


## Chapter 1: Conceptual, Historical and Research Perspectives

### Key Terms


<b>ABAB design</b>
<b>Alienists</b>
<b>Analogue experiment</b>
<b>Animal studies</b>
<b>Asylums</b>
<b>Behavior that disturbs others</b>
<b>Bibliotherapy</b>
<b>Biological perspectives</b>
<b>Bodily humors</b>
<b>Bracketing</b>
<b>Case study</b>
<b>Categorizing</b>
<b>Clinical psychologists</b>
<b>Coding</b>
<b>Community mental health care</b>
<b>Confounding variable</b>
<b>Constant comparison</b>
<b>Control group</b>




<b>Convulsion therapy</b>
<b>Correlation</b>
<b>Correlation coefficient</b>
<b>Correlational research</b>
<b>Counseling psychologists</b>
<b>Dancing mania</b>
<b>Deinstitutionalization</b>
<b>Demonological perspective</b>
<b>Dependent variable</b>
<b>Description</b>
<b>Deviance</b>
<b>Diagnostic and Statistical Manual of Mental Disorders (DSM)</b>
<b>Double-blind studies</b>
<b>Electroconvulsive therapy (ECT)</b>
<b>Emotional suffering</b>
<b>Empirically supported treatments (ESTs)</b>
<b>Epidemiological research</b>
<b>Experiments</b>
<b>External validity</b>
<b>Grounded theory methods</b>




<b>Harmful internal dysfunction</b>
<b>Harmfulness to self or others</b>
<b>Historical-cultural views</b>
<b>Hypothesis</b>
<b>Hysteria</b>
<b>Incidence</b>
<b>Independent variable</b>
<b>Insulin coma therapy</b>
<b>Intentionality</b>
<b>Internal validity</b>
<b>Little Albert</b>
<b>Lobotomy</b>
<b>Lycanthropy</b>
<b>Malarial therapy</b>
<b>Malleus Maleficarum</b>
<b>Matched control groups</b>
<b>Medical model</b>
<b>Medicalization</b>
<b>Melancholia</b>
<b>Memo writing</b>



<b>Mental disorder</b>
<b>Mental illness</b>
<b>Misperception of reality</b>
<b>Mixed methods</b>
<b>Moral therapy</b>
<b>Negative correlation</b>
<b>No correlation</b>
<b>Objective/universal/legal views</b>
<b>Onanism</b>
<b>Participants</b>
<b>Phenomenological methods</b>
<b>Phenomenological reduction</b>
<b>Placebo control group</b>
<b>Placebo effect</b>
<b>Population</b>
<b>Positive correlation</b>
<b>Presenting problems</b>
<b>Prevalence</b>
<b>Problems in living</b>
<b>Psychiatrists</b>



<b>Psychological perspectives</b>
<b>Psychologists</b>
<b>Psychopathology</b>
<b>Psychosurgery</b>
<b>Psychotherapy</b>
<b>Purposive sampling</b>
<b>Qualitative methods</b>
<b>Quantitative methods</b>
<b>Quasi-experiment</b>
<b>Random assignment</b>
<b>Random sample</b>
<b>Randomized controlled trial (RCT)</b>
<b>Sample</b>
<b>Scientific method</b>
<b>Search for essences</b>
<b>Single-subject experiments</b>
<b>Snowball sampling</b>
<b>Social oppression</b>
<b>Sociocultural perspectives</b>
<b>Socioeconomic status (SES)</b>




<b>Statistical deviation</b>
<b>Theoretical coding</b>
<b>Theoretical sampling</b>
<b>Theoretical sensitivity</b>
<b>Trepanation</b>
<b>Trustworthiness</b>
<b>Variables</b>
<b>Violation of social norms and values</b>
<b>Wandering womb theory</b>
<b>York Retreat</b>

## Chapter 2: Theoretical Perspectives


### Key Terms

<b>ABCDE model</b>
<b>Action potential</b>
<b>Actualizing tendency</b>
<b>Allele</b>
<b>Amino acids</b>
<b>Amygdala</b>
<b>Anal-expulsive</b>
<b>Anal-retentive</b>
<b>Anal stage</b>
<b>Assimilative integration</b>
<b>Attachment theory</b>
<b>Authenticity</b>
<b>Automatic thoughts</b>
<b>Awfulizing</b>
<b>Behavior therapy</b>
<b>Behavioral perspectives</b>
<b>Boundaries</b>
<b>Brain chemistry perspectives</b>




<b>Brain stem</b>
<b>Brain structure and function perspectives</b>
<b>Catecholamines</b>
<b>Catharsis</b>
<b>Cerebellum</b>
<b>Cerebrum</b>
<b>Chromosomes</b>
<b>Classical conditioning</b>
<b>Coalitions</b>
<b>Cognitive distortions</b>
<b>Cognitive perspectives</b>
<b>Cognitive specificity hypothesis</b>
<b>Cognitive therapy</b>
<b>Cognitive-behavioral therapy (CBT)</b>
<b>Common factors</b>
<b>Conditional positive regard</b>
<b>Conditioned response (CR)</b>
<b>Conditioned stimulus (CS)</b>
<b>Congruence</b>
<b>Conscious</b>







<b>Consciousness-raising</b>
<b>Constructivist perspectives</b>
<b>Consumer and service-user perspectives</b>
<b>Consumer movement</b>
<b>Core beliefs</b>
<b>Core conditions for change</b>
<b>Corpus callosum</b>
<b>Corrective emotional experience</b>
<b>Countertransference</b>
<b>Culture</b>
<b>Culture-bound syndromes</b>
<b>Cyclical maladaptive pattern</b>
<b>Daily Record of Dysfunctional Thoughts (DRDT)</b>
<b>Defense mechanisms</b>
<b>Delay of gratification</b>
<b>Differentiation</b>
<b>DNA (deoxyribonucleic acid)</b>
<b>Dopamine</b>
<b>Dream analysis</b>
<b>Ego</b>




<b>Electra complex</b>
<b>Emotional cutoff</b>
<b>Empathy</b>
<b>Enmeshed families</b>
<b>Entorhinal cortex</b>
<b>Evolutionary perspectives</b>
<b>Existential psychotherapies</b>
<b>Exposure plus response prevention</b>
<b>Exposure therapies</b>
<b>Externalizing the problem</b>
<b>Extinction</b>
<b>False consciousness</b>
<b>Family rules</b>
<b>Family systems therapy</b>
<b>Feminist therapy</b>
<b>Fitness</b>
<b>Fixation</b>
<b>Free association</b>
<b>Gamma-aminobutyric acid (GABA)</b>
<b>General paresis</b>




