

Answer Key

Treatment of Mental Disorders

- 1. C**—Cognitive behavioral therapy attempts to combine approaches from behavior therapy and cognitive therapy. CBT is focused on the construction and re-construction of people's cognitions, emotions and behaviors. Generally in CBT, the therapist, through a wide array of modalities, helps clients assess, recognize and deal with problematic and dysfunctional ways of thinking, emoting and behaving.
- 2. D**—Systematic desensitization, also known as graduated exposure therapy is a type of behavior therapy used to help effectively overcome phobias and other anxiety disorders. More specifically, it is a form of counter conditioning, a type of Pavlovian therapy developed by South African psychiatrist, Joseph Wolpe. The process of systematic desensitization occurs in three steps. The first step of systematic desensitization is the identification of an anxiety inducing stimulus hierarchy. The second step is the learning of relaxation or coping techniques. When the individual has been taught these skills, he or she must use them in the third step to react towards and overcome situations in the established hierarchy of fears. The goal of this process is for the individual to learn how to cope with, and overcome the fear in each step of the hierarchy.
- 3. A**—Gestalt therapy is an existential/experiential form of psychotherapy that emphasizes personal responsibility, and that focuses upon the individual's experience in the present moment, the therapist–client relationship, the environmental and social contexts of a person's life, and the self-regulating adjustments people make as a result of their overall situation. The approach Rudy's therapist is taking exemplifies the phenomenological view of the self in Gestalt psychology, in which how one experiences the other is inseparable from how one experiences oneself.
- 4. B**—Aversion therapy and flooding are based on classical conditioning (Pavlovian) principles. Behavioral activation and flooding are based on operant conditioning principles. In aversion therapy the patient is exposed to a stimulus while simultaneously being subjected to some form of discomfort. Flooding is another technique based on classical conditioning principles. In flooding, in order to demonstrate the irrationality of the fear, a psychologist would put a person in a situation where they would face their phobia at its worst. Under controlled conditions and using psychologically-proven relaxation techniques, the subject attempts to replace their fear with relaxation. In contrast, behavioral activation and token economy are based on operant conditioning principles (positive reinforcement). As a treatment for depression, behavioral activation often includes a token economy as part of its system of reinforcement to encourage positively oriented thoughts and behaviors.
- 5. A**—In humanistic therapy, especially the person-centered therapy developed by Carl Rogers, the therapist seeks to provide a nonjudgmental, accepting environment that provides unconditional positive regard in order to incite feelings of acceptance and value within the client.
- 6. D**—Haldol (haloperidol) is a conventional antipsychotic medication used in the treatment of schizophrenia among other conditions. Haldol is a dopamine receptor antagonist. Zoloft and Prozac are selective serotonin reuptake inhibitors often used in the treatment of depression. Xanax, a benzodiazepene, is a positive allosteric modulator of the GABA_A receptor.
- 7. D**—One of the main pillars of the Ellis' rational emotive behavior therapy is that irrational and dysfunctional ways and patterns of thinking, feeling and behaving are contributing to much, though hardly all, human disturbance and emotional and behavioral self-defeatism

and social defeatism. REBT generally teaches that when people turn flexible preferences, desires and wishes into grandiose, absolutistic and fatalistic dictates, this tends to contribute to disturbance and upset. Albert Ellis suggested a set of core, irrational beliefs or philosophies that humans tend to disturb themselves through. Among these is the belief that “I absolutely MUST, under practically all conditions and at all times, perform well (or outstandingly well) and win the approval (or complete love) of significant others. If I fail in these important—and sacred—respects, that is awful and I am a bad, incompetent, unworthy person, who will probably always fail and deserves to suffer.” Holding this belief when faced with adversity tends to contribute to feelings of anxiety, panic, depression, despair, and worthlessness.

