Child Psychopathology 8th edition Mash Test Bank

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Name:_____ Class:_____ Date:_____

Chapter 01: Introduction to Psychopathology in Children and Adolescents

1. How does a child typically enter the mental health system?
   a. By asking for a referral from a pediatrician
   b. Through the criminal justice system
   c. By the actions, positive or negative, of peers
   d. Through teachers, counselors, or parents

ANSWER: d

2. Many struggles experienced by children and adolescents can be best described as which of the following?
   a. A failure to demonstrate expected developmental progress
   b. The absence of the key survival skills needed to thrive
   c. The result of excessive expectations by parents
   d. Stresses associated with educational demands

ANSWER: a

3. Which of the following are defined as patterns of behavioral, cognitive, emotional, or physical symptoms shown by an individual?
   a. Psychological disorders
   b. Defiance of norms
   c. Disobedience
   d. Distress

ANSWER: a

4. What is a common intention of interventions for children and adolescents?
   a. To restore previous levels of functioning
   b. To serve as a warning for negative behavior
   c. To reform behavior to conform to norms
   d. To eliminate distress and promote further development

ANSWER: d

5. In the 17th and 18th centuries, children's mental health problems were attributed to which of the following?
   a. Possession by the devil or other evil forces
   b. Poor parenting practices
   c. Chemical imbalances
   d. Low self-esteem

ANSWER: a

6. Rico is a child who has experienced maltreatment by a trusted adult in his life. How would this have been viewed if this had occurred in the 17th century?
   a. As illegal and punishable by severe fines
   b. As very uncommon but largely overlooked
   c. As practiced primarily among lower socioeconomic classes
   d. As a parent's right for educating or disciplining a child

ANSWER: d

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7. John Locke (1632–1704) advanced the belief that children were which of the following?
   a. Possessed by the devil
   b. Uncivilized
   c. Emotionally sensitive beings
   d. Young adults

ANSWER: c

8. Why is the work of Jean-Marc Gaspard Itard (1775–1838) notable?
   a. His orientation toward children was one of care and helping, in contrast to the times.
   b. He was the first to document behavioral techniques with children.
   c. He was a strong advocate for sending disturbed children to asylums.
   d. He initiated Massachusetts' Stubborn Child Act.

ANSWER: a

9. How did Jean-Marc Gaspard Itard believe he could tame the "wild boy of Aveyron"?
   a. Exorcism
   b. Environmental stimulation
   c. Allow him to behave as he did in the wild
   d. Peer modeling

ANSWER: b

10. Which method did Jean-Marc Gaspard Itard use to tame the "wild boy of Aveyron"?
   a. Cold showers
   b. Tranquilizers
   c. Timeouts
   d. Massages

ANSWER: d

11. At the end of the 19th century, how were children with intellectual disabilities regarded?
   a. As suffering from "moral insanity"
   b. As imbeciles
   c. As lunatics
   d. As possessed by the devil

ANSWER: b

12. At the end of the 19th century, how were children with typical cognitive abilities but disturbing behavior labeled?
   a. "Morally insane"
   b. Imbeciles
   c. Diseased
   d. Possessed by the devil

ANSWER: a

13. Which of the following was the first disorder unique to children and adolescents?
   a. Masturbatory insanity

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b. Schizoid disorder
c. Moral insanity
d. Manic depression

ANSWER: a

14. During the early part of the 20th century, what did the biological disease model of mental problems lead to?
a. The belief that mental illness had no physical basis
b. Improved treatments
c. More controlled research methods
d. Eugenics and segregation

ANSWER: d

15. Freud was the first to link mental disorders to which of the following?
a. Neurotransmitter imbalances
b. Early childhood experiences
c. Possession by evil spirits
d. Classical conditioning

ANSWER: b

16. What did Freud's theory focus on?
a. Single causes of behavior
b. Multiple causes of behavior
c. Diseases of the mind
d. Neurological causes of behavior

ANSWER: b

17. What are efforts to classify psychiatric disorders into descriptive categories called?
a. Etiologies
b. Differentials
c. Nosologies
d. Prescriptives