<b>Genes</b>
<b>Genetic perspectives</b>
<b>Genital stage</b>
<b>Genome</b>
<b>Genotype</b>
<b>Genuineness</b>
<b>Glutamate</b>
<b>Heritability</b>
<b>Heritability estimate</b>
<b>Hippocampus</b>
<b>Humanistic perspectives</b>
<b>Id</b>
<b>Identified patient</b>
<b>Immune system perspectives</b>
<b>Inauthenticity</b>
<b>Incongruence</b>
<b>Intermediate beliefs</b>
<b>Latency stage</b>
<b>Libido</b>
<b>Limbic system</b>




<b>Monoamines</b>
<b>Multicultural perspectives</b>
<b>Multigenerational family therapy</b>
<b>Multigenerational transmission process</b>
<b>Musterbating</b>
<b>Narrative therapy</b>
<b>Negative punishment</b>
<b>Negative reinforcement</b>
<b>Neurons</b>
<b>Neurosis</b>
<b>Neurotransmitters</b>
<b>Norepinephrine</b>
<b>Nucleotides</b>
<b>Nucleus accumbens</b>
<b>Object</b>
<b>Object relations therapy</b>
<b>Oedipus complex</b>
<b>Operant conditioning</b>
<b>Oral stage</b>
<b>Orbitofrontal cortex</b>



<b>Organismic valuing process</b>
<b>Pathogens</b>
<b>Person-centered therapy</b>
<b>Phallic stage</b>
<b>Phenotype</b>
<b>Pleasure principle</b>
<b>Polygenic</b>
<b>Positive punishment</b>
<b>Positive reinforcement</b>
<b>Power hierarchies</b>
<b>Preconscious</b>
<b>Projective identification</b>
<b>Psychic determinism</b>
<b>Psychic energy</b>
<b>Psychoanalysis</b>
<b>Psychodynamic perspectives</b>
<b>Psychotherapy integration</b>
<b>Punishers</b>
<b>Rational emotive behavior therapy (REBT)</b>
<b>Reality principle</b>



<b>Reductionism</b>
<b>Reinforcers</b>
<b>Repression</b>
<b>Resistance</b>
<b>RNA (ribonucleic acid)</b>
<b>Schemas</b>
<b>Self-actualization</b>
<b>Serotonin</b>
<b>Service-user/survivor movement</b>
<b>Slips of the tongue</b>
<b>Social construction</b>
<b>Social justice perspectives</b>
<b>Social learning theory</b>
<b>Splitting</b>
<b>Stigma</b>
<b>Structural family therapy</b>
<b>Structural model</b>
<b>Superego</b>
<b>Survival of the fittest</b>
<b>System</b>



<b>Systematic desensitization</b>
<b>Systems perspectives</b>
<b>Technical eclecticism</b>
<b>Time-limited dynamic psychotherapy (TLDP)</b>
<b>Topographic model</b>
<b>Transference</b>
<b>Triangulation</b>
<b>Unconditional positive regard</b>
<b>Unconditioned response (UR)</b>
<b>Unconditioned stimulus (US)</b>
<b>Unconscious</b>
<b>Viral explanation of general paresis</b>
<b>Viral theories</b>
<b>Wish fulfillment</b>
<b>Working through</b>

## Chapter 3: Diagnosis, Formulation and Assessment

### Key Terms

<b>4P model of case formulation</b>
<b>ABC recording</b>
<b>Achievement</b>
<b>Affect</b>
<b>Algorithmic model</b>
<b>Analogue behavioral observation</b>
<b>Assessment</b>
<b>Beck Depression Inventory (BDI)</b>
<b>Behavioral Assessment</b>
<b>Bender Visual Motor Gestalt Test</b>
<b>Big Five</b>
<b>Biomarkers</b>
<b>Brain waves</b>
<b>Categorical diagnosis</b>
<b>Clinical interview</b>
<b>Comorbidity</b>
<b>Conceptualize</b>
<b>Cultural formulation interview (CFI)</b>



<b>Culture bias</b>
<b>Descriptive psychopathology</b>
<b>Diagnosis</b>
<b>Diagnostic code</b>
<b>Diagnositic criteria</b>
<b>Diagnostic guidelines</b>
<b>Dimensional diagnosis</b>
<b>DSM-5 definition of mental disorder</b>
<b>Electroencephalogram (EEG)</b>
<b>Etiology</b>
<b>Executive functioning</b>
<b>Formulation</b>
<b>Functional analysis</b>
<b>Functional analysis interview (FAI)</b>
<b>Halstead-Reitan Neuropsychological Test Battery (HRB)</b>
<b>Hierarchical Taxonomy of Psychopathology (HiTOP)</b>
<b>HiTOP spectra</b>
<b>ICD definition of mental disorder</b>
<b>Integrative evidence-based case formulation</b>
<b>Intelligence</b>

<b>International Classification of Diseases (ICD)</b>
<b>Intelligence quotient (IQ)</b>
<b>Intelligence tests</b>
<b>Interrater reliability</b>
<b>Lowering of diagnostic thresholds</b>
<b>Luria-Nebraska Neuropsychological Battery (LNNB)</b>
<b>M-Axis (Profile of Mental Functioning)</b>
<b>Magnetic resonance imaging (MRI)</b>
<b>Medical 203</b>
<b>Mental status exam</b>
<b>Minnesota Multiphasic Personality Inventory (MMPI)</b>
<b>Neuroimaging techniques</b>
<b>Neurological tests</b>
<b>Minnesota Multiphasic Personality Inventory (MMPI)</b>
<b>Neuroimaging techniques</b>
<b>Neurological tests</b>
<b>Neuropsychological tests</b>
<b>Nomenclature</b>
<b>Objective test</b>
<b>P-Axis (Personality Syndromes)</b>

<b>Personality</b>
<b>Personality test</b>
<b>Positron-emission topography (PET scan)</b>
<b>Power Threat Meaning (PTM) Framework</b>
<b>Problem Behavior Questionnaire (PBQ)</b>
<b>Projective test</b>
<b>Prototype model</b>
<b>Pseudopatient study</b>
<b>Psychiatric diagnosis</b>
<b>Psychodynamic Diagnostic Manual (PDM)</b>
<b>Q-sort</b>
<b>Questions About Behavioral Function (QABF)</b>
<b>RDoC's five domains</b>
<b>Reification</b>
<b>Reliability</b>
<b>Research Domain Criteria (RDoC)</b>
<b>Role construct repertory test</b>
<b>Rorschach Inkblot Method (RIM)</b>
<b>S-Axis (Subjective Experience)</b>
<b>Scatterplot</b>




