Cognitive Therapy of Personality Disorders

Question from chapter 1

1) Narcissistic and Borderline are examples of which type of Personality Disorder?
   a) cluster A
   b) cluster B
   c) cluster C
   d) cluster D

2) Which cognitive behavioral treatment was developed by Linehan to treat borderline personality disorder?
   a) RET
   b) Interpersonal Cognitive Therapy
   c) Cognitive Unification Therapy
   d) Dialectical behavior therapy

Question from chapter 2

3) "I could be controlled" is a basic belief associated with which personality disorder?
   a) passive-aggressive
   b) dependent
   c) avoidant
   d) paranoid

4) According to Beck (1964, 1967) what introduces a systematic bias into information processing?
   a) negative cognitions
   b) cognitive shifts
   c) idiosyncratic schemas
   d) shoulds

5) Which personality disorder has underdeveloped spontaneity and playfulness?
   a) dependent
   b) passive-aggressive
   c) obsessive-compulsive
   d) paranoid

6) Which personality disorder's self-view is that they are loners, autonomous, and strong?
   a) antisocial
   b) passive-aggressive
   c) narcissistic
   d) schizoid

7) Which personality disorder's keyword is "self-aggrandizement"?
   a) histrionic
   b) narcissistic
   c) passive-aggressive
   d) avoidant
8) Which personality disorder’s view of others is that they see people as intrusive and controlling?
   a) schizoid
   b) borderline
   c) paranoid
   d) avoidant

**Question from chapter 3**

9) How does Pfahl (1999) describe the boundaries between personality disorders?
   a) permeable
   b) fuzzy
   c) rigid
   d) jagged

10) Which self-report questionnaire was designed to assess personality disorders as defined on Axis II of the DSM?
    a) DAPP-BQ
    b) WJC
    c) WISPI
    d) MCMI-III

11) Which is an example of a structured clinical interview?
    a) PDQ-R
    b) SCID-II
    c) SNAP
    d) PBQ

12) The Schema Questionnaire is designed to map directly onto Axis II disorders.
    a) True
    b) False

**Question from chapter 4**

13) The type of questioning described by Beck et al. (1985) which attempts to probe for deeper meanings and access the core schema is which technique?
    a) spelunking
    b) downward arrow
    c) Socratic probing
    d) trolling

14) In confronting schemas, all of the following options are discussed EXCEPT
    a) schematic replacement
    b) schematic restructuring
    c) schematic modification
    d) schematic reinterpretation

15) All the following behavioral techniques are discussed EXCEPT
    a) activity monitoring and scheduling
    b) scheduling mastery and pleasure activities
    c) rebirth
    d) relaxation training
Question from chapter 5

16) With most personality-disordered patients, the therapeutic relationship requires more attention than an acute Axis I disorder.
   a) True
   b) False

17) All of the following are causes of noncollaboration EXCEPT
   a) the therapist overestimates the role of the patient’s culture
   b) the therapist may lack the skills to collaborate
   c) the therapist may lack the skill to develop collaboration
   d) the goals of therapy may be unstated

18) Regarding patient emotions, the therapist should allow negative or positive reactions to him or her to arise and may deliberately provoke and/or ignore them.
   a) True
   b) False

Question from chapter 6

19) Millon (1996) states that a central role in PPD is played by
   a) of lack of trust
   b) thought disorder
   c) a fear of failure
   d) hypervigilance

20) PPD is often accompanied by persistent delusions.
   a) True
   b) False

21) In conceptualizing PPD all of the following are beliefs and assumptions EXCEPT
   a) people are malicious and deceptive
   b) being controlled by others is intolerable
   c) they’ll attack you if they get a chance
   d) you can be OK only if you don’t let down your guard

22) Regarding the Treatment Approach: the primary strategy in the cognitive treatment of PDD is to
   a) improve coping skills
   b) increase the client's sense of self-efficacy
   c) develop more realistic perceptions of others
   d) develop an increased awareness of other's points of view

Question from chapter 7

23) Which is NOT one of the four subtypes of schizoid personality disorder proposed by Millon & Davis (1996)?
   a) phlegmatic
   b) affectless
   c) remote
   d) languid
24) Individuals with schizoid personality disorder often have a set of early experiences with which themes?
   a) insecure attachment & bullying
   b) learning disabilities & peer rejection
   c) peer rejection & bullying
   d) absent parents & insecure attachment

25) Both people with schizoid personality disorder and schizotypal personality disorder can experience psychotic symptoms.
   a) True
   b) False

26) According to Chadwich & Lowe (1990) paranoid beliefs are more likely to be modified by
   a) behavior change within a cognitive framework
   b) guided reality testing
   c) verbal reattribution methods
   d) psychotropic medications

Question from chapter 8

27) Antisocial Personality Disorder is the only personality disorder that cannot be diagnosed in childhood.
   a) True
   b) False

28) A person who engages in arson would be classified as which Type in the clinical taxonomy for ASPD?
   a) Type III
   b) Type V
   c) Type VII
   d) Type IX

29) All of the following are mentioned as self-serving beliefs held by ASPD patients EXCEPT
   a) justification
   b) thinking is believing
   c) minimization
   d) feelings make facts

30) Patients whose problems are framed as WHAT are less apt to feel that they're being manipulated,
    controlled, or accused of bad behavior.
    a) genetically predetermined
    b) culturally relevant
    c) socially inappropriate
    d) a set of choices

Question from chapter 9

31) What percent of the general adult population has it BPD?
    a) .05-.1%
    b) 1.1-2.5%
    c) 3.1-4.5%
    d) 5.1-6.5%
32) What percent of individuals with BPD die because of suicide?
   a) 3%
   b) 5%
   c) 8%
   d) 10%

