Abnormal Psychology

CREDIT HOURS 3

LEVEL UPPER

PUBLISHED FEBRUARY 2019

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Before You Choose This UExcel Exam

Uses for the Examination

• Excelsior College, the test developer, recommends granting three (3) semester hours of upper-level undergraduate credit to students who receive a letter grade of C or higher on this examination.

• Other colleges and universities also recognize this exam as a basis for granting credit or advanced standing.

• Individual institutions set their own policies for the amount of credit awarded and the minimum acceptable grade.

Exam-takers who have applied to Excelsior College should ask their academic advisor where this exam fits within their degree program.

Exam-takers not enrolled in an Excelsior College degree program should check with the institution from which they wish to receive credit to determine whether credit will be granted and/or to find out the minimum grade required for credit. Those who intend to enroll at Excelsior College should ask an admissions counselor where this exam fits within their intended degree program.

Examination Length and Scoring

The examination consists of approximately 130 questions, most of which are multiple choice; for samples of all the item types on this exam, see the sample items in the back of this guide. Some items are unscored, pretest items. The pretest items are embedded throughout the exam and are indistinguishable from the scored items. You will have three (3) hours to complete the examination. Your score will be reported as a letter grade.

UExcel Exam Resources

Excelsior College Bookstore

The Excelsior College Bookstore offers recommended textbooks and other resources to help you prepare for UExcel exams.

The bookstore is available online at (login required): www.excelsior.edu/bookstore

UExcel Practice Exams

The official UExcel practice exams are highly recommended as part of your study plan. Once you register for your UExcel exam, you are eligible to purchase the corresponding practice exam, which can be taken using any computer with a supported Web browser. Each practice exam includes two forms that you may take within a 180-day period.

Excelsior College Library

Enrolled Excelsior College students can access millions of authoritative resources online through the Excelsior College Library. Created through our partnership with the Sheridan Libraries of The Johns Hopkins University, the library provides access to journal articles, books, websites, databases, reference services, and many other resources. Special library
pages relate to the nursing degree exams and other selected exams. To access it, visit www.excelsior.edu/library (login is required).

Our library provides:

- 24/7 availability
- The world’s most current authoritative resources
- Help and support from staff librarians

**Online Tutoring**

Excelsior College offers online tutoring through SMARTTHINKING™ to connect with tutors who have been trained in a variety of academic subjects. To access SMARTTHINKING, go to www.excelsior.edu/smarthinking. Once there, you may download a copy of the SMARTTHINKING Student Handbook as a PDF.

**Preparing for UExcel Exams**

**Take Charge of Your Own Learning**

At Excelsior College, independent, self-directed study supported by resources we help you find is not a new concept. We have always stressed to exam takers that they are acting as their own teacher, and that they should spend as much time studying for an exam as they would spend in a classroom and on homework for a corresponding college course in the same subject area.

Begin by studying the content outline contained in this content guide, at its most detailed level. You will see exactly which topics are covered, and where chapters on those topics can be found in the Recommended Resources. You will see exactly where you might need to augment your knowledge or change your approach.

The content outline, along with the Learning Outcomes for this exam and recommended textbooks, will serve as your primary resources.

**How Long Will It Take Me to Study?**

A UExcel exam enables you to show that you’ve learned material comparable to one or more 15-week, college-level courses. As an independent learner, you should study and review as much as you would for a college course. For a three-credit course in a subject they don’t know, most students would be expected to study nine hours per week for 15 weeks, for a total of 135 hours.

**Study Tips**

Become an active user of the resource materials. Aim for understanding rather than memorization. The more active you are when you study, the more likely you will be to retain, understand, and apply the information.

The following techniques are generally considered to be active learning:

- **preview or survey** each chapter
- **highlight or underline text** you believe is important
- **write questions or comments** in the margins
- **practice re-stating content** in your own words
- **relate what you are reading** to the chapter title, section headings, and other organizing elements of the textbook
- **find ways to engage** your eyes, your ears, and your muscles, as well as your brain, in your studies
- **study with a partner or a small group** (if you are an enrolled student, search for partners on MyExcelsior Community)
- **prepare your review notes** as flashcards or create recordings that you can use while commuting or exercising

When you feel confident that you understand a content area, review what you have learned. Take a second look at the material to evaluate your understanding. If you have a study partner, the two of you can review by explaining the content to each other or writing test questions for each other to answer. Review questions from textbook chapters may be helpful for partner or individual study, as well.

