CHAPTER 2
THE DEVELOPMENTAL PSYCHOPATHOLOGY PERSPECTIVE

TRUE OR FALSE

1. The term paradigm refers to a shared perspective or cognitive set adopted, for example, by a group of investigators.

2. The adoption of a paradigm typically results in a broadening of the kinds of questions asked, measures taken, and interpretations made.

3. Developmental psychopathology is considered a macroparadigm by Achenbach because it makes certain assumptions, asks certain questions, and adopts certain procedures.

4. All developmental theorists assume that human development is best explained as occurring in fixed stages.

5. In general, developmental paths are probabilistic and not easy to predict.

6. If the effects of poverty operate through lack of health care to lower intellectual functioning, lack of health care mediates the relationship of poverty and intellectual functioning.

7. Assume that lead in drinking water is a necessary cause of a disorder. This does not mean that lead is a sufficient cause.

8. Multifinality is the principle that the same outcome can be associated with different pathways or factors.

9. Risk factors reside in both the environment and the person, but resilience factors reside exclusively in the person.

10. In general, nonnormative events are considered more of a challenge to development than are normative events.

11. Attachment is an example of a developmental task for infants and preschoolers.

12. Resilience is defined by positive outcomes in the face of risk or threat.

13. Researchers do not understand “ordinary magic” and the factors that contribute to resilience.

14. Knowledge about risk and resilience is inconsequential to preventing disorders and/or turning disorder around after problems begin.
15. Justine smiles and crawls to her mother. These behaviors facilitate attachment according to Bowlby.

16. Heterotypic continuity of behavior is demonstrated when the same behavior continues over time in an individual.

17. Today attachment theory is a dominant approach to understanding the influence of early close relationships on later psychological development.

18. Temperament is described as a person’s predisposition to irritability.

19. The quality of attachment infants have with their caretakers depends on the infant’s temperament.

20. Chess and Thomas, using nine categories of temperament, identified three basic styles: easy, slow-to-warm, and difficult.

21. Research indicates that children with high levels of aggressive behavior usually view other youngsters as passive and trusting.

22. Emotion and temperament can be considered the same construct.

23. Another word for vulnerability is diathesis, as in the diathesis stress model.

24. Systems models are transactional models.

25. If treatment X is more effective for girls than boys, then gender could be considered a moderating variable.

26. Although emotional knowledge is important in relationships later in life, it is not linked to social problems in childhood.

27. The area of study that examines how individuals take in, understand, and interpret social situations is called social cognitive processing.

MULTIPLE CHOICE

28. A(n) ________ is a formal integrated set of principles or propositions that explain phenomena.

   a. perspective  
   b. opinion  
   c. cognitive set  
   d. theory

29. As a field of study, developmental psychology has traditionally focused on

   a. normal development.  
   b. abnormal development.  
   c. universal principles of lifetime change.
30. As a macroparadigm, developmental psychopathology
   a. outrules the use of various microparadigms.
   b. views behavioral disorder in relation to normal behavior.
   c. is a more restrictive perspective than the behavioral perspective.
   d. grew from a merger of clinical and social psychology.

31. Human development is best viewed as
   a. always occurring in stages.
   b. changes in individuals due to environmental influences.
   c. change in persons over time due to the interactions of many variables.
   d. quantitative rather than qualitative growth.

32. Which disease supported the medical model of mental illness in the early 1900s?
   a. syphilis
   b. pneumonia
   c. encephalitis
   d. none of the above

33. If a disorder occurs only in the presence of Factor X but only when Factor Y or Factor Z are present, we might suspect that Factor X is a _____ cause of the disorder.
   a. necessary but not sufficient
   b. sufficient but not necessary
   c. necessary and sufficient
   d. neither necessary nor sufficient

34. The Lansford et al. (2005) study found that African American children may respond differently to physical discipline than European American children. Therefore, which of the following is true?
   a. Culture had a mediating effect.
   b. Culture had a moderating effect.
   c. Culture had no effect.
   d. Culture is a sufficient cause.

35. According to Compass, Henderson, and Gerhardt there are five possible developmental trajectories across the adolescent years in terms of outcomes. They are:
   a. All five are adaptive.
   b. All five are maladaptive.
   c. Some are adaptive and some are maladaptive.
   d. None of the above.

36. Peter got along quite well as a child, but in adolescence he ran with a “bad” crowd, took drugs, and suffered academically. At 21 years of age, he appears to have put aside these behaviors and
has successfully returned to college. Peter’s development is following which of the five adolescent developmental pathways described in the text?

a. unstable adaptation  
b. unstable maladaptation  
c. decline of adaptation  
d. temporal maladaptation

37. It has been shown that child abuse can lead to several different kinds of behavioral problems. This demonstrates the principle of

a. equifinality.  
b. multifinality.  
c. cumulative continuity.  
d. excessive continuity.

