tokens to earn a food voucher. What is this therapy called?**
- a. Cognitive Behaviour Therapy (CBT)
 - b. In Vivo Exposure
 - c. Behaviour Modification

- d. Person-centred Therapy
- 49. Which should not be considered when conducting a good treatment study?**
- a. Manualised Treatment
 - b. Cost-effectiveness
 - c. Dissemination
 - d. None of the above
- 50. What components are included in the scientist-practitioner model?**
- a. Psychological treatment, theoretical models, scientific research
 - b. Scientific models, psychotherapy and rigorous training
 - c. Application of scientific principles, staying informed, psychotherapy
 - d. Theoretical models, psychotherapy and application of scientific principles
- 51. What is the aim of humanistic therapy?**
- a. Reduce defences and gain insight into hidden intrapsychic conflicts
 - b. Challenge overt, observable maladaptive behaviour
 - c. Reduce psychological distress by helping patients think in a way that is more realistic
 - d. None of the above
- 52. Janet proclaims her mother and her have an amazing relationship, when, in fact, they have a relationship filled with conflict. What is this called?**
- a. Dissociation
 - b. Projection
 - c. Reaction Formation
 - d. Denial

Answers and Rationales

Childhood Disorders

1. D: Refusing to speak at school is a symptom of selective mutism - a type of anxiety disorder, and thus an internalising disorder. The rest are symptoms of externalising disorders that affect people around them more than the individual.
2. B: 60% of adults receiving intensive MH services had a childhood mental disorder, not 1 in 2.
3. B: For younger children, observation and rater measures are especially important. Self-report questionnaires are usually used for children over 7 years of age.
4. A: ODD traits are divided into three domains of angry/irritable mood, argumentative/defiant behaviour, or vindictiveness. The traits in the first domain of angry/irritable mood (red in lecture slides) were found to predict children who develop depressive disorders - they are similar traits to Disruptive Mood Dysregulation disorder.
5. C: Dispositional risk factors are those found in the child themselves, as opposed to their environment (contextual risk factors). Autonomic irregularities are the only dispositional risk factor, as the others (dysfunctional parenting, peer influence and violence exposure) are found in their environment.
6. B: Max's behaviour represents the childhood-limited group (represented by green in the Dunedin longitudinal study graph showing 'four common trajectories of conduct problems'). From the outcomes recorded when participants were aged 32, this group had very few problems.

Classification

7. B: Domains include emotional symptoms, cognitive symptoms, behavioural dimensions and physical symptoms. Classification is dimensional because it assesses the pattern of scores as a whole.
8. A: The DSM-5 is a categorical classification system that has diagnostic categories, which are composed of disorders and broken down further into subtypes. An individual either fits into one category or doesn't. Specific phobias are under the diagnostic category of anxiety and some of its subtypes include animal phobias and blood-injury-injection phobias.
9. B: A transdiagnostic classification approach is a holistic approach as it organises mental disorders based on many factors, such as the interaction between brain development, social factors and lifespan.

Reliability and Validity

10. A: Increasing the number of test items (i.e. the number of questions) in a measure can improve reliability, specifically Cronbach's alpha.
11. C: Random errors are unpredictable influences that vary between measurements and they can go in both directions (increasing or decreasing a score). Mood can increase or decrease the score.
12. D: This option is an example of discriminant/divergent validity, a type of construct validity where a test doesn't correlate with another test that theoretically shouldn't be associated with the test in question.

Personality

13. D: *16 personality factors is by Cattell, currently dominant model is Big 5, and Eysenck did not prove a relationship between personality and appearance (this was suggested by Hippocrates' 4 humours)*
14. A: *Stated in lectures for neural basis of Big 5.*
15. D: *An individual high on agreeableness will score low on all Dark Triad traits.*

Adolescent Mental Health

16. C: *Environment (SES) and culture are both sources of variation in individual brain differences. Telzer et al. (2010) showed differences in reward-processing areas of the brain between Latino and White youth.*
17. C: *From the Young Minds Matter (2013-2014) study, females with MDD were significantly more likely to engage in these three behaviours compared to men. Adolescents with MDD by self-report were also more likely to have had sexual intercourse than those with no mental disorder.*
18. A: *"Increased mental health problems in adolescence are NOT simply a function of increased self-report" from adolescence lecture summary slide.*

Psychopathy

19. C: *Ted Bundy's charming personality is part of the positive adjustment dimension. The recidivism exhibited in Bundy (killing several women, and escaping prison multiple times) is an example of chronic behavioural deviance, particularly poor judgment/failure to learn from experience.*
20. B: *The semi-structured face-to-face interview is supplemented by a detailed review of institutional file material e.g. medical/police records.*
21. C: *Callous/lack of empathy is one of the items within the affective facet.*

Anxiety and its Disorders

22. A: *Stated in the lecture.*
23. A: *This is an example of increased self-focused attention. C and D are reverse examples of the other factors maintaining social anxiety, which are the use of misleading information and post-event processing. B is not an example of social phobia, it is more relevant to a possible specific phobia of dogs.*
24. D: *Stated in the "Anxiety and its Disorders" lecture.*