**Using UExcel Practice Exams**

We recommend taking the first form of the practice exam when you begin studying, to see how much you already know. After taking the first practice exam, check your performance on each question and find out why your answer was right or wrong. This feedback will help you improve your knowledge of the subject and identify areas of weakness that you should address before taking the exam. Take the second form of the
practice exam after you have finished studying. Analyze your results to identify the areas that you still need to review.

Although there is no guarantee, our research suggests that students who do well on the practice exams are more likely to pass the actual exam than those who do not do well (or do not take advantage of this opportunity).

About Test Preparation Services

Preparation for UExcel® exams and Excelsior College® Examinations, though based on independent study, is supported by Excelsior College with a comprehensive set of exam learning resources and services designed to help you succeed. These learning resources are prepared by Excelsior College so you can be assured that they are current and cover the content you are expected to master for the exams. These resources, and your desire to learn, are usually all that you will need to succeed.

There are test-preparation companies that will offer to help you study for our examinations. Some may imply a relationship with Excelsior College and/or make claims that their products and services are all that you need to prepare for our examinations.

Excelsior College is not affiliated with any test preparation firm and does not endorse the products or services of these companies. No test preparation vendor is authorized to provide admissions counseling or academic advising services, or to collect any payments, on behalf of Excelsior College. Excelsior College does not send authorized representatives to a student’s home nor does it review the materials provided by test preparation companies for content or compatibility with Excelsior College examinations.

To help you become a well-informed consumer, we suggest that before you make any purchase decision regarding study materials provided by organizations other than Excelsior College, you consider the points outlined on our website at www.excelsior.edu/testprep.

Preparing for This Exam

Prior Knowledge

A knowledge of concepts usually learned in an introductory psychology course is assumed.

Using the Content Outline

Each content area in the outline includes (1) the recommended minimum hours of study to devote to that content area and (2) the most important sections of the recommended resources for that area. These annotations are not intended to be comprehensive. You may need to refer to other chapters in the recommended textbooks. Chapter numbers and titles may differ in other editions.

This content outline contains examples of the types of information you should study. Although these examples are numerous, do not assume that everything on the exam will come from these examples. Conversely, do not expect that every detail you study will appear on the exam. Any exam is only a broad sample of all the questions that could be asked about the subject matter.

Using the Sample Questions and Rationales

Each content guide provides sample questions to illustrate those typically found on the exam. These questions are intended to give you an idea of the level of knowledge expected and the way questions are typically phrased. The sample questions do not sample the entire content of the exam and are not intended to serve as an entire practice test.
Recommended Resources for the UExcel Exam in Abnormal Psychology

The examination development committee recommends these textbooks as the primary resources for the exam. They cover the majority of the topics in the exam. Excelsior College recommends you use these resources as the most appropriate information in ordering textbooks from the college's bookstore (see page 1 of this content guide). You should allow sufficient time to obtain resources and to study before taking the exam.

A word about textbook editions: Textbook editions listed in the UExcel content guides may not be the same as those listed in the bookstore. Textbook editions may not exactly match up in terms of table of contents and organization, depending upon the edition. However, our team of exam developers checks exam content against every new textbook edition to verify that all subject areas tested in the exam are still adequately available in the study materials. If needed, exam developers will list supplemental resources to ensure that all topics in the exam are still sufficiently covered.

Supplemental Resources

Open educational resources (OER) can be found online to further enhance your study for this exam. OER includes online websites, additional textbooks, and interactive and non-interactive courses to help you better learn the content. Any additional resources that you find independently, online, should be used to augment study—not as replacements for the Recommended Resources. See the section in this guide on OER.

Public libraries may also have some of the textbooks or may be able to obtain them for you through an interlibrary loan program, to reduce textbook costs.

Textbook


This textbook was used by the examination development committee to verify all questions on the exam. These study materials may be purchased from the Excelsior College Bookstore. www.excelsior.edu/bookstore

Optional Textbook

This textbook was identified by examination development committee as a resource to help you gain a deeper understanding of the subject.


NOTE: The following topics may appear in some way, shape, or form on the exam, but are not covered in the recommended resources. You can go online to find out about them. Please see the section in this guide on OER.