ANSWER: c

18. Who is referred to as the "Father of Behaviorism"?
a. Freud
b. Albert
c. Watson
d. Rayner

ANSWER: c

19. The rise of behaviorism in the early 1900s ultimately led to the development of which type of treatment?
a. Psychodynamic
b. Evidence-based
c. Group-based

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d. Humanist

ANSWER: b

20. Imagine that Eliza struggled with symptoms of schizophrenia as a teenager in the 1930s. What would the most likely outcome be for her, based on the time at which she was experiencing these symptoms?

a. She would be institutionalized.
b. She would be treated with behavior therapy.
c. She would be treated with psychoanalysis.
d. She would be overlooked.

ANSWER: a

21. Which of the following is true about the work of Rene Spitz?

a. It led to the development of an organic model of mental illness.
b. It is the first documented attempt to help a special needs child.
c. It led to some of the first empirically supported behavioral techniques for eliminating children's fears.
d. It raised serious questions about the harmful impact of institutionalization on children's development.

ANSWER: d

22. During the 1950s and 1960s, which of the following emerged as a systematic approach to the treatment of childhood disorders?

a. Psychoanalysis
b. Family therapy
c. Behavior therapy
d. Institutionalization

ANSWER: c

23. Eduardo has been diagnosed with a disability and is entering the 3rd grade. What does the Individuals with Disabilities Education Act (IDEA; Public Law 104-446) mandate in terms of his education?

a. Segregated education for children with special needs
b. The use of IQ tests for assessing children
c. Standardized programs for children identified as special needs
d. Education in the least restrictive environment possible

ANSWER: d

24. What is the purpose of an Individualized Educational Plan (IEP)?

a. To test the child using standardized tests
b. To diagnose each child's illness against a model
c. To tailor school programs to the child's needs
d. To understand the role of family history in mental health

ANSWER: c

25. The 2007 United Nations Treaty adopted a new convention. Why did they make this change?

a. To provide free and appropriate education to children with special needs
b. To improve disability rights and abolish discrimination

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c. To provide psychotherapy services to children with special needs
d. To improve test measures to diagnose children with special needs

ANSWER: b

26. Psychological disorders are defined as patterns of behavioral, cognitive, emotional, or physical symptoms that are associated with which of the following?
a. Deviance
b. Defiance of norms
c. Disobedience
d. Distress

ANSWER: d

27. In contrast to adults, how are atypical symptoms in children often defined?
a. In terms of their stage of development
b. In terms of everyday stress
c. As signs of a disability
d. In terms of addiction

ANSWER: a

28. Which of the following descriptions of a child would be considered labeling a child rather than describing their behavior?
a. Alex is a child with an intellectual disability.
b. Caleigh is an anxious child.
c. Rodrick is a child with autism spectrum disorder.
d. Eduardo is a child who is small.

ANSWER: b

29. What is known about the boundaries between atypical and typical functioning?
a. They are scientifically defined.
b. They are relatively arbitrary.
c. They are well-established.
d. They are determined by each family.

ANSWER: b

30. Which of the following concepts states that various outcomes may stem from similar beginnings, such as experiencing child maltreatment?
a. Trifinality
b. Ethnic finality
c. Equifinality
d. Multifinality

ANSWER: d

31. Successful adaptation to the environment varies across which of the following?
a. Psychological theories

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b. Developmental stages
c. Region of the country
d. Cultures and ethnicities

ANSWER: d

32. What is the ability to adapt successfully to the environment called?
a. Intelligence
b. Adjustment
c. Resilience
d. Coping

ANSWER: c

33. Knowledge of what can be useful when trying to determine a child's competencies?
a. Institutional norms
b. Animal behavior
c. Adult dysfunctions
d. Developmental tasks

ANSWER: d

34. Lucia is 8 years old. Which of the following is a developmental task that Lucia would likely be working on?
a. Language development
b. Getting along with peers
c. Differentiating self from environment
d. Learning right from wrong

ANSWER: b

35. Analis is 14 years old. Which of the following is Analis likely working on, based on her age?
a. Choosing a future career
b. Conservation of measurement
c. Forming a cohesive sense of self-identity
d. Goal-directed thinking

ANSWER: c

36. Which of the following is a developmental task of infancy?
a. Conservation of measurement
b. Language development
c. Reflex behaviors
d. Forming close friendships within and across gender

ANSWER: b

37. Which of the following is an effect that occurs because of stigma?
a. Anger
b. Anxiety
c. Avoidance

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d. Motivation

ANSWER: c

38. What does multifinality refer to?
a. The observation that different disorders may stem from similar causes.
b. The observation that various outcomes may stem from similar beginnings.
c. The fact that each disorder has a single outcome.
d. The observation that developmental pathways may converge at the end.