<b>Self-efficacy</b>
<b>Self-report personality inventory</b>
<b>Signs</b>
<b>Sixteen Personality Factor (16PF) Questionnaire</b>
<b>Standardization</b>
<b>Structured Clinical Interview for DSM Disorders (SCID)</b>
<b>Structured interview</b>
<b>Symptoms</b>
<b>Syndrome</b>
<b>Test batteries</b>
<b>Thematic Apperception Test (TAT)</b>
<b>Unstructured interview</b>
<b>Validity</b>


## Chapter 4: Psychosis

### Key Terms


<b>Aberrant salience hypothesis</b>
<b>Abnormal motor behavior</b>
<b>Acute and transient psychotic disorder (ATPD)</b>
<b>Adoption studies</b>
<b>Algoia</b>
<b>Amphetamine psychosis</b>
<b>Anhedonia</b>
<b>Antipsychotics</b>
<b>Asociality</b>
<b>Assertive community treatment (ACT)</b>
<b>Attenuated psychosis syndrome (APS)</b>
<b>Atypical antipsychotics</b>
<b>Avolition</b>
<b>Behavioral experiments</b>
<b>Behavioral rehearsal</b>
<b>Biopsychosocial model</b>
<b>Bizarre delusions</b>
<b>Brief psychotic disorder</b>



<b>Catatonia</b>
<b>Caudate nucleus</b>
<b>Cliff-edge fitness theory</b>
<b>Cognitive-behavioral therapy for psychosis (CBTp)</b>
<b>Community care</b>
<b>Concordance rates</b>
<b>Cytokines</b>
<b>Delusional disorder</b>
<b>Delusions</b>
<b>Dementia praecox</b>
<b>Diminished emotional expression</b>
<b>Disorganized thinking</b>
<b>Dizygotic twins</b>
<b>Dopamine hypothesis of schizophrenia</b>
<b>Double bind</b>
<b>Echolalia</b>
<b>Equal environments assumption</b>
<b>Erotomantic delusions</b>
<b>Evidential analysis</b>
<b>Expressed emotion</b>



<b>Extrapyramidal side effects</b>
<b>Family studies</b>
<b>First-generation antipsychotics</b>
<b>Flattened affect</b>
<b>Glutamate hypothesis of schizophrenia</b>
<b>Grandiose delusions</b>
<b>Hallucinations</b>
<b>Hydrotherapy</b>
<b>Inflammatory hypothesis</b>
<b>Integrated sociodevelopmental-cognitive model of schizophrenia</b>
<b>Jealous delusions</b>
<b>Loose associations</b>
<b>Major tranquilizers</b>
<b>Mesolimbic dopamine pathway</b>
<b>Metacognition</b>
<b>Modeling</b>
<b>Monozygotic twins</b>
<b>Negative symptoms</b>
<b>Non-bizarre delusions</b>
<b>Normalization</b>



<b>Open Dialogue</b>
<b>Persecutory delusions</b>
<b>Positive symptoms</b>
<b>Pre-therapy</b>
<b>Prefrontal cortex</b>
<b>Psychoeducation</b>
<b>Psychosis</b>
<b>Schizoaffective disorder</b>
<b>Schizophrenia</b>
<b>Schizophreniform disorder</b>
<b>Schizophrenogenic mothers</b>
<b>Schizotypal disorder</b>
<b>Second-generation antipsychotics</b>
<b>Social drift</b>
<b>Social skills training</b>
<b>Socratic questioning</b>
<b>Somatic delusions</b>
<b>Soteria model</b>
<b>Stress-vulnerability-coping skills model</b>
<b>Tardive dyskinesia</b>






<b>Temporal cortex</b>
<b>Test-retest reliability</b>
<b>Theory of mind</b>
<b>Twin studies</b>
<b>Ventricles</b>
<b>Viral theory of schizophrenia</b>
<b>Word salad</b>

## Chapter 5: Mood Problems


### Key Terms

<b>Acedia</b>
<b>Adaptationist models</b>
<b>Anaclitic depression</b>
<b>Anticonvulsants</b>
<b>Antidepressants</b>
<b>Attachment-based family therapy</b>
<b>Behavioral activation</b>
<b>Benzodiazepines</b>
<b>Bereavement exclusion</b>
<b>Bipolar affective disorder</b>
<b>Bipolar I disorder</b>
<b>Bipolar II disorder</b>
<b>Black box warning</b>
<b>Candidate gene studies</b>
<b>Circadian rhythms</b>
<b>Cognitive triad</b>
<b>Cortisol</b>
<b>Cyclothymic disorder</b>



<b>Dark therapy</b>
<b>Deep brain stimulation (DBS)</b>
<b>Depression</b>
<b>Depressive episode</b>
<b>Discontinuation syndrome</b>
<b>Disruptive mood dysregulation disorder (DMDD)</b>
<b>Dynamic interpersonal therapy (DIT)</b>
<b>Dysregulation models</b>
<b>Dysthymia</b>
<b>Emotion-focused therapy (EFT)</b>
<b>Endocrine system</b>
<b>Endogenous depression</b>
<b>Exogenous depression</b>
<b>Family-focused therapy (FFT)</b>
<b>Frontal lobe</b>
<b>Glutamate hypothesis of depression</b>
<b>Grandiosity</b>
<b>Hopelessness theory</b>
<b>Hormones</b>
<b>Hypomanic episode</b>

<b>Hypothalamic-pituitary-adrenal (HPA) axis</b>
<b>Interpersonal and social rhythm therapy (IPSRT)</b>
<b>Interpersonal therapy (IPT)</b>
<b>Ketamine</b>
<b>Learned helplessness</b>
<b>Light therapy</b>
<b>Lithium</b>
<b>Major depressive disorder (MDD)</b>
<b>Mania</b>
<b>Manic episode</b>
<b>MAO inhibitors (MAOIs)</b>
<b>Mindfulness-based cognitive therapy (MBCT)</b>
<b>Mindfulness training</b>
<b>Mixed episode</b>
<b>Monoamine hypothesis</b>
<b>Monoamine oxidase (MAO)</b>
<b>Mood stabilizers</b>
<b>Neurasthenia</b>
<b>Nonsteroidal anti-inflammatory drugs (NSAIDs)</b>
<b>Persistent depressive disorder (PDD)</b>