Dorothea Dix—mental-health hospitals
Emile Durkheim—three different kinds of suicide: egoistic, altruistic, anomic
  • Collective Consciousness
  • Division of Labor
  • Biography
Nolen-Hoeksema, et al.—helplessness and depression in children
Philippe Pinel—humanitarian treatment for people suffering from mental illness
Carl Rogers approach to therapy - goals
Huntington's chorea as cause of dementia
Schizophrenia
  • Disorganized
  • Disorganized and Catatonic
  • Catatonic symptoms
  • Extrapyramidal symptoms of long-term use of antipsychotic medications in the treatment of schizophrenia—lip smacking
  • Dopamine and schizophrenia
  • Tardive dyskinesias (TDs)
  • Derailment
  • Residual Schizophrenia
  • Incidence of schizophrenia (hereditary)
  • Twin studies
  • Occurrence in general population
Reducing Textbook Costs
Many students know it is less expensive to buy a used textbook, and buying a previous edition is also an option. The Excelsior College bookstore includes a buyback feature and a used book marketplace, as well as the ability to rent digital versions of textbooks for as long as students need them. Students are encouraged to explore these and the many other opportunities available online to help defray textbook costs.

A Word About Open Educational Resources
Open educational resources (OER) are educational materials available for study at no cost on the Web. Some OER are available for anyone to access any time. Others, such as Massive Open Online Courses (MOOCs), require sign-up and are only available during certain windows. Please note that some MOOC providers offer certificates of completion or other products or services for a fee. No MOOC or other OER is a complete substitute for the content guide and officially Recommended Resources listed here in this content guide. However, by definition, MOOCs are essentially free of charge and include access to a main body of learning materials that may help you in your learning.

Being an independent learner preparing for credit by exam, you may not need any of the fee-based options that are offered elsewhere online. But if you are looking for a coherent academic course for self-study, lectures on specific topics, or audio or visual materials that fit your learning style better than print materials alone, a MOOC or other type of OER may be your answer. Keep in mind that none of these OER were designed by Excelsior, nor are they guaranteed to match the exam content outlines completely. They are simply another tool available in your study kit.

We highly encourage using the Recommended Resources. In the content outline, you will see that the topics in the exam are referenced to specific portions of recommended textbooks. Using OER alone will not ensure you’ve completely covered the content in the exam, or it may not cover some topics in sufficient-enough depth without the use of the formal, recommended textbooks.

If the OER course you choose does not include a textbook for reference and you do not have significant practical theory-based experience in the field of study, use a college textbook to ensure adequate preparation for the exam, and use the exam’s content outline as a guide.

Combined with comparable college textbooks, OER provides you with a variety of choices in knowledge sources and learning experiences, to enhance your understanding of the subject matter.

Choosing Open Educational Resources
Most sites for university-based OER can be searched through www.ocwconsortium.org and/or www.oercommons.org.

Sites that specialize in Web courses designed by college professors under contract with the website sponsor, rather than in Web versions of existing college courses, include:

www.education-portal.com
www.opencourselibrary.org (abbreviated as OCL)

We have included specific courses that cover material for one or more UExcel® exams from the sites in the listings above. It’s worth checking these sites frequently to see if new courses have been added that may be more appropriate or may cover an exam topic not currently listed.

In addition, sites like Khan Academy (www.khanacademy.com) and iTunes U feature relatively brief lessons on very specific topics rather than full courses. Full courses are also available on iTunes U (http://www.apple.com/education/ipad/itunes-u/).

We have chosen a few courses and collections for this listing.

Other Online Resources
This section of the OER Guide is provided to allow learners to independently search for resources. Send an e-mail to OER@excelsior.edu if you have questions about a resource’s credibility.

Open Online Textbooks
Boundless open textbooks
https://www.boundless.com/open-textbooks/

BookBoon
http://bookboon.com/en/textbooks-ebooks

Flatworld Knowledge
http://catalog.flatworldknowledge.com/#our-catalog
College Readiness
Khan Academy
http://www.khanacademy.org/

Hippocampus
http://www.hippocampus.org/

Open Course Library
http://opencourselibrary.org/collg-110-college-success-course/

Study Aids
Education Portal
http://education-portal.com/

Khan Academy
http://www.khanacademy.org/

Annenberg Learner
http://www.learner.org/

OpenCourseWare
http://ocwconsortium.org/en/courses/search

OER Commons
http://www.oercommons.org/

Open Course Library
http://www.opencourselibrary.org/
General Description of the Examination

The UExcel Abnormal Psychology examination is based on material typically taught in a one-semester, three-credit, upper-level course in abnormal psychology.

The examination measures knowledge and understanding of the historical background of abnormal psychology; major conceptualizations in the field; and the nature and descriptions of psychological disorders, as well as their definitions, classification, etiology, and major treatments.

Those beginning to study for this exam should be familiar with the concepts usually learned in an introductory psychology course.