33) According to Fonagy et al. (1996) patients with BPD are characterized by which representation?
   a) reactive attachment
   b) insecure attachment
   c) disorganized attachment
   d) secure attachment

34) Who's conceptualization views patients with BPD as characterized by a dysfunction in emotion regulation that is probably temperamental?
   a) Beck
   b) Linehan
   c) Young
   d) Ellis

35) In the hierarchy of the issues to be addressed, which number is "self-damaging issues"?
   a) 1
   b) 2
   c) 3
   d) 4

Question from chapter 10

36) Common complications of histrionic personality disorder include all EXCEPT
   a) panic disorder
   b) conversion disorder
   c) somatization disorder
   d) depression

37) According to Nestadt et al. (1990) most individuals with HPD are female.
   a) True
   b) False

38) All of the following are DSM-IV-TR diagnostic criteria for HPD EXCEPT
   a) displays rapidly shifting and shallow expression or emotions
   b) constantly uses physical appearance to draw attention to self
   c) constantly seeks or demands reassurance or praise
   d) considers relationships to be more intimate than they actually are

39) According to J. Beck (1995) which cognitive distortion is especially likely to be experienced by the histrionic patient?
   a) minimization
   b) magnification
   c) magical thinking
   d) dichotomous thinking
40) In maintaining progress with the histrionic patient who is hesitant to give up the emotional trauma, they can be encouraged to
a) vicariously emote
b) join a community theater
c) utilize an emotional sponsor
d) schedule a trauma

Question from chapter 11

41) From an interpersonal perspective, striving to overcome feelings of inferiority arising out of comparisons to others is
a) an early maladaptive schema
b) compensation
c) a narcissistic injury
d) rapprochement

42) The core belief of NPD is one of
a) inferiority or unimportance
b) privilege
c) rejection or unworthiness
d) superiority

43) All of the following are conditional assumptions of individuals with NPD EXCEPT
a) freedom from responsibility
b) power and entitlement
c) relationships are tools
d) image preservation

44) According to Freeman & Dolan (2001) narcissistic patients enter treatment in which stage?
 a) pre-contemplation
 b) anti-contemplation
 c) contemplation
 d) post-contemplation

Question from chapter 12

45) According to Koenigsberg et al. (1985) which Axis I diagnoses are most frequently associated with DPD?
 a) agoraphobia & dysthyemia
 b) generalized anxiety disorder & alcohol dependence
 c) major depression & adjustment disorder
 d) bipolar disorder & somatization disorder

46) The main cognitive distortion in DPD with respect to independence is
 a) fortune telling
 b) minimization
 c) dichotomous thinking
 d) magnification
47) When working with patients who have DPD it is particularly important to use Socratic questioning and
   a) in vivo experience
   b) imagery
   c) thought stopping
   d) guided discovery

48) In maintaining progress, Goldstein et al. (1973) found what to be helpful in increasing independent
   behavior?
   a) modeling
   b) primary rewards
   c) pet therapy
   d) journaling

Question from chapter 13

49) All the following are diagnostic criteria for Avoidant Personality Disorder EXCEPT
   a) is unwilling to get involved with people unless certain of being liked
   b) may develop physical problems as a reason for social avoidance
   c) is preoccupied with being criticized or rejected in social situations
   d) views self as socially inept, unappealing, or inferior to others

50) Avoidance in APD it is fueled by fears of distance from a safe place or a person who could rescue them
   from personal disaster.
   a) True
   b) False

51) Two barriers to collaboration that can be expected with APD patients are their
   a) fear of rejection and distrust of other’s expressions of caring
   b) fear of losing control and fear of rejection
   c) fear of public places and fear of losing control
   d) distrust of other’s expressions of caring and fear of public places

Question from chapter 14

52) The most common presenting problem of persons with OCPD is some form of
   a) depression
   b) relational problem
   c) vocational problem
   d) anxiety

53) Which statement is NOT true about OCPB?
   a) OCPD has true ego dystonic obsessions and compulsions
   b) individuals with OCPD are self-critical
   c) individuals with OCPD are stingy with themselves and others
   d) OCPD has an apparent formality and social detachment

54) According to Juni & Semel (1982) individuals with OCPD seem to prefer therapeutic approaches that are
   more structured and problem focused to approaches that focus primarily on the therapeutic process and
   the transference relationship.
   a) True
   b) False
Question from chapter 15

55) "Cognitively skeptical" is part of which PAPD clinical domain?
   a) behavioral level
   b) intrapsychic level
   c) phenomenological level
   d) biophysical level

56) Characteristics of which personality disorders are quite similar and may overlap with PAPD?
   a) histrionic and borderline
   b) histrionic and narcissistic
   c) borderline and avoidant
   d) narcissistic and borderline

57) The PAPD patient's core beliefs and related automatic thoughts emanate themes of
   a) avoidance and control
   b) resistance and avoidance
   c) rejection and autonomy
   d) control and resistance

58) According to Beck et al. (1990) the therapist manages confrontation through actively challenging dysfunctional beliefs and behaviors as early in the therapeutic process as possible.
   a) True
   b) False

59) Ottaviani (1990) suggests labeling reactions derived from the immediate visceral response as
   a) unconditioned responses
   b) conditioned reasoning
   c) emotion-based reasoning
   d) sensory-based responses

Question from chapter 16

60) All of the following are guidelines for dealing with personality disorder patients EXCEPT
   a) rely primarily on verbal interventions
   b) consider beginning with interventions that do not require extensive self-disclosure
   c) help the patient deal adaptively with aversive emotions
   d) anticipate problems with completion of assignments