<b>Postpartum depression</b>
<b>Premenstrual dysphoric disorder (PMDD)</b>
<b>Problem-solving therapy</b>
<b>Reaching Out About Depression (ROAD)</b>
<b>Recurrent depressive disorder</b>
<b>Rhodiola rosea</b>
<b>Seasonal affective disorder (SAD)</b>
<b>Selective serotonin reuptake inhibitors (SSRIs)</b>
<b>Serotonin and norepinephrine reuptake inhibitors (SNRIs)</b>
<b>Short-term psychoanalytic supportive therapy (SPST)</b>
<b>Silencing the self (STS) theory</b>
<b>Single episode depressive disorder</b>
<b>St. John's wort</b>
<b>Transcranial magnetic stimulation (TMS)</b>
<b>Tricyclics</b>


## Chapter 6: Anxiety, Obsessions, and Compulsions

### Key Terms

<b>Acceptance and commitment therapy (ACT)</b>
<b>Accomodation</b>
<b>Agoraphobia</b>
<b>Anterior cingulate cortex</b>
<b>Anxiety</b>
<b>Anxiolytics</b>
<b>Augmenting agents</b>
<b>Avoidance model of worry</b>
<b>Barbiturates</b>
<b>Beta blockers</b>
<b>Body dysmorphic disorder (BDD)</b>
<b>Buspirone</b>
<b>Catastrophic misinterpretation model of panic disorder</b>
<b>Compulsions</b>
<b>Corticostriatal pathophysiological models</b>
<b>Emotional dysregulation model</b>
<b>Excoriation (skin-picking disorder)</b>
<b>Existential anxiety</b>



<b>Existential givens</b>
<b>Fear</b>
<b>Generalized anxiety disorder (GAD)</b>
<b>Genome-wide association (GWA) study</b>
<b>Glutamate hypothesis of OCD</b>
<b>Group selection</b>
<b>Group selection theory of OCD</b>
<b>Gut-brain axis</b>
<b>Hoarding disorder</b>
<b>Imaginal exposure</b>
<b>In vivo exposure</b>
<b>Inhibitory learning</b>
<b>Insula</b>
<b>Intolerance of uncertainty model</b>
<b>Little Hans</b>
<b>Logotherapy</b>
<b>Metacognitive model</b>
<b>Mindfulness training</b>
<b>Minor tranquilizers</b>
<b>Mixed anxiety and depressive disorder</b>




<b>Neurotic anxiety</b>
<b>Observational learning</b>
<b>Obsessions</b>
<b>Obsessive-compulsive disorder (OCD)</b>
<b>Panic attack</b>
<b>Panic disorder</b>
<b>Participant modeling</b>
<b>Prepared conditioning</b>
<b>Progressive relaxation</b>
<b>Rat Man</b>
<b>Relaxation training</b>
<b>Selective mutism</b>
<b>Separation anxiety disorder</b>
<b>Social anxiety disorder (social phobia)</b>
<b>Specific phobia</b>
<b>Striatum</b>
<b>Thalamus</b>
<b>Thought stopping</b>
<b>Trichotillomania (hair-pulling disorder)</b>
<b>Virtual reality exposure</b>



## **Chapter 7: Trauma, Stress, and Loss**

### **Key Terms**

<b>Acute stress disorder (ASD)</b>
<b>Acute stress reaction</b>
<b>Adjustment disorders</b>
<b>Amnesia</b>
<b>Autonomic nervous system (ANS)</b>
<b>Bereavement</b>
<b>Bilateral stimulation</b>
<b>Cognitive processing therapy (CPT)</b>
<b>Cognitive-behavioral conjoint therapy (CBCT)</b>
<b>Complex PTSD</b>
<b>Critical incident stress debriefing (CISD)</b>
<b>Cultural adaptations</b>
<b>Decathexis</b>
<b>Depersonalization</b>
<b>Derealization</b>
<b>Dissociation</b>
<b>Dual representation theory (DRT)</b>
<b>Emotion-focused couple therapy (EFCT) for trauma</b>



<b>Emotional processing theory</b>
<b>Eye movement desensitization and reprocessing (EMDR)</b>
<b>Family focused grief therapy</b>
<b>Family systems therapy for PTSD</b>
<b>Fight or flight response</b>
<b>Five-stage theory of grief</b>
<b>Flashbacks</b>
<b>General adaptation syndrome</b>
<b>Grief</b>
<b>Homeostasis</b>
<b>Hypothalamus</b>
<b>Imaginal exposure</b>
<b>Integrative behavioral couples therapy</b>
<b>Interpersonal PTSD groups/PTSD process groups</b>
<b>Medial prefrontal cortex</b>
<b>Multifamily group psychoeducation</b>
<b>Negative appraisals theory</b>
<b>Negative emotionality (NEM)</b>
<b>Parasympathetic nervous system (PNS)</b>
<b>Parent management training</b>

<b>Persistent complex bereavement disorder</b>
<b>Posttraumatic Growth (PTG)</b>
<b>Posttraumatic stress disorder (PTSD)</b>
<b>Prolonged grief disorder</b>
<b>Psychodynamic PTSD groups</b>
<b>Psychological first aid (PFA)</b>
<b>Rape trauma syndrome</b>
<b>Shell shock</b>
<b>Short-term dynamic therapy of stress syndromes</b>
<b>Strategic approach therapy (SAT)</b>
<b>Stress</b>
<b>Stress inoculation training (SIT)</b>
<b>Supportive PTSD groups</b>
<b>Sympathetic nervous system (SNS)</b>
<b>Trauma</b>
<b>Trauma-focused cognitive-behavioral groups</b>
<b>Traumatic context</b>
<b>Traumatic neurosis</b>
<b>Vulnerability paradox</b>
<b>War neurasthenia</b>




## **Chapter 8: Dissociation and Somatic Complaints**

### **Key Terms**

<b>Alexithymia</b>
<b>Alter</b>
<b>B cells</b>
<b>Bioenergetics exercises</b>
<b>Biofeedback</b>
<b>Bodily Distress Disorder</b>
<b>Body-oriented psychotherapies</b>
<b>Character armor</b>
<b>Conversion disorder</b>
<b>Depersonalization/derealization disorder</b>
<b>Diathesis-stress model of psychosomatic illness</b>
<b>Dissociative amnesia</b>
<b>Dissociative disorders of movement and sensation</b>
<b>Dissociative fugue</b>
<b>Dissociative identity disorder (DID)</b>
<b>Dissociative neurological symptom disorder</b>
<b>Dorsolateral prefrontal cortex</b>
<b>Factitious disorder</b>