Learning Outcomes

After you have successfully worked your way through the recommended study materials, you should be able to demonstrate the following learning outcomes:

1. Describe the basic concepts of abnormal psychology and its historical development.
2. Describe the paradigms in science, psychopathology, and intervention.
3. Recognize DSM-IV-TR diagnoses and explain how the validity and reliability of the diagnoses are established.
4. Identify and classify each disorder, describe the different theories and research into its causes, and review the available treatments.
5. Recognize the problems encountered by health professionals.
6. Describe the complex interaction between scientific findings and theories.
7. Explain the role of ethics and the law in abnormal psychology.
Content Outline

The content outline describes the various areas of the test, similar to the way a syllabus outlines a course. To fully prepare requires self-direction and discipline. Study involves careful reading, reflection, and systematic review.

The major content areas on the Abnormal Psychology examination, the percent of the examination, and the hours to devote to each content area are listed below.

<table>
<thead>
<tr>
<th>Content Area</th>
<th>Percent of the Examination</th>
<th>Hours of Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Introduction and Basic Issues</td>
<td>25%</td>
<td>34</td>
</tr>
<tr>
<td>II. Disorders</td>
<td>60%</td>
<td>81</td>
</tr>
<tr>
<td>III. Treatment, Prevention, and Legal Issues</td>
<td>15%</td>
<td>20</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>100%</strong></td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Occasionally, examples will be listed for a content topic to help clarify that topic. However, the content of the examination is not limited to the specific examples given.

I. Introduction and Basic Issues

25 PERCENT OF EXAM | 34 HOURS OF STUDY

Kring, et al. (13th ed., 2016)

Ch. 1, Introduction and Historical Overview
Ch. 2, Current Paradigms in Psychopathology
Ch. 3, Diagnosis and Assessment
Ch. 4, Research Methods in Psychopathology

A. Historical development

1. History of psychopathology from early demonology through humanitarian reforms
2. The mental health professions

B. Definitions and changing historical conceptions of “abnormal” behavior

C. Research approaches in abnormal psychology (for example: methods, strengths and weaknesses, applications, interpretations, and ethical issues)

D. Theories, paradigms, and perspectives

1. Biological
2. Psychodynamic
3. Behavioral/learning
4. Cognitive
5. Humanistic
6. Sociocultural
7. Diathesis-stress

E. Classifications and diagnoses

   Multiaxial diagnosis
2. Issues in classification
   (for example: reliability, validity, problems of labeling)
F. Assessment
   1. Interviewing
   2. Psychological testing
   3. Behavioral and cognitive assessments
   4. Biological, medical, psychophysiological, and neuropsychological assessments
   5. Issues in assessment (for example: reliability, validity, bias)

II. Disorders

NOTE: You should be familiar with descriptions, current and historical views of major causal factors, and treatments for the disorders listed in this section. Main chapter references in the Kring textbook are indicated for each category.

   A. Anxiety disorders (Ch. 6 and 7)
      1. Panic disorder and agoraphobia
      2. Specific and social anxiety disorder
      3. Obsessive-compulsive related and trauma related disorders
      4. Generalized anxiety disorder

   B. Mood disorders (Ch. 5)
      1. Depressive disorders
      2. Bipolar disorders
      3. Suicide

   C. Somatic symptom related disorders (for example: complex somatic symptom disorder, illness anxiety disorder, functional neurological disorder, malingering, factitious disorder) (Ch. 8)

   D. Dissociative disorders (for example: dissociative amnesia, fugue, dissociative identity disorder, depersonalization/derealization disorder) (Ch. 8)

   E. Psychological factors affecting physical conditions (for example: essential hypertension, asthma)

   F. Eating disorders (for example: anorexia nervosa, bulimia nervosa, binge eating disorder) (Ch. 11)

   G. Sexual disorders (Ch. 12)
      1. Sexual dysfunctions
      2. Paraphilias (for example: exhibitionism, fetishism, transvestic fetishism, pedophilia, voyeurism, frotteurism, sexual sadism, sexual masochism)

   H. Substance use disorders (Ch. 10)
      1. Alcohol use disorder
      2. Tobacco use disorder
      3. Dependence on and abuse of other substances (for example: marijuana, opiates, stimulants, hallucinogens, ecstasy, PCP)

   I. Schizophrenia spectrum and other psychotic disorders (Ch. 9)
      1. Schizophrenia (including etiological models, symptomology, genetic and environmental influences, and social functioning)
      2. Other (for example: schizoaffective disorder, brief psychotic disorder, delusional disorder)

   J. Life-span developmental disorders (Ch. 13 and 14)
      1. Disorders that are usually first evident in childhood and adolescence (for example: autism spectrum disorder, attention-deficit hyperactivity disorder, conduct disorder)
      2. Specific learning disorder
      3. Problems associated with aging (for example: delirium, dementia)

   K. Personality disorders (Ch. 15)
      1. Cluster A: eccentric types (schizotypal, paranoid, schizoid)
      2. Cluster B: erratic types (antisocial, histrionic, borderline, narcissistic)
      3. Cluster C: fearful types (avoidant, dependent, obsessive-compulsive)
      4. Issues in diagnosis (for example: gender or class bias in classification)
III. Treatment, Prevention, and Legal Issues

Kring, et al.