ANSWER: b

39. Mikael has been diagnosed with conduct disorder. This disorder may arise from different developmental pathways, a concept known as which of the following?
a. Equifinality
b. Multifinality
c. Developmental diversity
d. Disordered beginnings

ANSWER: a

40. Which of the following is an example of resiliency?
a. Submissiveness
b. Coping skills
c. Networking skills
d. Physical aptitude

ANSWER: b

41. A risk factor is a variable that ____.
a. follows a negative outcome
b. increases the likelihood that a negative outcome will occur
c. indicates positive outcomes
d. decreases the likelihood that negative outcome will occur

ANSWER: b

42. Which of the following is true with respect to resilience?
a. Resilience is relevant to a few traumatic life events.
b. Resilience cannot be learned or taught.
c. Resilience remains consistent over time.
d. Resilience may vary over time and across situations.

ANSWER: d

43. Celia has learned to spend her free time at the local library, enabling her to form a strong relationship with the librarian despite her tumultuous family situation. What is Celia displaying in this situation?
a. Determination
b. Intelligence
c. Conservation

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d. Resilience

ANSWER: d

44. Which risk factor is most likely to increase a child's vulnerability to psychopathology?
    a. Chronic poverty
    b. Impulsivity
    c. Two-career families
    d. Lack of siblings

ANSWER: a

45. "Forming a cohesive sense of self-identity" is a task done by children in which age group?
    a. Infancy to preschool
    b. Middle childhood
    c. Adolescence
    d. Early adulthood

ANSWER: c

46. Which disorder is more commonly diagnosed in girls?
    a. Illiteracy
    b. Autism
    c. Depression
    d. ADHD

ANSWER: c

47. How many children experience poverty daily in the United States?
    a. One in four
    b. One in five
    c. One in seven
    d. One in eight

ANSWER: b

48. Which statement about children's mental health is correct?
    a. About 1 in 12 children experiences a mental health problem that impairs their functioning.
    b. Approximately 75% of children with mental health problems receive proper services.
    c. Socioeconomic status plays more of a role than race in disorder rates among children.
    d. About 1 in 10 children meets the criteria for a specific psychological disorder.

ANSWER: d

49. Which of the following is true for a significant number of children today?
    a. They will have the same development trajectory to adulthood.
    b. They will not grow out of their childhood difficulties by adulthood.
    c. They face greater stressors at earlier ages than children of the past.
    d. They have the same types of problems as children of the past.

ANSWER: b

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50. Which children are disproportionately afflicted with mental health issues?
    a. Those who are recent immigrants
    b. Those who are only children
    c. Those with more than two siblings
    d. Those born to parents experiencing mental health issues

ANSWER: d

51. The significant difficulties that children in chronic poverty experience may be due to which of the following?
    a. Damage to the cerebellum
    b. An underactive amygdala
    c. Certain genetic markers
    d. Impaired prefrontal cortex development

ANSWER: d

52. Which statement is true regarding LGBTQIA+ youth?
    a. They are more likely to seek help from adults.
    b. They often experience verbal and physical abuse.
    c. They have fewer academic problems.
    d. They are more likely to be bullies.

ANSWER: b

53. Which statement reflects the differences in mental health problems often seen between boys and girls?
    a. Anxiety disorders are more common in boys than girls.
    b. Sex differences in problem behaviors exhibit by early infancy.
    c. Boys demonstrate more difficulties than girls starting in early adolescence.
    d. Boys' externalizing problems are more prevalent than girls' in the preschool years.