38. Which term refers to the principle that different factors or developmental paths can result in the same developmental outcome?

a. indirect causation  
b. mediation  
c. distal causation  
d. equifinality

39. According to Cole et al. (1993), which of the following is a constitutional risk factor?

a. poverty  
b. racial injustice  
c. war  
d. prenatal birth complications

40. Risk factors

a. can be biological, psychological, or social.  
b. are best conceptualized as being mostly biological.  
c. are best conceptualized as characteristics of the individual.  
d. are best viewed as independent factors that do not affect each other.

41. Which is false with regard to developmental risk factors?

a. Vulnerability to risk factors is related to a person’s age.  
b. The presence of several risk factors is generally no more harmful than the presence of a single risk factor.  
c. Some association exists between specific risk factors and specific behavioral disorders.  
d. The influences of risk factors may accumulate over time.

42. The difficulty with investigating resilience is that

a. all children possess risk factors.  
b. only at-risk youth are studied.  
c. both a and b  
d. it is difficult to define positive outcomes.
43. The influence of early experience on human development
   a. is not recognized by social learning theorists.
   b. is not recognized by Freudian theorists.
   c. is minimal and enormously overemphasized.
   d. is important but can be moderated by later experience.

44. Which is most likely to be a nonnormative influence on the development of the present generation of U.S. adolescents?
   a. starting elementary school at about age 6
   b. severe childhood illness
   c. learning to drive an automobile during adolescence
   d. living in a culture concerned about violence

45. Nonnormative events are thought to be ______ stressful than normative events.
   a. more
   b. less
   c. as

46. Resilience is best defined as
   a. a person’s characteristics that protect him or her from negative outcomes.
   b. characteristics of the environment that protect a person from negative outcomes.
   c. one or more factors that work with risk factors to produce a disorder.
   d. one or more factors that protect a person in the presence of risk factors for a disorder.

47. Masten and Coatsworth view resilience in terms of a youth’s ability to
   a. develop a secure attachment to his or her parents.
   b. meet the demands of several developmental tasks.
   c. acquire adequate regulation of the emotions.
   d. achieve academic success.

48. The study of resilience conducted on Kauai revealed that
   a. about two-thirds of the children studied were doing well in late adolescence.
   b. personal characteristics of the youth contributed nothing to their resilience.
   c. family but not factors outside of the family contributed to resilience.
   d. none of the above

49. Which is a developmental task that occurs from infancy to adolescence?
   a. language development
   b. learning a second language
   c. getting a part-time job
   d. learning to drive a car

50. According to Table 2.3, social competence is an example of a(n) ________ resilience factor.
a. individual
b. family
c. extrafamiliar
d. none of the above

51. Investigations of the continuity of childhood behavior problems into adulthood suggest that

a. virtually all behavior problems carry over into adulthood.
b. it is impossible to link child and adult problems.
c. developmental changes in behavior can make it difficult to trace continuity.
d. if childhood behavior problems are not linked to adult problems, they should not be treated.

52. Heterotypic continuity refers to the continuance

a. of risk factors across the lifespan.
b. of resilience factors across the lifespan.
c. of a problem in the same form over time.
d. of a problem, with the problem changing in form over time.

53. When Jane was worried at nine years of age, she tended to develop stomachaches. At age thirty, this is still true. Thus, Jane exhibits _____ continuity of anxiety.

a. interactional  c. homotypic
b. proximal        d. normative

54. The Strange Situation is a laboratory procedure that has been used to measure

a. cognitive processing.  c. temperament.
b. early attachment.    d. shyness.

55. Which pattern of infant-caretaker attachment is especially associated with infants who have been exposed to abusive, pathological caretaking?

a. avoidant  c. ambivalent
b. secure    d. disorganized/disoriented

56. Secure attachment between infants and their caretakers is positively correlated with childhood and adolescent

a. aggressiveness.  c. adaptive social behavior.
b. verbal ability.   d. dependency.

57. Which is false about child-caretaker attachment?

a. If attachment is first established as secure, it does not become insecure.
b. Attachment is thought to provide the child with internal models for future relationships.
c. The caretaker’s sensitivity plays some role in determining the quality of attachment that develops.
d. Attachment develops during the first year of life.
58. Which is *false* about temperament?
   a. Chess and Thomas defined it by nine categories of behavior.
   b. It is influenced both by heredity and environment.
   c. It is considered to be a style of behavior.
   d. It can first be observed in infants at two years of age.

59. Which is usually *not* considered a part of temperament?
   a. intelligence
   b. activity level
   c. adaptability to new situations
   d. emotional reactions

60. Chess and Thomas’s case study of Carl demonstrated that
   a. the relationship between difficult temperament and behavioral problems depends in part on the child’s academic achievement.
   b. the relationship between difficult temperament and behavioral problems depends in part on the child’s social environment.
   c. easy temperament in children can sometimes be associated with behavioral problems.
   d. slow-to-warm temperament in children can sometimes be associated with behavioral problems.

