

Psychology Motivation, Emotion, and Social Behavior Concepts Practice Test (Sample)

Study Guide



Everything you need from our exam experts!

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Table of Contents

Copyright 1

Table of Contents 2

Introduction 3

How to Use This Guide 4

Questions 5

Answers 8

Explanations 10

Next Steps 16

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. Which term refers to a disorder characterized by intrusive memories and nightmares after trauma?**
 - A. OCD**
 - B. Generalized Anxiety Disorder**
 - C. Dissociative Amnesia**
 - D. Post Traumatic Stress Disorder**

- 2. Which drug category is primarily used to treat depression?**
 - A. Antipsychotic Drugs**
 - B. Antianxiety Drugs**
 - C. Antidepressant Drugs**
 - D. Mood Stabilizers**

- 3. Therapy Models which emphasize understanding why a person has developed challenges such as Psychoanalytic and Humanist Models.**
 - A. Insight Therapy**
 - B. Psychotherapy**
 - C. Eclectic Approach**
 - D. Client Centric Therapy**

- 4. Which term names the cognitive interpretation of physiological signals during emotion?**
 - A. Physiological Component of Emotion**
 - B. Cognitive Component of Emotion**
 - C. Behavioral Component of Emotion**
 - D. Polygraph Tests**

- 5. Which neo-Freudian offered a feminist critique of Freud's theory of childhood anxiety due to feelings of helplessness?**
 - A. Karen Horney**
 - B. Alfred Adler**
 - C. Carl Jung**
 - D. Erik Erikson**

- 6. Which defense mechanism involves attributing one's own unacceptable thoughts or impulses to someone else?**
- A. Projection**
 - B. Denial**
 - C. Repression**
 - D. Sublimation**
- 7. A perceived but ultimately nonexistent correlation is known as**
- A. Stereotype**
 - B. In-Group**
 - C. Illusory Correlation**
 - D. Out-Group**
- 8. Which structure operates on the reality principle and defers immediate gratification?**
- A. Id**
 - B. Ego**
 - C. Repression**
 - D. Superego**
- 9. Unconscious attribution of our negative qualities onto others is which defense mechanism?**
- A. Projection**
 - B. Denial**
 - C. Regression**
 - D. Repression**
- 10. Which theory asserts that humans seek an optimal level of arousal?**
- A. Maslow's Hierarchy of Needs**
 - B. Drive Theory of Motivation**
 - C. Arousal Theory of Motivation**
 - D. Incentive Theory of Motivation**

Answers

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1. D
2. C
3. A
4. B
5. A
6. A
7. C
8. B
9. A
10. C

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Explanations

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1. Which term refers to a disorder characterized by intrusive memories and nightmares after trauma?

- A. OCD**
- B. Generalized Anxiety Disorder**
- C. Dissociative Amnesia**
- D. Post Traumatic Stress Disorder**

Intrusion symptoms after a traumatic event define this disorder. After experiencing or witnessing a traumatic incident, people may have persistent, unwanted memories and distressing dreams or nightmares about what happened, sometimes accompanied by flashbacks. These intrusive experiences are a hallmark feature and come with avoidance, negative changes in thinking or mood, and heightened arousal, all causing significant distress or impairment. For a diagnosis, these symptoms must persist for more than a month and markedly interfere with daily life. The other conditions don't fit this trauma-focused pattern. Obsessive-compulsive disorder involves intrusive thoughts and repetitive behaviors not specifically tied to a traumatic event; generalized anxiety disorder is characterized by chronic, excessive worry across many domains rather than trauma-related re-experiencing; and dissociative amnesia concerns gaps in personal memory rather than recurring intrusive memories or nightmares about the trauma.