ANSWER: d

54. Which statement is true about children with mental health problems from ethnic and racial minority groups?
    a. Minority children in the United States are overrepresented in rates of some disorders.
    b. No differences emerge in relation to race and mental health, even when controlling for other factors.
    c. Minority children and youth do not face any more disadvantages in life than other children.
    d. Ethnic representation in research studies has received a great deal of attention in studies of child psychopathology.

ANSWER: a

55. Which of the following issues makes adolescence a particularly vulnerable period?
    a. Risky sexual behavior
    b. Participation in sports
    c. Chores at home
    d. Technology use

ANSWER: a

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56. What might be one consequence associated with child psychopathology?
    a. Increased demands on community resources, such as health systems
    b. Less funding for educational institutions
    c. Less interest in interventions
    d. Increased funding for criminal justice systems

ANSWER: a

57. The most dangerous place for a child to try to grow up in America is at the intersection of which of the following?
    a. Race and poverty
    b. Race and ethnicity
    c. Child maltreatment and non-accidental trauma
    d. Poverty and ethnicity

ANSWER: a

58. Which of the following can impair a child's developmental progress significantly?
    a. Struggles with parents
    b. Intervention at school
    c. Greater exposure to violence
    d. Peer relationships

ANSWER: c

59. Until the mid-twentieth century, which mental condition was believed to be caused by inadequate, uncaring parents?
    a. Bipolar disorder
    b. Autism
    c. Depression
    d. Obsessive compulsive disorder (OCD)

ANSWER: b

60. Xavier's family is experiencing poverty. What is one reason this could lead to mental health concerns?
    a. Lack of parental involvement
    b. Lower nutrition
    c. Intervention at school
    d. Involvement from the authorities

ANSWER: b

61. How has the societal view of children changed throughout history and who were some of the major historical figures responsible for these changes?

ANSWER: Early writings suggest that children were considered servants of the state in the city-states of early Greece. Ancient Greek and Roman societies believed that any person—young or old—with a physical or mental handicap, disability, or deformity was an economic burden and a social embarrassment, and thus was to be scorned, abandoned, or put to death. Today we recognize children as valuable, independent of any other purpose. The aim is to help them develop normal lives and competencies. Some of the major influences were Freud, Watson, and Locke.

62. Compare and contrast various childhood risk factors that increase a child's vulnerability for developing a

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psychological disorder.

ANSWER: Children who face many known risk factors, such as community violence and parental divorce, are vulnerable to abnormal development. Acute, stressful situations and chronic adversity put children's successful development at risk. Chronic poverty, serious care-giving deficits, parental mental illness, divorce, homelessness, and racial prejudice are known risk factors that increase children's vulnerability to psychopathology—especially in the absence of compensatory strengths and resources.

63. In regard to legislation pertaining to children with special needs and education, what is IDEA and what does it mandate?

ANSWER: In the United States, the Individuals with Disabilities Education Act (IDEA; Public Law 104-446) mandates free and appropriate public education for any child with special needs in the least restrictive environment for that child. Each child with special needs, regardless of age, must be assessed with culturally appropriate tests and have an individualized education program (IEP) tailored to his or her needs, with periodic reassessments.

64. What is an IEP and what is its purpose?

ANSWER: An IEP is an individualized education program tailored to a child's needs and must be reassessed.

65. What is the goal of the Treaty that the United Nations General Assembly adopted in 2007 regarding persons with disabilities?

ANSWER: In 2007, the United Nations General Assembly adopted a new convention to protect the rights of persons with disabilities around the world. This convention represents an important shift from addressing the "special needs" of children to realizing their rights and removing the physical, linguistic, social, and cultural barriers that remain. Countries that ratify the convention agree to enact laws and other measures to improve disability rights, and also to abolish legislation, customs, and practices that discriminate against persons with disabilities.

66. What should be considered when diagnosing most child and adolescent psychological disorders?

ANSWER: To judge what is abnormal, we need to be sensitive to each child's stage of development and consider each child's unique methods of coping with and compensating for difficulties.

67. In what ways can poverty affect children's development?

ANSWER: Poverty has a significant, yet indirect, effect on children's adjustment, most likely because of its association with negative influences—particularly harsh, inconsistent parenting and elevated exposure to acute and chronic stressors—that define the day-to-day experiences of children in poverty.