<b>Functional relaxation</b>
<b>Highway hypnosis</b>
<b>Hypnosis</b>
<b>Hypochondriasis</b>
<b>Iatrogenic condition</b>
<b>Identity alteration</b>
<b>Identity confusion</b>
<b>Illness anxiety disorder</b>
<b>Internal family systems therapy (IFS)</b>
<b>La belle indifférence</b>
<b>Lymphocytes</b>
<b>Malingering</b>
<b>Mindfulness-based stress reduction (MBSR)</b>
<b>Multiple personality disorder</b>
<b>Munchausen syndrome</b>
<b>Naltrexone</b>
<b>Natural killer (NK) cells</b>
<b>Opioid antagonists</b>
<b>Parietal cortex</b>
<b>Post-hypnotic suggestion</b>



<b>Posttraumatic model</b>
<b>Primary gain</b>
<b>Psychogenic movement disorder</b>
<b>Psychological and behavioral factors associated with disorders or diseases classified elsewhere</b>
<b>Psychological factors affecting other medical conditions</b>
<b>Psychoneuroimmunology (PNI)</b>
<b>Psychosomatic</b>
<b>Psychosomatogenic families</b>
<b>Right anterior prefrontal cortex</b>
<b>Secondary gain</b>
<b>Self-hypnosis</b>
<b>Sociocognitive model</b>
<b>Somatic complaint</b>
<b>Somatic symptom disorder (SSD)</b>
<b>Somatization</b>
<b>Somatization disorder</b>
<b>State-dependent learning</b>
<b>Stress-induced analgesia</b>
<b>T cells</b>
<b>Type A personality</b>



<b>Type B personality</b>
<b>Type C personality</b>
<b>Type D personality</b>


## Chapter 9: Feeding and Eating Problems

### Key Terms

<b>Adapted to flee famine hypothesis</b>
<b>Amenorrhea</b>
<b>Anorexia nervosa</b>
<b>Anterior insula</b>
<b>Atypical anorexia nervosa</b>
<b>Atypical bulimia nervosa</b>
<b>Aversion therapy</b>
<b>Avoidant/restrictive food intake disorder (ARFID)</b>
<b>Binge eating</b>
<b>Binge-eating disorder (BED)</b>
<b>Body mass index (BMI)</b>
<b>Bulimia nervosa</b>
<b>Cognitive fusion</b>
<b>Compensatory behavior</b>
<b>Cultural relativism</b>
<b>Cultural universalism</b>
<b>Dislocation studies</b>
<b>Eating problems</b>



<b>Enhanced cognitive behavioral therapy (CBT-E)</b>
<b>Exposure plus response prevention of bingeing</b>
<b>Exposure plus response prevention of purging</b>
<b>Family-based treatment (FBT)</b>
<b>Family meal</b>
<b>Feeding disorder of infancy and early childhood</b>
<b>Feeding problems</b>
<b>Food exposure for anorexia</b>
<b>Geophagia</b>
<b>In vivo food exposure</b>
<b>Lateral hypothalamus</b>
<b>Mercyism</b>
<b>Mesolimbic pathway</b>
<b>Muscle dysmorphia</b>
<b>Night eating syndrome</b>
<b>Norepinephrine-dopamine reuptake inhibitors (NDRIs)</b>
<b>Obesity</b>
<b>Objectification</b>
<b>Objectification theory</b>
<b>Oral impregnation</b>



<b>Orthorexia nervosa</b>
<b>Other specified feeding or eating disorder</b>
<b>Overcorrection</b>
<b>Pica</b>
<b>Psychosomatic families</b>
<b>Purging</b>
<b>Purging disorder</b>
<b>Reproductive suppression hypothesis</b>
<b>Rumination disorder</b>
<b>Satiation techniques</b>
<b>Self-objectification</b>
<b>Sexual competition hypothesis</b>
<b>Specialist supportive clinical management (SSCM)</b>
<b>Thought parade exercise</b>
<b>Tryptophan</b>
<b>Ventromedial hypothalamus</b>
<b>Weight set point</b>
<b>Western ideal of thinness</b>



## Chapter 10: Sexual Problems and Gender Issues

### Key Terms

<b>Androgen</b>
<b>Anorgasmia</b>
<b>Antiandrogens</b>
<b>Bisexuals</b>
<b>Chemical castration</b>
<b>Cisgender</b>
<b>Closeted</b>
<b>Coercive sexual sadism</b>
<b>Coming out</b>
<b>Compulsive sexual behavior disorder</b>
<b>Conversion therapy</b>
<b>Covert sensitization</b>
<b>Cross-sex hormonal treatment</b>
<b>Delayed ejaculation</b>
<b>Dyspareunia</b>
<b>Ego-dystonic homosexuality</b>
<b>Electrical aversive therapy</b>
<b>Erectile disorder</b>



<b>Estrogen</b>
<b>Excessive sexual drive</b>
<b>Exhibitionism/exhibitionistic disorder</b>
<b>Experiential sex therapy</b>
<b>Failure of genital response</b>
<b>Female orgasmic disorder</b>
<b>Female sexual arousal dysfunction</b>
<b>Female sexual interest/arousal disorder</b>
<b>Fetishism/fetishistic disorder</b>
<b>Fetishistic transvestism/transvestic disorder</b>
<b>Flibanserin</b>
<b>Frotteurism/frotteuristic disorder</b>
<b>Gatekeeping</b>
<b>Gay</b>
<b>Gender</b>
<b>Gender conformity</b>
<b>Gender dysphoria</b>
<b>Gender expression</b>
<b>Gender identity</b>
<b>Gender identity disorder of childhood</b>



<b>Gender incongruence</b>
<b>Gender nonconformity</b>
<b>Genito-pelvic pain/penetration disorder</b>
<b>Good lives model (GLM)</b>
<b>Habituation</b>
<b>Heterosexism</b>
<b>Heterosexuals</b>
<b>Homophobia</b>
<b>Homosexuals</b>
<b>Hormone replacement therapy (HRT)</b>
<b>Hypersexual disorder</b>
<b>Hypoactive sexual desire dysfunction</b>
<b>Identification with the aggressor</b>
<b>Internalized homophobia</b>
<b>Intersex</b>
<b>Intracavernous injection therapy</b>
<b>Kegel exercises</b>
<b>Lack or loss of sexual desire</b>
<b>Lesbian</b>
<b>Male hypoactive sexual desire disorder</b>