8. **B**—Although generally only used when other treatments have failed, meta-analysis has demonstrated a large effect size (high efficacy relative to the mean in terms of the standard deviation) for ECT versus placebo, and versus antidepressant drugs.
9. **C**—The cognitive therapeutic model states that thoughts, feelings and behavior are all connected, and that individuals can move toward overcoming difficulties and meeting their goals by identifying and changing unhelpful or inaccurate thinking, problematic behavior, and distressing emotional responses. Choice ‘A’ exemplifies the behaviorist approach; choice ‘B’ the psychodynamic approach; and choice ‘D’ the humanistic approach.
10. **C**—Lithium is effective in treating acute manic episodes and preventing relapses in bipolar depression. Lithium is also an effective treatment for bipolar depression. Lithium reduces the risk of suicide, self-harm, and death in people with bipolar disorder.
11. **C**—Transference is a phenomenon characterized by unconscious redirection of feelings from one person to another. Freud considered the re-

direction of feelings from the client’s past onto the therapist an essential part of the psychoanalytic process. Freud wrote, “The patient is not satisfied with regarding the analyst in the light of reality as a helper and adviser who, moreover, is remunerated for the trouble he takes and who would himself be content with some such role as that of a guide on a difficult mountain climb. On the contrary, the patient sees in him the return, the reincarnation, of some important figure out of his childhood or past, and consequently transfers on to him feelings and reactions which undoubtedly applied to this prototype. This fact of transference soon proves to be a factor of undreamt-of importance, on the one hand an instrument of irreplaceable value and on the other hand a source of serious dangers. This transference is ambivalent: it comprises positive (affectionate) as well as negative (hostile) attitudes towards the analyst, who as a rule is put in the place of one or other of the patient’s parents, his father or mother.” (*An Outline of Psychoanalysis* - 1940.)

12. **A**—Reciprocal inhibition is the principle that a person can’t experience two conflicting responses simultaneously. The application of reciprocal inhibition in systematic desensitization is a form of classical conditioning. Systematic desensitization was described by its originators as counterconditioning.
13. **D**—Flooding therapy is a technique to help patients overcome specific phobias. The phobia is seen as having been maintained by avoidance, a behavior pattern promoted by negative reinforcement. By repeatedly exposing the patient to anxiety provoking stimulus in the absence of negative consequences, the therapy allows the avoidant behavior to extinguish.
14. **A**—The abstinence violation effect may occur when a person who has made a commitment to abstain from a substance or behavior has an initial lapse whereby the substance or behavior is engaged in at least once. The effect occurs as a feeling of helplessness or guilt, an internal at-

tribution of a global, stable cause for the lapse. As a model of relapse, helping a client become aware of the abstinence violation effect epitomizes the cognitive-behavioral approach to addiction treatment.

15. **D**—The Dodo bird verdict is a controversial topic in psychotherapy, referring to the claim that all psychotherapies, regardless of their specific components, produce equivalent outcomes. In opposition to the Dodo bird verdict, there are a growing number of studies demonstrating that some treatments produce better outcomes for particular disorders when compared to other treatments. The most compelling evidence against the Dodo bird verdict is illustrated by the research done on anxiety disorders. Many studies have found specific treatment modalities to be beneficial when treating anxiety disorders, specifically cognitive behavioral therapy (CBT).
16. **B**—L-Monoamine oxidases (MAO) are a family of enzymes that catalyze the oxidation of monoamines. Serotonin, melatonin, norepinephrine, and epinephrine are mainly broken down by MAO-A. Phenethylamine and benzylamine are mainly broken down by MAO-B. Both forms break down dopamine, tyramine, and tryptamine equally. MAOs also break down the psychedelic drugs whose properties derive from their structural similarity to monoamine neurotransmitters, ie. psilocybin, DMT and mescaline. Monoamine oxidase inhibitors (MAOIs) are chemicals that inhibit the activity of MAO. Of the choices listed, a MAOI is most likely to produce an interaction with mescaline with symptoms similar to mescaline overdose. Benzodiazepines enhance the effect of the neurotransmitter gamma-aminobutyric acid (GABA) at the GABA_A receptor. Barbiturates also enhance GABA_A receptors but through a somewhat different mechanism than benzodiazepines. First generation antipsychotics block dopamine receptors.
17. **D**—Combination treatment involving behav-

ioral therapy and stimulant medication has been demonstrated as the most effective available treatment for ADHD in children. (Make sure you read all of the answer choices.)