68. Define the concept of competence. How may competence be assessed?

ANSWER: Definitions of abnormal child behavior must consider the child's competence—that is, the ability to adapt successfully in the environment. Developmental tasks, which include broad domains of competence such as conduct and academic achievement, tell how children typically progress within each domain as they grow. Knowledge of the developmental tasks provides an important backdrop for considering a child or adolescent's developmental progress and impairments.

69. Distinguish between the concepts of multifinality and equifinality. Provide an example of each concept.

ANSWER: Multifinality is a concept that proposes that various outcomes may stem from similar beginnings (in this case, child maltreatment). Equifinality is a concept that proposes that similar outcomes stem from different early experiences and developmental pathways.

70. Distinguish between risk and resilience.

ANSWER: A risk factor is a variable that precedes a negative outcome of interest and increases the chances that the

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outcome will occur. Children who survive risky environments by using their strong self-confidence, coping skills, and abilities to avoid risk situations may be considered resilient—they seem able to fight off or recover from their misfortune.

71. What are some of the key factors affecting rates and expression of mental disorders?

ANSWER: New pressures and social changes may place children at increasing risk for the development of disorders at younger ages (Obradovic et al., 2010). Many stressors today are quite different from those faced by our parents and grandparents. Some have been around for generations: chronic poverty, inequality, family breakup, single parenting, and so on. Others are more recent or are now more visible: homelessness, adjustment problems of children in immigrant families, inadequate childcare available to working parents, and conditions associated with the impact of prematurity, parental HIV, and substance abuse on children's growth and development.

72. What are some of the findings regarding sex differences in children's mental health problems?

ANSWER: Hyperactivity, autism, childhood disruptive behavior disorders, and learning and communication disorders are more commonly diagnosed in boys than in girls; the opposite is true for most anxiety disorders, adolescent depression, and eating disorders. It is important to note that this could be due to differences in the rate of diagnosis.

73. Discuss the influence of race and ethnicity in the development of psychological disorders.

ANSWER: Children from certain ethnic and racial groups in the United States are overrepresented in rates of some disorders, such as substance abuse, delinquency, and teen suicide (Nguyen et al., 2007). However, once the effects of socioeconomic status (SES), sex, age, and referral status are controlled for (i.e., the unique contributions of these factors are removed or accounted for), few differences in the rate of children's psychological disorders emerge in relation to race or ethnicity.

74. Discuss the difficulties sexual minority youth experience in society and which mental health symptoms they are most at risk for experiencing.

ANSWER: According to several large surveys of LGBTQIA+ youths in middle and high schools, they are more likely to be victimized by their peers as well as by family members, and they report more bullying, teasing, harassment, and physical assault than other students. Given the stigma and prejudice that exist in many parts of society, it is not surprising that young people who are LGBTQIA+ have higher rates of some mental health struggles, including depression and suicidal behavior, substance abuse, and risky sexual behavior, as compared with their heterosexual counterparts.

75. Compare and contrast the factors that are most associated with the standard of "normal" behavior between adults and children. How are the standards of "normal" differently assessed for children as compared to adults, and what are some potential problems with a system that involves an arbitrary standard for determining what is typical and what is not?

ANSWER: The current system involves an arbitrary line that determines typical versus atypical behavior that can lead to problems with labels, stigma, incorrect diagnosis, and ineffective treatments. Adult patterns of atypical behavior include personal distress, impairment of daily function, and increased risk of harm to self or others. Childhood atypical behavior is assessed in terms of developmental pathways, which include reviewing various domains of competency, resiliency, and risk factors that may increase vulnerability. The process for both children and adults involves agreement about particular patterns of behavioral, emotional, and physical symptoms shown by the individual.

76. Do the majority of children with psychological disorders have access to appropriate mental health services? Support your answer with evidence and discuss the long-term implications for this current mental health system.

ANSWER: No; fewer than 10% of children with mental health problems receive appropriate services at the appropriate time. Limited access to appropriate services increases long-term vulnerability and dysfunction.

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