Depression

25. B: *Stated in the lecture. Abnormal circadian rhythms cause bipolar disorders, particularly causing bipolar depressed individuals to sleep a lot.*
26. A: *This involves filtering out the positive and only focussing on the negative and is implemented in causes of depression under the cognitive model.*

Bipolar Disorders

27. A: *Manic episodes are a period of abnormally and persistently elevated or irritable mood and increased goal-directed energy, lasting at least 1 week, whereas hypomanic episodes may be shorter (4 consecutive days).*
28. B: *Bipolar 2 disorder is characterised by hypomanic episodes alternating with major depressive episodes. Since this period of mania only lasted for a few days, this would be considered a hypomanic episode. Hypomanic episodes are shorter in duration than manic episodes, which are characteristic of bipolar 1.*
29. D: *A primary pharmacological treatment for mania is mood stabilizers e.g. lithium. In conjunction, CBT, especially motivational interviewing is effective in increasing compliance to taking medication.*

Eating Disorders

30. C: *Upward social comparison refers to when an individual compares themselves to someone who appears healthier, making them feel negative.*
31. B: *The other three are untrue - A is the reverse (females are more likely to develop eating disorders) and for C/D, men/women present with similar symptoms and states for eating disorders.*
32. C: *Whilst eating large quantities in discrete periods characterises both binge eating disorder and bulimia nervosa, Agnes does not engage in compensatory behaviours, making her condition more akin to binge eating disorder.*
33. A: *As anorexia nervosa is characterised by restricted energy intake (leading to reduced weight), weight restoration is an effective way of restoring healthy body mass.*
34. A: *This is not a true psychological factor - the opposite is true, in which a lack of self-control can lead to the development of an eating disorder.*
35. D: *This criterion was removed in the DSM-V since men are unable to menstruate.*

Schizophrenia

36. A: *Jacob experiences paranoid delusions since he has an irrational fear that others are plotting to harm him.*
37. C: *Brendan not smiling is a negative symptom (abnormal by their absence), as he shows flat affect and abnormal social skills.*
38. D: *Aberrant salience is a phenomenon experienced by people with schizophrenia, but is not a factor/cause for the disorder's development.*
39. D: *Options A and B are for CBT with negative symptoms - option C is not implemented; D is correct, since schizophrenics are taught to cope with auditory hallucinations rather than deny/remove them.*
40. B: *Jules shows surprise at a normal stimulus that would attract no significant attention/surprise to a normal individual.*

Dementia and PTSD

41. D: *Individuals with Mild Neurocognitive disorder experience modest cognitive decline in areas such as (complex attention, executive function, learning and memory, language, perceptual-motor or social cognition) and are still able to independently continue everyday activities. Major neurocognitive disorder involves significant cognitive decline and interferes with activities of daily living. These symptoms are not included in the DSM for both schizophrenia and Major Depressive Disorder.*
42. C: *The most common causes of dementia are Alzheimer's Disease and Vascular Disease - the other diseases can cause dementia but are not as common as the two stated previously.*
43. C: *There are typically two onsets in dementia - young-onset dementia where prevalence is 5% and late-onset dementia where the prevalence is 95%.*
44. B: *Rather than 'Alteration in cognition or mood', the criteria states it should be 'Negative Alterations in cognition or Mood' as alterations could also be positive. All the other options are necessary to be diagnosed with PTSD.*
45. A: *Gender is the only risk factor in this list - as females are more likely to develop PTSD in comparison to males. The other factors are considered to be peritraumatic factors.*
46. A: *Narrative exposure therapy is considered to be a trauma-focused intervention, which is the first-line treatment for chronic PTSD according to treatment guidelines (e.g., ISTS). The other intervention can be helpful but is not considered the most effective.*

Psychological Therapies for Adults

47. D: *Reaction formation is thought to be a defence mechanism that arises out of unresolved conflict - as such, associated with psychoanalytic theory.*
48. C: *Behaviour modification is based on the principles of operant conditioning. Where Iris' behaviour (of not smoking) is rewarded with a token, so this 'not smoking' behaviour will increase as she receives a reward. This technique is referred to as 'token economies' - in which you can use tokens to earn privileges (i.e. food vouchers).*
49. D: *Options A, B and C all need to be considered in order to conduct a good treatment study.*
50. A: *The scientist-practitioner model suggests that scientific research leads to theoretical models which give way to psychological treatment. It also suggests there is scientific research that can lead directly to psychological treatment and this pathway also works in reverse.*
51. D: *A is the aim of psychoanalytic therapy, B is the aim of behaviour therapy and C is the aim of cognitive therapy.*
52. C: *Reaction formation can be defined as taking the opposite action or behaviour from unacceptable unconscious feelings/ impulses. Janet is taking the opposite action (her proclamation of her and her mother's amazing relationship) because she unconsciously feels that her current relationship with her mother is unacceptable.*