Treatment sections of individual chapters

Ch. 16, Legal and Ethical Issues

A. Approaches to treatment (for example: psychoanalytic; cognitive/behavioral; social learning; humanistic/existential; group, marital, and family therapy; biological)

B. Issues of treatment (for example: efficacy, effectiveness, empirical validation, cultural and ethnic factors)

C. Specific community approaches
   1. Prevention and crisis intervention
   2. Deinstitutionalization and community mental health

D. Legal and ethical issues
   1. The law and abnormal behavior (for example: commitment, the insanity defense)
   2. Ethical issues (for example: the right to treatment, informed consent, confidentiality)
Sample Questions

The sample questions give you an idea of the level of knowledge expected in the exam and how questions are typically phrased. They are not representative of the entire content of the exam and are not intended to serve as a practice test.

Rationales for the questions can be found on pages 14–17 of this guide. In that section, the correct answer is identified and each answer is explained. The number in parentheses at the beginning of each rationale refers to the corresponding section of the content outline. For any questions you answer incorrectly, return to that section of the content outline for further study.

1. Which research method in abnormal psychology is best suited for identifying cause and effect relationships?
   1) epidemiological
   2) correlational
   3) experimental
   4) observational

2. Which concept is central to understanding the relationship between the psychodynamic therapist and the patient?
   1) anxiety threshold
   2) transference
   3) empathy
   4) response hierarchy

3. According to Sigmund Freud’s psychoanalytic paradigm, what is the source of most of the important determinants of human behavior?
   1) conscious
   2) preconscious
   3) superego
   4) unconscious

4. Which course of action by a therapist illustrates a cognitive-behavioral approach?
   1) encouraging the client to explore early-life experiences
   2) helping the client to change mistaken assumptions and increase self-efficacy
   3) providing the client with insight about unconscious motives
   4) using hypnosis to help the client forget painful life experiences

5. What is the essential feature of borderline personality disorder?
   A pervasive pattern of
   1) instability in a variety of areas
   2) inflexibility and perfectionism
   3) constant attention seeking
   4) callousness in interpersonal relationships
6. A person is diagnosed as having an avoidant personality disorder, a major depression, and hypertension. How would these diagnoses be recorded using the multiaxial system of DSM?

<table>
<thead>
<tr>
<th>Axis I</th>
<th>Axis II</th>
<th>Axis III</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) avoidant personality</td>
<td>major depression</td>
<td>hypertension</td>
</tr>
<tr>
<td>2) major depression</td>
<td>avoidant personality</td>
<td>no diagnosis</td>
</tr>
<tr>
<td>3) major depression</td>
<td>avoidant personality</td>
<td>hypertension</td>
</tr>
<tr>
<td>4) hypertension</td>
<td>major depression</td>
<td>avoidant personality</td>
</tr>
</tbody>
</table>

7. How were items for the clinical scales of the Minnesota Multiphasic Personality Inventory (MMPI) ultimately selected?

Item selection was based on
1) the judgments made by clinicians familiar with the symptoms included in the diagnostic categories.
2) how well items differentiated between groups of individuals without psychiatric diagnoses and a group with a specific diagnosis.
3) specific theories of personality related to behavioral traits.
4) the diagnostic criteria of the DSM.

8. What is the most common complication of panic disorder?
1) agoraphobia
2) cardiovascular disease
3) bipolar disorder
4) migraine headache

9. A child acquires a phobia after being bitten by a dog. The initial fear most likely developed through which process?
1) classical conditioning
2) operant conditioning
3) cognitive dissonance
4) social learning

10. What is a persistent, irrational thought or impulse that is very difficult to dismiss or control?
1) a compulsion
2) a delusion
3) an illusion
4) an obsession

11. How is dissociative identity disorder best defined?
1) two or more loosely organized, incomplete personalities or personality states
2) two or more distinct, well-developed personalities or personality states
3) two or more personalities, each with well-developed thought processes, but loosely organized emotional processes
4) two or more personalities, each with well-developed emotional processes, but loosely organized thought processes

12. Compared to patients with hypochondriasis, patients with conversion disorders are likely to have which manifestation?
1) heightened awareness of new symptoms
2) preoccupation with bodily processes
3) specific physical symptoms
4) fear of real illness

13. Which statement exemplifies depersonalization?
1) “I sometimes feel like I’m not in control of myself, like I’m just watching myself from the outside.”
2) “I hear voices telling me what to do. I’m afraid I will die if I don’t obey the voices.”
3) “Life is so impersonal and meaningless that I feel like ending it all.”
4) “I secretly think I was born into the body of the wrong sex.”