18. **D**—Although all four therapies have demonstrated effectiveness, TMS and ECT are not considered first-line treatments but are generally reserved for treatment resistant acute major depression.
19. **D**—Carl Rogers was famous for the counseling technique of reflection, which means summarizing what the client has said and verbalizing this to the client. As a communication strategy it involves two key steps: seeking to understand a speaker's idea, then offering the idea back to the speaker, to confirm the idea has been understood correctly. It attempts to "reconstruct what the client is thinking and feeling and to relay this understanding back to the client". Reflective listening is a more specific strategy than the more general methods of active listening. Empathy is at the center of Rogers' approach.
20. **B**—The two-chair (or empty chair) technique is a famous method of Gestalt therapy.
21. **D**—Spontaneous remission refers to recovery in the absence of intervention or treatment. 'Placebo effect' is not correct because delivery of a placebo would qualify as an intervention. 'Self-serving bias' and 'regression to the mean' make reference to an appearance of recovery which may or may not be true, so those choices don't address concerns of the question.
22. **A**—Structural family therapy addresses problems in functioning within a family. Structural Family Therapists strive to enter, or "join", the family system in therapy in order to understand the invisible rules which govern its functioning, map the relationships between family members or between subsets of the family, and ultimately disrupt dysfunctional relationships within the family, causing it to stabilize into healthier patterns.

- 23. B**—Antipsychotics are also known as neuroleptics. The primary mode of action of antipsychotic medications, such as thiorazine or haldol, is through the blocking of dopamine receptors. Blocking dopamine receptors in the mesolimbic and mesocortical pathways reduces schizophrenia symptoms. However, the effect of the medication on the nigrostriatal dopaminergic pathway is responsible for many of the side-effects of these medications that involve motor control processes. The question particularly refers to the hypothesized underlying mechanism of tardive dyskinesia. Tardive dyskinesia is a side-effect of antipsychotic medications characterized by repetitive, involuntary movements.
- 24. A**—Exposure and response prevention is a form of exposure therapy in which individuals confront their fears and discontinue their escape response.
- 25. C**—Cognitive therapy for panic disorder is based on the idea that panic attacks are frequently the result of misinterpreting normal bodily sensations as a sign of an impending physical or mental catastrophe. The misinterpretation generates a feedback effect in which anxiety, physical symptoms, and negative thoughts reinforce each other.
- 26. C**—Exposure-based methods of behavioural therapy are well suited to the treatment of phobias. Systematic desensitization and flooding are two techniques with a proven track record.
- 27. A**—Aaron Beck proposed that those with depression develop cognitive distortions, a type of cognitive bias sometimes also referred to as faulty or unhelpful thinking patterns. Beck referred to some of these biases as “automatic thoughts”, suggesting they are not entirely under conscious control. People with depression will tend to quickly overlook their positive attributes and disqualify their accomplishments as being minor or meaningless. They may also misinterpret the care, good will, and concern of others as being based on pity or susceptible to being lost easily if those others knew the “real person” and this fuels further feelings of guilt. The main cognitive distortions according to Beck are 1- Arbitrary inference (drawing conclusions from insufficient or no evidence) 2- Selective abstraction (drawing conclusions on the basis on just one of many elements of a situation) 3- Overgeneralisation (making sweeping conclusions based on a single event) 4- Magnification (exaggerating the importance of an undesirable event) 5- Minimisation (underplaying the significance of a positive event) 6- Personalisation (attributing negative feelings of others to oneself).
- 28. B**—Memory loss is the most common side-effect of ECT. Cognitive impairment is also sometimes noticed.
- 29. A**—In Bandura’s theory behavior is influenced by stimulus events, reinforcement, and by cognitive mediation. Learning involves a reciprocal interaction among the environment, cognition and individual behavior. People are capable of self-directed behavior change with the concept of self-efficacy embodying the individual’s belief that he can bring about desired change.
- 30. C**—A number of medications are used to treat bipolar disorder. The medication with the best evidence is lithium, which is effective in treating acute manic episodes and preventing relapses. Lithium is also an effective treatment for bipolar depression. Lithium reduces the risk of suicide, self-harm, and death in people with bipolar disorder. Several anticonvulsants are used in the treatment of bipolar disorder.
- 31. B**—There are a couple of reasons this question was included. Firstly, as a future doctor you should know this. IPT and CBT are the only psychosocial interventions that psychiatry residents in the United States are mandated to receive training in for professional practice. For this reason, interpersonal therapy will be elevated in the eyes of AAMC among oth-