<b>Masturbatory satiation</b>
<b>Menopause</b>
<b>Natal gender</b>
<b>New View</b>
<b>Noradrenaline</b>
<b>Olfactory aversion</b>
<b>Orgasmic dysfunction</b>
<b>Paraphilia</b>
<b>Paraphilic coercive disorder</b>
<b>Paraphilic disorders</b>
<b>Pedophilia/pedophilic disorder</b>
<b>Pelvic floor rehabilitation</b>
<b>Perversions</b>
<b>Phosphodiesterase type-5 inhibitor</b>
<b>Premature (early) ejaculation</b>
<b>Progesterone</b>
<b>Progestin</b>
<b>Recidivism rates</b>
<b>Relapse prevention (RP)</b>
<b>Risk-need-responsivity model (RNR)</b>

<b>Sadomasochism/sexual sadism disorder or sexual masochism disorder</b>
<b>Sensate focus</b>
<b>Sex reassignment surgery</b>
<b>Sex</b>
<b>Sexologist</b>
<b>Sexual aversion and lack of sexual enjoyment</b>
<b>Sexual dysfunctions</b>
<b>Sexual instinct</b>
<b>Sexual orientation</b>
<b>Sexual pain-penetration disorder</b>
<b>Sexual response cycle</b>
<b>Sildenafil</b>
<b>Spectatoring</b>
<b>Squeeze technique</b>
<b>Stop-start technique</b>
<b>Surgical castration</b>
<b>Testosterone</b>
<b>Transgender-affirmative CBT (TA-CBT)</b>
<b>Transgender</b>
<b>Transphobia</b>



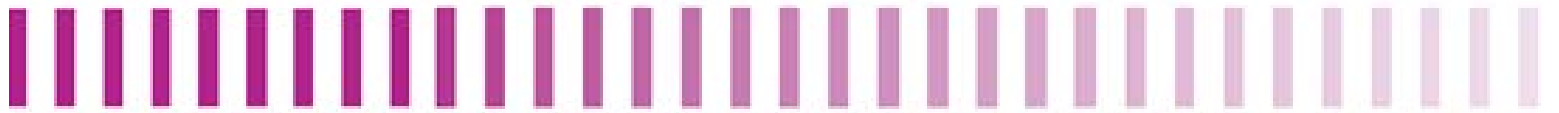
<b>Transsexual</b>
<b>Transsexualism</b>
<b>Transvestism</b>
<b>Transvestite</b>
<b>Tumescence</b>
<b>Vaginismus</b>
<b>Voyeurism/voyeuristic disorder</b>



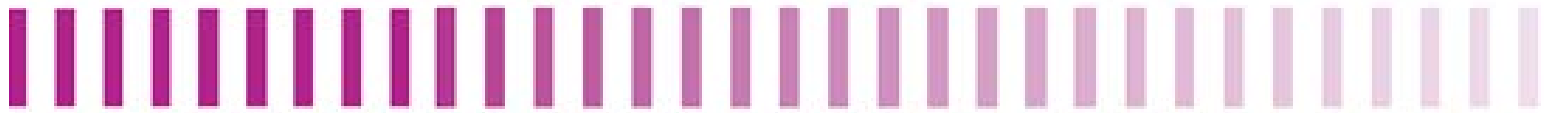
## **Chapter 11: Substance Use and Addiction**

### **Key Terms**

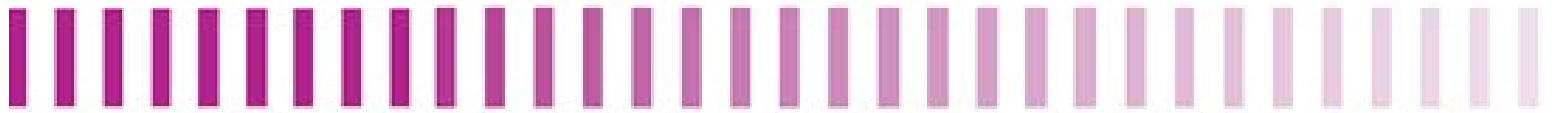
<b>12-step programs</b>
<b>Acamprosate</b>
<b>Acetaldehyde</b>
<b>Acetylcholine</b>
<b>Addiction</b>
<b>Addictive personality</b>
<b>Alcohol</b>
<b>Alcohol Use Disorders Identification Test (AUDIT)</b>
<b>Alcoholic</b>
<b>Alcoholics Anonymous (AA)</b>
<b>Amphetamines</b>
<b>Behavioral addictions</b>
<b>Binge drinking</b>
<b>Blood alcohol content</b>
<b>Caffeine</b>
<b>Cannabis</b>
<b>Cirrhosis</b>
<b>Cocaine</b>



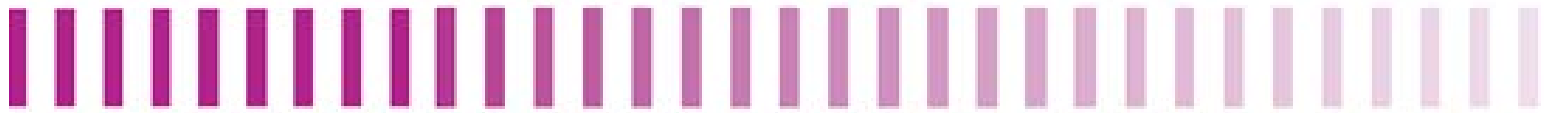
<b>Codeine</b>
<b>Confabulation</b>
<b>Contingency management (CM)</b>
<b>Controlled drinking</b>
<b>Crack</b>
<b>Cross-tolerance</b>
<b>Cytisine</b>
<b>Delirium tremens (DTs)</b>
<b>Dependence</b>
<b>Depressants</b>
<b>Detoxification</b>
<b>Disulfiram</b>
<b>Dopamine hypothesis of addiction</b>
<b>Drug flashbacks</b>
<b>Drug replacement therapy</b>
<b>Drug-induced synesthesia</b>
<b>Endogenous opioids</b>
<b>Fetal alcohol syndrome (FAS)</b>
<b>Gambling disorder</b>
<b>Gaming disorder</b>



<b>Hallucinogens</b>
<b>Harm reduction</b>
<b>Harmful use</b>
<b>Heroin</b>
<b>Illness model of drug addiction</b>
<b>Incentive-sensitization theory</b>
<b>Indolamine hallucinogens</b>
<b>Intoxication</b>
<b>Korsakoff syndrome</b>
<b>Life-history hypothesis</b>
<b>Methadone maintenance therapy</b>
<b>Microglia</b>
<b>Mismatch hypothesis</b>
<b>Moderation Management (MM)</b>
<b>Moral model of drug addiction</b>
<b>Morphine</b>
<b>Motivational interviewing (MI)</b>
<b>Multidimensional family therapy</b>
<b>Mutualism hypothesis</b>
<b>N-acetylcysteine</b>



