

Notes

GRE · GRE Subject Test · GRE Psychology

Gre Psychology

Computer-delivered undergraduate GRE Psychology

Approximately 144 multiple-choice items in 120 minutes. Biological, cognitive, social, developmental, clinical, and measurement/methodology/other content. Academic clinical concepts do not replace professional diagnosis.

Official scope: <https://www.ets.org/gre/test-takers/subject-tests/about/content-structure.html>

I · Biological psychology

- Sensation concerns reception of stimulation; perception concerns interpretation. They interact but are not interchangeable.
- Signal detection separates sensitivity from the criterion for saying yes. Expectations can change the response criterion.
- Neurons communicate through electrical signals and synapses. A brain region's involvement does not establish that it acts alone.
- Lesion and imaging studies give different evidence. Consider confounds and the limits of inferring causes from associations.

Checked example

A person expecting an alarm reports more faint sounds as alarms. Hits may rise, but false alarms may also rise. This can reflect a more liberal response criterion rather than better sensory sensitivity.

Common error

A brain image showing activity during a task is not proof that the region alone causes the behaviour.

II · Cognition, language and learning

- Classical conditioning associates stimuli; operant conditioning changes behaviour through consequences.

- Negative reinforcement removes an unpleasant condition and increases behaviour. It is not punishment.
- Working memory supports current processing. Long-term memory includes explicit and implicit forms.
- Language uses phonemes for sound contrasts and morphemes for meaning units. Problem solving can be limited by fixation or biased heuristics.

Checked example

A seat-belt alarm stops when the belt is fastened. Removing the alarm makes fastening more likely: negative reinforcement. If an added fine reduces unsafe driving, that is positive punishment. Positive and negative mean adding and removing, not good and bad.

Common error

Recognition performance cannot be treated as identical to unaided recall performance.

III · Social psychology

- Attribution concerns explanations for behaviour. Situational and dispositional causes should be distinguished.
- Conformity concerns group pressure; obedience concerns an authority's instruction. Both require a clear social context.
- Attitude and behaviour links depend on measurement and situation. A stated intention is not identical to observed action.
- Group research must consider social norms, selection and ethical constraints before generalising its findings.

Checked example

A participant agrees with a group's visibly wrong answer. If the person privately doubts it but complies to avoid rejection, normative influence is a plausible explanation. Accepting the group as a source of information is informational influence.

Common error

Do not infer a person's stable trait from a single constrained action.

IV · Developmental psychology

- Development covers the lifespan and multiple domains, not just childhood milestones.
- Cross-sectional studies compare ages at one time; longitudinal studies follow people over time.
- Cohort effects can confound age comparisons. Longitudinal studies face attrition and repeated-testing effects.
- Theories offer different accounts of change. Apply their specific mechanisms rather than treating a stage label as an explanation.

Checked example

Comparing 20-year-olds and 70-year-olds on computer use cannot isolate age: they had different exposure opportunities. Following one group helps examine change but may lose participants unevenly, creating attrition bias.

Common error

Average developmental patterns do not imply identical timing or outcomes for every person.

V · Personality, clinical and abnormal psychology

- Trait theories describe relatively stable dimensions; other personality theories emphasise learning, cognition or internal dynamics.
- Clinical classification uses patterns, impairment, context and differential explanations. A symptom alone is insufficient.
- Therapies differ in proposed mechanisms. Cognitive approaches examine thoughts; behavioural approaches change learning contingencies.
- Treatment studies need suitable comparison groups and defined outcomes. These lessons teach academic concepts, not self-diagnosis or treatment advice.

Checked example

A therapy group improves after six weeks. Without a comparison, the change may reflect therapy, spontaneous improvement, expectancy or regression toward the mean. Random allocation and an appropriate comparison can improve causal evidence.

Common error

Do not diagnose yourself or classmates from a multiple-choice description. Actual assessment belongs to qualified clinicians.

VI · Measurement, methods, statistics and history

- Reliability concerns consistency; validity concerns evidence supporting a particular interpretation or use.
- Operational definitions specify how a construct is measured. A questionnaire label does not establish construct validity.
- Random assignment improves comparisons; random sampling supports population generalisation. Ethics constrains both design and interpretation.
- A p-value is a probability of data at least as incompatible under the null model, not the probability that the null is true. History questions distinguish explanatory schools and their methods.

Checked example

A memory test yields similar scores on repeated administrations but mostly measures reading skill. It may show test–retest reliability while lacking evidence for its intended memory interpretation. Establishing validity requires more than repeated agreement.

Common error

Statistical significance alone does not tell you effect size, practical value or absence of design bias.

VII · Historical perspectives and psychometric interpretation

- Structuralism analysed conscious experience; functionalism asked how mental activity serves adaptation. Behaviourism emphasised observable learning; Gestalt psychology stressed organised perception. These are historical emphases, not interchangeable labels.
- Psychoanalytic accounts emphasise unconscious conflict, humanistic accounts agency and growth, and cognitive accounts information processing. Compare the explanatory mechanism rather than matching every theory to a single familiar name.
- Reliability concerns consistency across measurements. Validity concerns evidence for a proposed interpretation and use. A high reliability coefficient cannot prove

that a test measures the intended construct fairly.

- Standardisation supplies consistent administration and a relevant reference sample. Norm-referenced standing differs from criterion-referenced mastery. Predictive value depends on base rates as well as sensitivity and specificity.

Checked example

In 1,000 people, suppose 10 have a target condition. A screening tool detects 9 of those 10, but falsely flags 99 of the other 990. Among 108 positive screens, only $9/108 \approx 8.3\%$ are true positives. This is a hypothetical methods example, not a diagnostic recommendation.

Common error

Do not equate sensitivity with the probability that a positive result is correct, and do not use a classroom score to diagnose a disorder.