er psychotherapies that have been developed. Interpersonal psychotherapy is a brief, attachment-focused psychotherapy that centers on resolving interpersonal problems and symptomatic recovery. It is an empirically supported treatment that follows a highly structured and time-limited approach and is intended to be completed within 12–16 weeks. IPT is based on the principle that relationships and life events impact mood and that the reverse is also true. The content of IPT's therapy was inspired by Attachment Theory and Harry Stack Sullivan's Interpersonal Psychoanalysis. Unlike psychodynamic approaches, IPT does not include a personality theory or attempt to conceptualize or treat personality but focuses on humanistic applications of interpersonal sensitivity. The aim of IPT is to help the patient to improve interpersonal and intrapersonal communication skills within relationships and to develop social support network with realistic expectations to deal with the crises precipitated in distress' and to weather 'interpersonal storms.'

32. **D**—Choice 'D' is the best of the choices at encapsulating the main idea of the passage. Choice 'A' assumes cognitive biases stem from negative affect which are definitely not assumed in the passage. Regarding choice 'B', the question of whether cognitive biases function as a trait marker would be more on point, but still not as good as 'D' even then. Regarding choice 'C' the focus is way too narrow to be the main idea.
33. **D**—Dialectical behavior therapy (DBT) is a modified form of cognitive behavioral therapy developed in late 1980s by Marsha M. Linehan, a psychology researcher at the University of Washington, to treat people with borderline personality disorder and chronically suicidal individuals. The primary dialectic within DBT is between the seemingly opposite strategies of acceptance and change. DBT combines standard cognitive behavioral techniques for emotion regulation and reality-testing with concepts of distress tolerance, acceptance, and mindful awareness. DBT is the first therapy that has

been experimentally demonstrated to be generally effective in treating BPD. The first randomized clinical trial of DBT showed reduced rates of suicidal gestures, psychiatric hospitalizations, and treatment drop-outs when compared to treatment as usual.

34. **B**—Commonly prescribed pharmaceutical treatments for generalized anxiety disorder include selective serotonin reuptake inhibitors (SSRIs) and benzodiazepenes. SSRIs are the preferred first line of treatment. SSRIs used for this purpose include escitalopram (Lexapro) and paroxetine (Paxil). The shortcomings of benzodiazepenes (cognitive impairment, addiction, etc.) make them optimal only for short-term relief of anxiety.
35. **A**—Functional analysis in behavioral psychology is the application of the laws of operant conditioning to establish the relationships between stimuli and responses. To establish the function of a behavior, one typically examines the "four-term contingency": first by identifying the motivating operations, then identifying the antecedent or trigger of the behavior, identifying the behavior itself as it has been operationalized, and identifying the consequence of the behavior which continues to maintain it.
36. **C**—Celexa and Zoloft are both selective serotonin reuptake inhibitors. Xanax and Ativan are both benzodiazepene GABA_A receptor positive allosteric modulators. Thorazine, a traditional antipsychotic, is a dopamine antagonist.
37. **B**—A theme in the passage is the challenge in treating bipolar disorder comorbidities of avoiding exacerbating other elements within the symptom complex, especially the core mood disturbance. In the particular context of the discussion in the question stem regarding SSRIs and SNRIs the point is made that "anti-depressant activation" has been associated with more rapid mood switching in bipolar depression.