<b>Nicotine replacement therapy</b>
<b>Nicotine</b>
<b>OARS</b>
<b>Opioid blockers</b>
<b>Opioids</b>
<b>Opium</b>
<b>Oxycodone</b>
<b>Pathological gambling</b>
<b>Phencyclidine</b>
<b>Phenylalkylamine hallucinogens</b>
<b>Polydrug use</b>
<b>Prevention and early intervention programs</b>
<b>Reclaiming Futures</b>
<b>Remission</b>
<b>Reward deficiency syndrome theory (RDS)</b>
<b>Sedative-hypnotics</b>
<b>Self-medication hypothesis</b>
<b>Speedballing</b>
<b>Stimulants</b>
<b>Substance abuse</b>



<b>Substance dependence</b>
<b>Substance use disorder</b>
<b>Synergistic effects</b>
<b>Tetrahydrocannabinol (THC)</b>
<b>Thebaine</b>
<b>Therapeutic communities</b>
<b>Thiamine</b>
<b>Tolerance</b>
<b>Transtheoretical model of change</b>
<b>Varenicline</b>
<b>Ventral tegmental area (VTA)</b>
<b>Withdrawal</b>

## Chapter 12: Personality Issues

### Key Terms

<b>Anankastic personality disorder</b>
<b>Antisocial personality disorder (APD)</b>
<b>Anxious (avoidant) personality disorder</b>
<b>Avoidant personality disorder</b>
<b>Borderline families</b>
<b>Borderline personality disorder (BPD)</b>
<b>Character</b>
<b>Cluster A</b>
<b>Cluster B</b>
<b>Cluster C</b>
<b>Dependent personality disorder</b>
<b>Dialectical behavior therapy (DBT)</b>
<b>Dialectics</b>
<b>Difficult process</b>
<b>Dissocial personality disorder</b>
<b>DSM-5 alternative model for personality disorders</b>
<b>Dysfunctional schema modes</b>
<b>Early maladaptive schemas (EMSs)</b>

<b>Emotionally unstable personality disorder</b>
<b>Entitlement</b>
<b>Factor analysis</b>
<b>Five-factor model (FFM)</b>
<b>Fragile process</b>
<b>Frequency-dependent selection hypothesis</b>
<b>Healthy and functional schema modes</b>
<b>Histrionic personality disorder</b>
<b>ICD-11 model of personality disorders</b>
<b>Level of Personality Functioning Scale (LPFS)</b>
<b>Levels of personality organization</b>
<b>Mania without delusion</b>
<b>Mild personality disorder</b>
<b>Moderate personality disorder</b>
<b>Moral insanity</b>
<b>Narcissistic personality disorder (NPD)</b>
<b>Obsessive trait complex hypothesis</b>
<b>Obsessive-compulsive personality disorder (OCPD)</b>
<b>Paranoid personality disorder</b>
<b>Parasuicidal behavior</b>

<b>Personality disorder</b>
<b>Personality disorder-trait specified</b>
<b>Personality Inventory for the DSM-5 (PID-5)</b>
<b>Polypharmacy</b>
<b>Primary psychopathy</b>
<b>Psychopathic personalities</b>
<b>Psychopathy</b>
<b>Relational-cultural theory</b>
<b>Schema therapy</b>
<b>Schizoid personality disorder</b>
<b>Schizotypal personality disorder (STPD)</b>
<b>Secondary psychopathy</b>
<b>Self-stigmatization</b>
<b>Severe personality disorder</b>
<b>Sociopathy</b>
<b>Successful psychopaths</b>
<b>Temperament</b>
<b>Trait factors</b>
<b>Trait theories</b>
<b>Traits</b>






**Unsuccessful psychopaths**

## Chapter 13: Developmental Issues Involving Disruptive Behavior and Attachment

### Key Terms

<b>Applied behavior analysis (ABA)</b>
<b>Asperger's Disorder</b>
<b>Attention-deficit/hyperactivity disorder (ADHD)</b>
<b>Atypical autism</b>
<b>Autism</b>
<b>Autism spectrum disorder (ASD)</b>
<b>Autistic disorder</b>
<b>Autistic process</b>
<b>Autoimmune disease hypothesis</b>
<b>Catecholamine hypothesis of ADHD</b>
<b>Child-centered play therapy</b>
<b>Childhood autism</b>
<b>Conduct disorder (CD)</b>
<b>Courtesy stigma</b>
<b>Developmental language disorder with impairment of mainly pragmatic language</b>
<b>Deviance</b>
<b>Discrete trial training (DTT)</b>
<b>Disturbance of activity and attention</b>



<b>Dopamine hypothesis of ADHD</b>
<b>Dorsal anterior midcingulate cortex</b>
<b>Early and intensive behavioral intervention (EIBI)</b>
<b>Environmental toxin hypotheses</b>
<b>Excessive sugar-intake hypothesis</b>
<b>Externalizing behaviors</b>
<b>Extreme male brain (EMB) theory</b>
<b>False negatives</b>
<b>False positives</b>
<b>Feingold diet</b>
<b>Fighter theory</b>
<b>Food additives hypothesis</b>
<b>Gluten/casein-free diet hypothesis</b>
<b>Hunter-farmer theory</b>
<b>Hyperkinetic conduct disorder</b>
<b>Intermittent explosive disorder</b>
<b>Internalizing behaviors</b>
<b>Kleptomania</b>
<b>Low-fitness extreme theory</b>
<b>Methylphenidate</b>

<b>Mindblindness</b>
<b>Multisystemic therapy (MST)</b>
<b>Neighborhood-based projects</b>
<b>Neurodiversity</b>
<b>Neurotypicals</b>
<b>Oppositional defiant disorder (ODD)</b>
<b>Oxytocin</b>
<b>Pervasive developmental disorders</b>
<b>Pervasive developmental disorder-NOS (PDD-NOS)</b>
<b>Picture Exchange Communication System (PECS)</b>
<b>Polyunsaturated fatty acids (PUFA) hypothesis</b>
<b>Problem-solving skills training</b>
<b>Pyromania</b>
<b>Reactive attachment disorder</b>
<b>Refrigerator mother theory of autism</b>
<b>Response readiness theory</b>
<b>Ritalin</b>
<b>Social (pragmatic) communication disorder (SPCD)</b>
<b>Suppressed GABA inhibition hypothesis</b>
<b>Viral theory of autism</b>



