

Module 67 Practice Quiz

Multiple Choice

Identify the choice that best completes the statement or answers the question.

- _____ 1. Psychological disorders characterized by emotional extremes are called
- somatic symptom disorders.
 - personality disorders.
 - dissociative disorders.
 - mood disorders.
 - anxiety disorders.
- _____ 2. Major depressive disorder is said to occur when signs of depression last at least
- one week.
 - two weeks.
 - two months.
 - four months.
 - one year.
- _____ 3. Feelings of worthlessness are most likely to be associated with
- mania.
 - major depressive disorder.
 - panic disorder.
 - antisocial personality disorder.
 - phobia.
- _____ 4. In which disorder do people alternate between states of lethargic hopelessness and wild overexcitement?
- conversion disorder
 - bipolar disorder
 - obsessive-compulsive disorder
 - schizophrenia
 - dissociative identity disorder
- _____ 5. Mania is most likely to be characterized by feelings of
- guilt.
 - fear.
 - ambivalence.
 - optimism.
 - indifference.

- _____ 6. Bipolar disorder is most likely to be characterized by
- a massive dissociation of self from ordinary consciousness.
 - the simultaneous experience of delusions of persecution and delusions of grandeur.
 - offensive and unwanted thoughts that persistently intrude into conscious awareness.
 - alternations between extreme hopelessness and unrealistic optimism.
 - a chronic lack of guilt feelings.
- _____ 7. Adults who are diagnosed with persistent depressive disorder (also called dysthymia) experience a mildly depressed mood more often than not for at least
- one week
 - two weeks
 - one month
 - six months
 - two years
- _____ 8. Research regarding depression indicates that
- depression is typically unrelated to stressful life events.
 - depression is unlikely to be overcome without professional help.
 - depression is associated with abnormally high levels of the neurotransmitter serotonin.
 - with each new generation, depression is increasing in its prevalence.
 - with each new generation, depression is decreasing in its prevalence.
- _____ 9. To identify genes that put people at risk for depression, researchers have used
- fMRI scans.
 - linkage analysis.
 - PET scans.
 - the DSM-5.
 - factor analysis.
- _____ 10. Drugs that alleviate mania tend to reduce levels of the neurotransmitter
- acetylcholine.
 - norepinephrine.
 - dopamine.
 - estrogen.
 - serotonin
- _____ 11. Cognitive changes that accompany depression include a(n)
- decrease in self-focused thinking.
 - increased expectation of negative outcomes.
 - increased externalization of blame.
 - increased obsession with experiencing physical pleasure.
 - decrease in pessimistic explanatory style.

- _____ 12. A therapist believes that Chet is chronically depressed because he takes too little credit for his many achievements and assumes too much responsibility for his few failures. The therapist's interpretation reflects a _____ perspective.
- psychoanalytic
 - social-cognitive
 - trait
 - humanistic
 - biological
- _____ 13. The social-cognitive perspective has emphasized that depression is perpetuated by
- motivational conflict.
 - self-blaming attributions.
 - egocentrism.
 - conscious role playing.
 - feelings of ambivalence.
- _____ 14. Self-blaming attributions are most likely to be associated with
- schizophrenia.
 - obsessive-compulsive disorder.
 - phobias.
 - depression.
 - personality disorders.
- _____ 15. Women are at greater risk of depression than men partially because women are more likely to _____ in response to stressful circumstances.
- overthink
 - externalize blame
 - suffer memory loss
 - become socially withdrawn
 - engage in denial
- _____ 16. People who suffer chronic depression are at high risk for experiencing
- unrealistic optimism.
 - reduced self-awareness.
 - excessive levels of norepinephrine.
 - social rejection.
 - hallucinations and delusions.