14. Which stress-related disorder is most common among children?
1) asthma
2) hypertension
3) migraine headaches
4) ulcer
15. What personality pattern is seemingly shared by men who engage in voyeurism or exhibitionism?
   1) fearfulness, social immaturity, and avoidance of direct social contact
   2) deep-seated rage directed at women, with wishes for revenge
   3) latent homosexual strivings
   4) great social confidence and many brief sexual encounters

16. Which is the most effective treatment for bipolar disorder?
   1) implosion
   2) lithium carbonate
   3) psychoanalysis
   4) electroconvulsive therapy (ECT)

17. A person says that “thoughts are leaking out of his neuro-hole.” Which characteristic of schizophrenia is this person displaying?
   The person is
   1) exhibiting overinclusiveness.
   2) expressing a delusion of grandeur.
   3) using a neologism.
   4) experiencing thought broadcasting.

18. Low-birth-weight infants and children who are malnourished are at higher risk for which condition?
   1) separation anxiety disorder
   2) conduct disorder
   3) anorexia nervosa
   4) mental retardation

19. Which symptom would a person who has Alzheimer’s disease be most likely to display?
   1) delirium
   2) delusions
   3) dementia
   4) dysthymia

20. A therapist is treating a client’s depression by helping the client to learn how to initiate and end conversations, make small talk, and maintain eye contact. The therapist’s treatment is most likely based on the belief that depression is caused by which factor?
   The client’s inability to
   1) feel physically attractive
   2) openly express anger
   3) obtain social reinforcers
   4) focus on the problems of others
Rationales

1.(IC)
1) Epidemiological studies are specifically designed to assess the frequency of a disorder with a population. Case studies are often useful for generating hypotheses about cause and effect relationships, but are rarely used for testing these hypotheses systematically.

2) Correlational studies do not permit definitive cause and effect conclusions to be drawn because the researcher does not systematically manipulate the variables.

*3) Experimental studies require a researcher to randomly assign participants to conditions and systematically manipulate independent variables.

4) Observational studies do not permit cause and effect relationships to be determined because the researcher records naturally occurring events in the environment. The researcher does not systematically manipulate variables.

2.(IIIA)
1) Although the concept of anxiety threshold is discussed by many personality theorists, it does not play a key role in the relationship between psychodynamic therapists and patients.

*2) Transference, the tendency of the patient to view the therapist as similar to an important figure in the patient’s life (for example, a parent), is believed by psychoanalysts to be necessary for therapeutic improvement.

3) Empathy is a Rogerian concept that refers to a therapist’s ability to relate to a client’s feelings.

4) A response hierarchy is a component of the systematic desensitization technique used by behavior therapists.

3.(ID2)
1) Freud considered conscious experience to be very limited, involving only a small part of the personality.

2) The preconscious refers to memories and thoughts that can be brought to consciousness, but are not currently at the conscious level.

3) The superego refers to the moral standards of an individual instilled by one’s family and culture in childhood.

*4) Freud argued that the primary motivation for behavior stems from the id urges, which are entirely unconscious.

4.(ID3/4)
1) Cognitive-behavioral therapists tend to focus on current, rather than historical, factors.

*2) Cognitive-behavioral therapists believe that abnormal behaviors result from faulty thoughts and assumptions that a person uses continually.

3) Insight into unconscious motives is emphasized by psychodynamic therapists.

4) Hypnosis is usually used by psychodynamic therapists seeking to understand unconscious motives.

*correct answer
5.(IIIM2)

*1) Instability in mood, self-concept, and interpersonal relationships is one of the central features of borderline personality disorder.

2) Inflexibility and perfectionism are behaviors typically observed in individuals with obsessive-compulsive personality disorder.

3) Although constant attention seeking is sometimes seen in patients with borderline personality disorder, this behavior is more typical of individuals with histrionic personality disorder.

4) Callousness in interpersonal relationships is a primary feature of both narcissistic and antisocial personality disorders.

6.(IE1)

1) Avoidant personality should be diagnosed on Axis II, major depression on Axis I.

2) Hypertension should be noted on Axis III (general medical conditions).