61. A more recent theory of temperament by Rothbart & Posner (2006) includes which of the following?
   a. happiness, anxiety, and aggression
   b. surgency-extraversion, negative affectivity, and effortful control
   c. extraversion-introversion, openness, and acceptance
   d. outgoing/shy, positive outlook, neuroticism

62. Which is *not* among the three well-recognized components of emotion?
   a. internal experiences or feelings
   b. autonomic nervous systems reactions
   c. outward expressions, such as smiles and scowls
   d. none of the above

63. Which is *false* with regard to emotions and behavioral disturbances?
   a. Emotional reactions are a component of temperament.
   b. Lack of understanding of emotions has been related to behavioral problems.
   c. Positive emotions, even when at high intensity, are unrelated to behavioral problems.
   d. The regulation of emotions is a predictor of behavioral problems.

64. Youth who have been rejected by their peers or who exhibit high levels of aggressions tend to see the world as more ______ than other youth.
65. According to models of social cognitive processing, which is central in mediating children’s experiences and their behavior?

a. their interaction with their parents
b. their interpretation of their experiences
c. their earlier attachment to their parents
d. their temperamental tendencies

BRIEF ESSAY QUESTIONS

66. Define the term paradigm and discuss the advantages and disadvantages of applying a paradigm to understanding behavioral disorders.

67. Describe the conceptualization of developmental psychopathology as a macroparadigm for understanding the development of problem behaviors.

68. Define development and comment on three widely agreed-upon characteristics of human development.

69. Discuss the idea that abnormal behavior develops over time as children transact with their environments. Include in your discussion the Compass et al. descriptions of developmental pathways as well as the principles of equifinality and multifinality.

70. Define normative and nonnormative influences on development and provide an example of each.

71. Discuss the Grant et al. (2003) model of how stressors are related to psychopathology.

72. Define resilience and discuss known resilience factors.

73. Describe the differences between heterotypic and homotypic continuity and give one example of each.

74. Define infant-caretaker attachment and discuss factors that influence the development of attachment behaviors.

75. Summarize four patterns of infant-caretaker attachment and their relationship to later adjustment. Be specific.

76. Explain Chess and Thomas’s “goodness-of-fit” model and how the example of Carl reinforces this approach.

77. Describe the three-factor structure of temperament (Rothbart & Posner, 2006). Which component has been linked to ADHD and why?
78. What is social cognitive processing and how does it relate to our understanding of the relationship between thinking and emotions?

79. Discuss the early development of the emotions and how emotions are related to behavioral problems.

80. Using the example of aggression, discuss the role that cognitive processing can play in behavioral disorder. In other words, what may lead a child to be aggressive in social situations?

**ANSWER KEY**

1. T, p. 21, factual
2. F, p. 21, conceptual
3. F, p. 22-23, conceptual
4. F, p. 23, conceptual
5. T, p. 23, conceptual
6. T, pp. 23–24, applied
7. T, p. 23, applied
8. F, p. 26, factual
10. T, p. 28, factual
11. T, p. 29, factual
12. T, p. 29, factual
13. F, pp. 29-30, conceptual
14. F, p. 30, conceptual
15. T, p. 32, applied
16. F, p. 31, conceptual
17. T, p. 32, conceptual
18. F, p. 33, conceptual
19. F, p. 33, factual
20. T, p. 33, factual
21. F, p. 36, factual
22. F, p. 34, factual
23. T, p. 21, conceptual
24. T, pp. 21-22, factual
25. T, p. 24, conceptual
26. F, p. 36, conceptual
27. T, p. 36, factual
28. D, p. 21, factual
29. D, p. 22, factual
30. B, p. 22, conceptual
31. C, p. 23, conceptual
32. A, p. 23, factual
33. A, p. 24, conceptual
34. B, p. 24, factual
35. C, pp. 25-26, conceptual
36. D, pp. 25-26, applied
37. B, p. 26, applied
38. D, pp. 25-26, conceptual
39. D, p. 27, factual
40. A, pp. 27-28, conceptual
41. B, p. 27, conceptual
42. D, p. 29, conceptual
43. D, p. 29, applied
44. B, p. 28, conceptual
45. A, p. 28, factual
46. D, pp. 29, conceptual
47. B, p. 29, factual
48. D, p. 30, factual
49. A, pp. 29, factual
50. A, p. 30, factual
51. C, p. 31, conceptual
52. D, p. 31, conceptual
53. C, p. 31, applied
54. B, p. 32, factual
55. D, p. 33, applied
56. C, p. 33, conceptual
57. A, pp. 33, conceptual
58. D, pp. 33–34, conceptual
59. A, p. 33, conceptual
60. B, p. 34, applied
61. B, p. 35, factual
62. D, p. 35, conceptual
63. C, pp. 35–36, conceptual
64. A, p. 36, factual
65. B, p. 36, conceptual
66. p. 21, conceptual
67. p. 22-23, conceptual
68. p. 23, factual
69. pp. 25–26, factual
70. p. 28, conceptual
71. p. 28, conceptual
72. pp. 29–30, factual
73. p. 31, conceptual
74. pp. 32–33, conceptual
75. pp. 32–33, factual
76. p. 34, conceptual
77. p. 34, conceptual
78. p. 36, conceptual
79. pp. 34–36, applied
80. p. 36, conceptual