- _____ 17. To break the vicious cycle of depression, the social-cognitive perspective suggests that people should be encouraged to explain their failures in terms that are both
- internal and stable.
 - external and global.
 - internal and global.
 - external and temporary.
 - external and stable.
- _____ 18. The risk of suicide is greatest when people
- anticipate the onset of a depressive episode.
 - experience the first symptoms of a depressive episode.
 - experience depressive symptoms at their most extreme levels of severity.
 - begin to rebound from their depression.
 - transition from a manic phase to a depressive phase.
- _____ 19. Of those who talk of suicide _____ actually attempt suicide. Of those who attempt suicide, _____ succeed in completing the act.
- only a few; most
 - all; most
 - only a few; only a few
 - most; all
 - most; only a few
- _____ 20. Groups that are most likely to hurt themselves by NSSI are
- the elderly
 - new parents
 - people experiencing a midlife crisis
 - infants and toddlers
 - adolescent and young adults

Module 67 Practice Quiz Answer Section

MULTIPLE CHOICE

1. ANS: D PTS: 1 DIF: Easy OBJ: Unit XII | 67-1
TOP: Mood disorders SKL: Factual/Definitional
2. ANS: B PTS: 1 DIF: Difficult OBJ: Unit XII | 67-1
TOP: Major depressive disorder SKL: Factual/Definitional
3. ANS: B PTS: 1 DIF: Medium OBJ: Unit XII | 67-1
TOP: Major depressive disorder SKL: Factual/Definitional
4. ANS: B PTS: 1 DIF: Easy OBJ: Unit XII | 67-1
TOP: Bipolar disorder SKL: Factual/Definitional
5. ANS: D PTS: 1 DIF: Medium OBJ: Unit XII | 67-1
TOP: Bipolar disorder SKL: Factual/Definitional
6. ANS: D PTS: 1 DIF: Medium OBJ: Unit XII | 67-1
TOP: Bipolar disorder SKL: Factual/Definitional
7. ANS: E PTS: 1 DIF: Easy OBJ: Unit XII | 67-1
TOP: Bipolar disorder SKL: Factual/Definitional
8. ANS: D PTS: 1 DIF: Medium OBJ: Unit XII | 67-2
TOP: Understanding mood disorders SKL: Factual/Definitional
9. ANS: B PTS: 1 DIF: Easy OBJ: Unit XII | 67-2
TOP: Understanding mood disorders: the biological perspective
SKL: Factual/Definitional
10. ANS: B PTS: 1 DIF: Medium OBJ: Unit XII | 67-2
TOP: Understanding mood disorders: the biological perspective
SKL: Factual/Definitional
11. ANS: B PTS: 1 DIF: Easy OBJ: Unit XII | 67-2
TOP: Understanding mood disorders: the social-cognitive perspective
SKL: Factual/Definitional
12. ANS: B PTS: 1 DIF: Difficult OBJ: Unit XII | 67-2
TOP: Understanding mood disorders: the social-cognitive perspective
SKL: Conceptual/Application
13. ANS: B PTS: 1 DIF: Difficult OBJ: Unit XII | 67-2
TOP: Understanding mood disorders: the social-cognitive perspective
SKL: Factual/Definitional
14. ANS: D PTS: 1 DIF: Easy OBJ: Unit XII | 67-2
TOP: Understanding mood disorders: the social-cognitive perspective
SKL: Factual/Definitional
15. ANS: A PTS: 1 DIF: Medium OBJ: Unit XII | 67-2
TOP: Understanding mood disorders: the social-cognitive perspective
SKL: Factual/Definitional
16. ANS: D PTS: 1 DIF: Medium OBJ: Unit XII | 67-2
TOP: Understanding mood disorders: the social-cognitive perspective
SKL: Factual/Definitional

17. ANS: D PTS: 1 DIF: Difficult OBJ: Unit XII | 67-2
TOP: Understanding mood disorders: the social-cognitive perspective
SKL: Conceptual
18. ANS: D PTS: 1 DIF: Medium OBJ: Unit XII | 67-3
TOP: Suicide and self-injury (Close-Up) SKL: Factual/Definitional
19. ANS: E PTS: 1 DIF: Medium OBJ: Unit XII | 67-3
TOP: Suicide and self-injury (Close-Up) SKL: Factual/Definitional
20. ANS: E PTS: 1 DIF: Easy OBJ: Unit XII | 67-3
TOP: Suicide and self-injury (Close-Up) SKL: Factual/Definitional