*3) Major clinical disorders are diagnosed on Axis I, personality disorders on Axis II, and general medical conditions on Axis III.

4) Hypertension should be noted on Axis III, major depression on Axis I, and avoidant personality on Axis II.

7.(IF2)

1) Judgments by clinicians are often subjective and frequently there is low agreement among clinicians regarding the diagnosis of symptoms.

*2) The MMPI was designed to be a reflection of empirical research. Only items that were shown to differentiate between psychiatric and control groups were included on the test.

3) The MMPI was intended to be atheoretical regarding the cause and treatment of disorders.

4) The MMPI is not linked to the DSM system.

8.(IIA1)

*1) Agoraphobia, the fear of situations from which escape would be difficult or embarrassing, or in which help would be difficult to obtain in the event of a panic attack, is a common consequence of panic disorder.

2) Cardiovascular disease is not a common complication of panic disorder.

3) Bipolar disorder is not a complication of panic disorder.

4) Migraine headaches are not a complication of panic disorder.

9.(IIA2)

*1) Classical conditioning occurs when an initially neutral stimulus (for example, a dog) is paired with a powerful stimulus (for example, a bite/pain) so that the neutral stimulus acquires the ability to provoke a response (for example, fear).

2) Operant conditioning focuses on how consequences (for example, reinforcement) shape behavior.

3) Cognitive dissonance occurs when a person simultaneously holds two contradictory beliefs or ideas.

4) Social learning refers to the acquisition of responses through the observation of others.

10.(IIA3)

1) Compulsions are ritualistic behaviors that an individual repeatedly and uncontrollably presents.

2) Delusions are false beliefs that distort reality and are commonly experienced by people suffering from schizophrenia.

3) Illusions are perceptual tricks or distortions.

*4) Obsessions are defined as persistent, irrational thoughts or impulses.

*correct answer
11. IID
1) The personalities in multiple personality disorder are not believed to be loosely organized or incomplete.

*2) The personalities in multiple personality disorder are believed to be both distinct and well-developed.

3) The personalities in multiple personality disorder are believed to possess highly organized emotional processes.

4) The personalities in multiple personality disorder are believed to possess highly organized thought processes.

12. IIC
1) Individuals with hypochondria are more likely to be vigilant for the onset of new symptoms than are individuals with conversion disorder.

2) Individuals with conversion disorder appear to be almost indifferent to their symptoms.

*3) The key diagnostic feature of conversion disorder is the presence of physical symptoms that have no apparent physical cause.

4) Clients with hypochondria are more concerned with the potential of illness than are those diagnosed as having conversion disorder.

13. IID
*1) Depersonalization refers to the feeling that one is separate from one's body.

2) Hearing voices is an example of a hallucination.

3) This statement signifies that the client is experiencing suicidal thoughts.

4) This statement is likely to be made by a person diagnosed with either transsexualism or gender identity disorder.

14. IIE
*1) Asthma is the most common childhood stress-related disorder.

2) Hypertension (high blood pressure) is likely to have its onset in adulthood.

3) Migraines are not frequently observed in children.

4) Ulcers are likely to have their onset in adulthood.

*correct answer

15. IIG2
*1) Research with men who have been diagnosed with either voyeurism or exhibitionism often indicates that they are socially withdrawn.

2) Most men who engage in voyeurism or exhibitionism do not report feelings of anger.

3) Most men who are diagnosed with either voyeurism or exhibitionism are heterosexual.

4) Research evidence suggests that most men who engage in voyeurism or exhibitionism are socially withdrawn.

16. IIB
1) Implosion, a variant of imaginal flooding, is not used in the treatment of bipolar disorder.

*2) Lithium carbonate is one of the standard pharmacological treatments for bipolar disorder.

3) Psychoanalysis has not been found to be effective in the treatment of bipolar disorder.

4) Although electroconvulsive therapy (ECT) is sometimes used with patients who have bipolar disorder and are experiencing depression, it is not a standard or first-choice treatment for bipolar disorder.

17. II-I
*1) Overinclusiveness refers to the tendency to erroneously treat different stimuli as though they belong to the same category.

2) Delusions of grandeur refer to irrational and persistent beliefs that one is all-powerful or extremely important to the world. These beliefs are sometimes expressed by some clients who are diagnosed as having schizophrenia or another psychotic disorder.

*3) Neologisms are invented words that some clients with schizophrenic symptoms create and use.

4) Thought broadcasting refers to the delusional belief that others can hear one's private thoughts.
18. (IIK2)

1) Separation anxiety disorder has not been shown to be related to either low birth weight or malnourishment.

2) No relationship has been reported between conduct disorder and low birth weight or malnourishment.