39. **A**—An empirically supported treatment, interpersonal psychotherapy is a brief, attachment-focused psychotherapy that centers on resolving interpersonal problems and symptomatic recovery. Interpersonal therapy has theoretical foundations in the interpersonal psychoanalysis of Harry Stack Sullivan, who along with other neo-Freudians of his time repudiated Freud's drive theory while preserving and expanding many Freudian concepts. Rogers' person-centered psychotherapy and Gestalt therapy are two other prominent modern psychotherapies with neo-Freudian roots.
40. **A**—The statement is most congruent with the cognitive-behavioral approach. Person-centered therapy, psychoanalysis, and Gestalt therapy all place a greater emphasis on the importance of insight learning as the telos of therapy. While insight learning is important in cognitive-behavioral psychology, other forms of learning, including behavioral conditioning and learning through imitation, are important components of therapy.
41. **D**—This is a difficult, sophisticated question that comes down to the difference between constructivism and phenomenology, the two best answers. Positivism reflects the philosophical underpinnings of the empirical approach (so that is not correct.) The difficulty in the question relates to the issue of constructivism versus phenomenology. Constructivism describes how human beings create systems for meaningfully understanding their worlds and experiences. Phenomenology is primarily concerned with the reflection on and study of the structures of consciousness and the phenomena that appear in acts of consciousness. In that formulation, it almost appears that constructivism is the better answer. However, to get closer to the intent of the question, we have to ask which of the two standpoints is more critical of the empiricist-positivist approach to psychological research, ie. more in-line with the 'human science' of the passage? To understand the difference, it can be productive to reflect on the

theoretical underpinnings of Piaget's developmental theories, which are constructivist, versus the underpinnings of Rogers' humanistic, person-centered psychotherapy, which is phenomenological. In Piaget's theories, knowledge is constructed through experience. However, Piaget's approach is positivist, empiricist, and inferential in its research methods. In other words, the psychology researcher employs positivist methods to illuminate the subjectivity of psychological phenomena in constructivism. In phenomenology, though, the subjective experience of the individual is held to be the locus of meaningful knowledge. The phenomenological point of view challenges empirical, nomothetic approaches as misdirected. Rogers' theory was grounded in phenomenological thinking, where the role of the therapist is to listen to the person's unique report of their recent subjective experiences and assist in achieving insight. The phenomenological approach represents the stronger contrast to empiricism, in other words, so represents the better answer.

42. **C**—Strategic family therapy seeks to address specific problems using theoretical and clinical principles that have the potential of rapid effectiveness and successful outcome, especially with difficult, entrenched problems that have failed to improve in previous treatment efforts. The directness and problem focused orientation of strategic family therapy means that it can often be completed in a shorter time frame than structured family therapy.
43. **D**—The phenomenon of countertransference was first defined publicly by Freud in 1910 as being a result of the patient's influence on the therapist's unconscious feelings. Freud saw the countertransference as a purely personal problem for the analyst. The contemporary understanding of countertransference is generally to regard countertransference as a jointly created phenomenon between the therapist and the patient. The patient pressures the therapist through transference into playing a role congruent with the patient's internal world. However,

the specific dimensions of that role are colored by therapist's own personality.

44. **C**—Eclectic therapy is a therapeutic approach that incorporates a variety of therapeutic principles and philosophies. Ryan's therapist is combining a behavioral procedure based on classical conditioning principles (systematic desensitization) with Freudian dream interpretation, a psychodynamic method.
45. **B**—Bandura is the originator of social learning theory (renamed the social cognitive theory) and the theoretical construct of self-efficacy. It's very important to understand the critical role self-efficacy plays in cognitive theory describing mechanisms operating between the self and potential behaviors. (Reinforcement describes the mechanism of behaviors and consequences). Self-efficacy affects every area of human endeavor. By determining the beliefs a person holds regarding his or her power to affect situations, it strongly influences both the power a person actually has to face challenges competently and the choices a person is most likely to make.
46. **A**—Individuation in Jungian psychology can be defined as the achievement of self-actualization through a process of integrating the conscious and the unconscious.
47. **A**—In Carl Rogers' framework empathy means understanding another person's point of view without passing any judgement on the appropriateness of their emotions.
48. **C**—Socratic questioning is a cognitive restructuring technique in cognitive therapy. The purpose here is to help uncover the assumptions and evidence that underpin people's thoughts in respect of problems. Careful use of Socratic questioning enables a therapist to challenge recurring or isolated instances of a person's illogical thinking while maintaining an open position that respects the internal logic to even the most seemingly illogical thoughts.

49. **A**—Self-monitoring is a core technique in cognitive behavioral therapy. Diary work refers to most commonly utilized specific self-monitoring system. The other choices in this question are also techniques used in cognitive behavioral therapy.
50. **B**—The requirement is not a PhD or PsyD but a master's degree with a major study in counseling including at least 60 semester or 90 quarter hours of graduate-level academic credit in counseling.