2. Which drug category is primarily used to treat depression?

- A. Antipsychotic Drugs**
- B. Antianxiety Drugs**
- C. Antidepressant Drugs**
- D. Mood Stabilizers**

Antidepressants are the primary pharmacological approach to treating depression because they work by adjusting the brain chemicals that influence mood, energy, and motivation, particularly serotonin and norepinephrine (and sometimes dopamine). By modulating these neurotransmitters, these medications help alleviate depressive symptoms over several weeks, making them the mainstay of treatment for mood disorders like major depressive disorder. Antipsychotic drugs are mainly used for psychotic conditions such as schizophrenia or for mood disorders with psychotic features, and they're not the general first-line choice for depression itself. Antianxiety drugs reduce anxiety symptoms, which can accompany depression, but they don't target the core mood-regulating processes responsible for depressive symptoms. Mood stabilizers help manage mood swings, especially in bipolar disorder, and are not the standard treatment for unipolar depression.

3. Therapy Models which emphasize understanding why a person has developed challenges such as Psychoanalytic and Humanist Models.

- A. Insight Therapy**
- B. Psychotherapy**
- C. Eclectic Approach**
- D. Client Centric Therapy**

Understanding why a person developed challenges is the hallmark of insight-oriented therapies. Psychoanalytic work and humanistic therapy both aim to increase awareness of internal dynamics—past experiences, unconscious processes, and the meanings a person attaches to them—that contribute to present difficulties. Insight therapy best captures this focus on uncovering causes and motivations, rather than just treating symptoms. A broad label for psychotherapy doesn't specify this emphasis, an eclectic approach blends techniques without a single focus on underlying causes, and client-centered therapy is a specific humanistic method rather than the general category that centers on insight.

4. Which term names the cognitive interpretation of physiological signals during emotion?

- A. Physiological Component of Emotion**
- B. Cognitive Component of Emotion**
- C. Behavioral Component of Emotion**
- D. Polygraph Tests**

Emotions involve how we think about our bodily signals as we experience them. The cognitive interpretation of physiological signals is the cognitive component of emotion. This is the labeling or appraisal process that takes the bodily arousal you feel—like a racing heart or tense muscles—and, based on the context, determines what specific emotion you experience (fear, excitement, anger, etc.). The two-factor idea highlights that you need both the physiological arousal and the cognitive label to experience emotion. For example, the same arousal can feel like fear in a dark alley but like excitement on a roller coaster, depending on how you interpret the situation. The other terms don't fit this concept: the physiological component refers to the bodily arousal itself; the behavioral component to outward expressions and actions; polygraph tests are devices that measure physiological signals, not a type of emotional component.

5. Which neo-Freudian offered a feminist critique of Freud's theory of childhood anxiety due to feelings of helplessness?

- A. Karen Horney**
- B. Alfred Adler**
- C. Carl Jung**
- D. Erik Erikson**

The idea being tested is how early-childhood anxiety and feelings of helplessness were interpreted through a feminist lens by neo-Freudian thinkers. Karen Horney argued that Freud's view of childhood anxiety and female development reflected cultural and social oppression more than biological inevitability. She rejected the notion that women are inherently inferior and criticized Freud's emphasis on penis envy as a biased conclusion born from a male-dominated culture. Instead, Horney proposed that basic anxiety arises from real social conditions—lack of autonomy, power imbalances, and isolation in a hostile world—and that neurotic needs emerge as ways to cope with that anxiety. This reframing shows how childhood feelings of helplessness can be explained by social context and gender roles, not just biology or inherent drives, which is why she is the best answer among the neo-Freudians for offering a feminist critique of Freud's theory of childhood anxiety. The other figures contributed important extensions to psychoanalytic thought—Adler through social interest and inferiority, Jung through archetypes and individuation, Erikson through psychosocial stages—but they did not foreground a feminist critique of childhood anxiety in the same way Horney did.