3) Anorexia nervosa is an eating disorder that is most likely to have its onset in adolescent girls who have not experienced either low birth weight or previous malnourishment.

*4) Low birth weight and malnourishment have been shown to be causes of poor brain development which can result in mental retardation.

19. (IIJ)

1) Delirium is characterized by a disturbance in consciousness and awareness accompanied by changes in cognition that cannot be accounted for by memory loss.

2) Although patients with Alzheimer's disease sometimes develop paranoid delusions, these delusions are not a defining feature of Alzheimer's disease.

*3) Dementia is characterized by the presence of multiple and severe cognitive deficits, especially memory loss. Dementia is the primary feature of Alzheimer's disease.

4) Dysthymia, a chronic form of depression, is not a key feature of Alzheimer's disease.

20. (IIIA)

1) Most therapists do not believe that the client’s capacity to feel physically attractive is highly related to the client’s level of social skills.

2) Therapists who believe that the client is unable to openly express anger would typically use the technique of assertiveness training.

*3) These techniques are designed to increase the frequency of social behaviors displayed by the client. They would most likely be used by a therapist who believes the depression is caused by a lack of reinforcement from other people.

4) Therapists who believe that the client’s depression is due to an inability to focus on the problems of others would use techniques designed to increase the client’s empathy.
SECTION FIVE

Taking the Exam

Registering for Your Exam

Register Online

www.excelsior.edu/examregistration

Follow the instructions and pay by Visa, MasterCard, American Express, or Discover Card.

Examination Administration

Pearson Testing Centers serve as the administrator for all Excelsior College computer-delivered exams. The Disability Services office at Excelsior College is responsible for considering requests for reasonable accommodations (exceptions for individual students with documented disabilities). If you are requesting an accommodation due to a disability, download and complete a Request for Accommodation form that can be accessed by visiting the Excelsior College website at www.excelsior.edu/disability-services.

Computer-Delivered Testing

You will take the exam by computer, entering your answers using either the keyboard or the mouse. The system is designed to be as user-friendly as possible, even for those with little or no computer experience. On-screen instructions are similar to those you would see in a paper examination booklet.

Before taking your exam, we strongly encourage you to go on a virtual tour of the testing center. To access this tour, click the What to Expect in a Pearson VUE test center at the following link: home.pearsonvue.com/test-taker/security.aspx

You also will receive a small, erasable whiteboard if you need one. You may not take your own calculator, if the exam calls for it. One will be provided on the testing screen.

On the Day of Your Exam

Tips and Reminders

Remember to:

• dress comfortably: the computer will not mind that you’re wearing your favorite relaxation outfit

• arrive at the test site rested and prepared to concentrate for an extended period

• allow sufficient time to travel, park, and locate the test center

• be prepared for possible variations in temperature at the test center due to weather changes or energy conservation measures

• bring your ID, but otherwise, don’t weigh yourself down with belongings that will have to be kept in a locker during the test.

Academic Honesty

Nondisclosure Statement

• All test takers must agree to the terms of the Excelsior College Academic Honesty Policy before taking an examination. The agreement will be presented on screen at the Pearson VUE Testing Center before the start of your exam.
• Once the test taker agrees to the terms of the Academic Honesty Nondisclosure Statement, the exam will begin.

If you choose not to accept the terms of the agreement:
• your exam will be terminated
• you will be required to leave the testing center
• you will not be eligible for a refund. For more information, review the Student Policy Handbook at [www.excelsior.edu/studentpolicyhandbook](http://www.excelsior.edu/studentpolicyhandbook).

Student behavior is monitored during and after the exam. Electronic measures are used to monitor the security of test items and scan for illegal use of intellectual property. This monitoring includes surveillance of Internet chat rooms, websites, and other public forums.

**Information About UExcel Exams for Colleges and Universities**

A committee of teaching faculty and practicing professionals determines the learning outcomes to be tested on each exam. Excelsior College Center for Educational Measurement staff oversee the technical aspects of test construction in accordance with current professional standards. To promote fairness in testing, we take special care to ensure that the language used in the exams and related materials is consistent, professional, and user friendly. Editorial staff perform systematic quantitative and qualitative reviews to ensure accuracy, clarity, and compliance with conventions of bias-free language usage.

Excelsior College, the test developer, recommends granting three (3) semester hours of upper-level undergraduate credit to students who receive a letter grade of C or higher on the UExcel Exam in Abnormal Psychology. Other colleges and universities also recognize this exam as a basis for granting credit or advanced standing. Individual institutions set their own policies for the amount of credit awarded and the minimum acceptable grade.

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