<b>Wader theory</b>
<b>Weak central coherence theory</b>

## **Chapter 14: Other Presenting Problems**

### **Key Terms**

<b>Accupuncture</b>
<b>Alzheimer's disease</b>
<b>Amyloid hypothesis</b>
<b>Antihistamines</b>
<b>Basal ganglia</b>
<b>Breathing-related sleep disorders</b>
<b>Cataplexy</b>
<b>Central sleep apnea</b>
<b>Childhood-onset fluency disorder (stuttering)</b>
<b>Cholinergic hypothesis of Alzheimer's</b>
<b>Circadian rhythm sleep-wake disorders</b>
<b>Cognitive enhancement therapies</b>
<b>Cognitive reserve hypothesis</b>
<b>Cognitive-behavioral therapy for insomnia (CBT-I)</b>
<b>Constructivist therapy for stuttering</b>
<b>Copralalia</b>
<b>Day care programs</b>
<b>Delirium</b>




<b>Dementia</b>
<b>Desmopressin</b>
<b>Developmental coordination disorder</b>
<b>Developmental language disorder with impairment of mainly expressive language</b>
<b>Developmental language disorder with impairment of receptive and expressive language</b>
<b>Dopamine hypothesis of stuttering</b>
<b>Dopamine hypothesis of Tourette's disorder</b>
<b>Down syndrome</b>
<b>Dry-bed training</b>
<b>Dyscalculia</b>
<b>Dyslexia</b>
<b>Encopresis</b>
<b>Enuresis</b>
<b>Enuresis alarm</b>
<b>Eugenics movement</b>
<b>Expressive language disorder</b>
<b>Fragile X syndrome</b>
<b>Group homes</b>
<b>Habit reversal training (HRT)</b>



<b>Histamine</b>
<b>Hyperarousal theory of insomnia</b>
<b>Hypersomnia</b>
<b>Insomnia</b>
<b>Intellectual disability</b>
<b>Intelligence</b>
<b>IQ-achievement discrepancy model</b>
<b>Language disorder</b>
<b>Lidcombe Program</b>
<b>Long-term care</b>
<b>Major neurocognitive disorder</b>
<b>Mental retardation</b>
<b>Minor neurocognitive disorder</b>
<b>Modafinil</b>
<b>Music education</b>
<b>Narcolepsy</b>
<b>Neurofibrillary tangles</b>
<b>Nightmare disorder</b>
<b>Non-benzodiazepine sleep aids</b>
<b>Non-rapid eye movement (NREM) sleep</b>





<b>Non-rapid eye movement (NREM) sleep arousal disorder</b>
<b>Orexin</b>
<b>Orexin-receptor antagonists</b>
<b>Palilialia</b>
<b>PANDAS hypothesis</b>
<b>Parasomnias</b>
<b>Persistent (chronic) motor or vocal tic disorder</b>
<b>Phenylketonuria (PKU)</b>
<b>Primary enuresis</b>
<b>Primary insomnia</b>
<b>Provisional tic disorder</b>
<b>Rapid eye movement (REM) sleep</b>
<b>Rapid eye movement (REM) sleep behavior disorder</b>
<b>Receptive language disorder</b>
<b>Response-to-intervention model (RTI)</b>
<b>Restless legs syndrome</b>
<b>Secondary enuresis</b>
<b>Secondary insomnia</b>
<b>Senile plaques</b>
<b>Sleep cycle</b>



<b>Sleep hygiene education</b>
<b>Sleep restriction therapy</b>
<b>Sleep terrors</b>
<b>Sleepwalking</b>
<b>Sodium oxybate</b>
<b>Specific learning disorder</b>
<b>Specific speech articulation disorder</b>
<b>Speech-sound disorder</b>
<b>Stereotypic movement disorder</b>
<b>Stimulus control therapy</b>
<b>Tic disorders</b>
<b>Tics</b>
<b>Tourette's disorder</b>
<b>Vasopressin</b>

## Chapter 15: Suicide, Ethics, and Law

### Key Terms

<b>Access to care</b>
<b>Altruistic suicide</b>
<b>Anomic suicide</b>
<b>Civil commitment</b>
<b>Cognitive-behavioral therapy for suicide prevention (CBT-SP)</b>
<b>Commitment to treatment statement (CTS)</b>
<b>Competence</b>
<b>Competency to stand trial</b>
<b>Confidentiality</b>
<b>Conflicts of interest</b>
<b>Criminal commitment</b>
<b>Death capitulators</b>
<b>Death chancers</b>
<b>Death darers</b>
<b>Death experimenters</b>
<b>Death hasteners</b>
<b>Death ignorers</b>
<b>Death initiators</b>



<b>Death instinct</b>
<b>Death seekers</b>
<b>Declaration of Helsinki</b>
<b>Diathesis-stress model of suicide</b>
<b>Durham test</b>
<b>Duty to protect</b>
<b>Duty to warn</b>
<b>E-mental health</b>
<b>Eclecticism</b>
<b>Egoistic suicide</b>
<b>Extended commitment</b>
<b>Fatalistic suicide</b>
<b>Fitness to plead</b>
<b>Guilty but mentally ill (GBMI)</b>
<b>Informed consent</b>
<b>Insanity</b>
<b>Insanity defense</b>
<b>Insanity Defense Reform Act (IDRA)</b>
<b>Involuntary outpatient commitment (IOC)</b>
<b>Irresistible impulse test</b>



<b>Life instinct</b>
<b>M’Naghten test</b>
<b>Method restriction</b>
<b>Model penal code test</b>
<b>No-suicide contracts</b>
<b>Nonsuicidal self-injury disorder (NSSI)</b>
<b>Not criminally responsible on account of mental disorder (NCRMD)</b>
<b>Not guilty by reason of insanity (NGBRI)</b>
<b>Nuremburg Code</b>
<b>Parens patriae</b>
<b>Police power</b>
<b>Privilege</b>
<b>Psychache</b>
<b>Public education programs</b>
<b>Right to refuse treatment</b>
<b>Right to treatment</b>
<b>Subintentional death</b>
<b>Suicidal behavior disorder</b>
<b>Suicidal ideation</b>
<b>Suicide</b>



<b>Suicide prevention counseling</b>
<b>Telepsychiatry</b>
<b>Temporary commitment</b>
<b>“Thank you” theory of involuntary commitment</b>
<b>Werther effect</b>
<b>Wild beast test</b>