6. Which defense mechanism involves attributing one's own unacceptable thoughts or impulses to someone else?

- A. Projection**
- B. Denial**
- C. Repression**
- D. Sublimation**

Projection is a defense mechanism in which you attribute your own unacceptable thoughts, feelings, or impulses to someone else. This helps reduce anxiety by seeing your inner conflicts as coming from others rather than from yourself. For example, if you secretly feel jealous toward a coworker, you might accuse that coworker of being jealous of you or of having bad intentions toward you. Similarly, someone who harbors aggressive impulses might insist that others are the aggressors. Denial, by contrast, involves refusing to accept reality; repression pushes unwanted thoughts out of conscious awareness; sublimation channels impulses into socially acceptable activities. If you notice a pattern of consistently labeling others with traits you fear in yourself, that's a clue you might be using projection.

7. A perceived but ultimately nonexistent correlation is known as

- A. Stereotype**
- B. In-Group**
- C. Illusory Correlation**
- D. Out-Group**

Illusory correlation is the tendency to perceive a relationship between two things when no real link exists. Our brains are pattern-seeking, and when two events happen together, especially if one is familiar or memorable, we're likely to infer that they're connected even if the connection is simply a coincidence. This can be reinforced by selective attention and confirmation bias—noticing examples that fit our preconceptions while ignoring those that don't. In social thinking, this shows up as people believing a group is associated with a trait or behavior based on a few striking instances rather than on solid data, leading to biased judgments and stereotypes. Stereotypes describe generalized beliefs about groups, but they're not specifically about a putative relationship between two variables. In-group and out-group terms refer to social categories and biases related to belonging, not to a mistaken perception of a statistical correlation. So the notion of a perceived but nonexistent link best fits illusory correlation.

8. Which structure operates on the reality principle and defers immediate gratification?

- A. Id**
- B. Ego**
- C. Repression**
- D. Superego**

The ego mediates between the impulsive wants of the id and the demands of reality, operating on the reality principle. It defers immediate gratification by weighing long-term outcomes and choosing actions that satisfy needs in realistic, socially acceptable ways. Through planning, problem-solving, and delaying gratification when necessary, the ego helps prevent conflicts and harm. The id, in contrast, seeks instant pleasure; the superego imposes moral rules; and repression is a defense mechanism that pushes unacceptable thoughts out of awareness rather than governing how we handle reality.

9. Unconscious attribution of our negative qualities onto others is which defense mechanism?

- A. Projection**
- B. Denial**
- C. Regression**
- D. Repression**

Projection is a defense mechanism in which you unconsciously attribute your own unacceptable thoughts, feelings, or impulses to someone else. This explains the statement because it describes unacknowledged negative qualities you see in others rather than in yourself, which is precisely how projection operates—shifting those uncomfortable traits outward. It's often automatic, so you might not be aware you're doing it. Denial involves refusing to accept reality, not projecting it onto others. Repression pushes unwanted thoughts out of conscious awareness. Regression is returning to earlier, simpler coping strategies under stress. Each of these processes serves a different way of managing anxiety or internal conflict, but they don't capture the act of labeling your own negative traits as belonging to someone else in the unconscious.

10. Which theory asserts that humans seek an optimal level of arousal?

- A. Maslow's Hierarchy of Needs**
- B. Drive Theory of Motivation**
- C. Arousal Theory of Motivation**
- D. Incentive Theory of Motivation**

Arousal theory explains that people are motivated to achieve an optimal level of arousal, avoiding both under-stimulation and overstimulation. This idea says we seek activities that bring our arousal to a comfortable middle ground, and different individuals have different preferred arousal levels. The famous Yerkes-Dodson relationship helps clarify this: performance tends to improve with arousal up to a point, but becomes worse if arousal is too high. So some people pursue exciting, novel experiences to raise arousal, while others seek calmer, familiar tasks to keep arousal from climbing too high. Other theories describe motivation in different ways: Maslow's hierarchy focuses on fulfilling a progression of needs from basic to higher-level; Drive theory centers on reducing internal physiological tension; Incentive theory emphasizes pursuing external rewards.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://psychmotivationemotionsocialbehavior.examzify.com>

We wish you the very best on your exam journey. You've got this!

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