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LCSW

ASWB Clinical Practice Exam

Exam 6

122 Questions • Two sections of 61

ASWB Clinical exam format from August 3, 2026 • Original practice questions

Values and Ethics 36% • Assessment and Planning 32% • Intervention and Practice 32%

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How to Use This Material

This practice exam has 122 questions in two sections of 61, like the current ASWB Clinical exam, with questions from all three content areas mixed together. Some questions have three options and some have four. Allow 2 hours per section with an optional break between sections, and choose the single BEST answer for every question. Then check your work against the separate answer key, fill in the score sheet at the end of the key, and read every explanation, including for the questions you got right. Log each miss with its question pattern and distractor family (Chapter 2 of the book).

LCSW Practice Exam 6

122 questions • 2 sections of 61 • Answer key and explanations in the separate Answer Key file
Choose the single BEST answer. Allow 2 hours per section.

Section 1 Questions 1-61

1. Ahmed and Samira seek counseling for conflict with their 15-year-old son. Ahmed works outside the home and Samira manages the household, an arrangement both describe as satisfying. In individual screening, Samira reports no fear, control of money, or restrictions on her activities. The social worker, who values egalitarian marriage, feels uneasy about their roles. What should the social worker do?

- **A.** Explore with Samira whether she privately wants more independence in the marriage
- **B.** Introduce information about shared household roles as part of the parenting work they requested
- **C.** Ask the couple how their division of roles affects their son's views of gender
- **D.** Keep the focus on the parenting concerns and examine her own reaction in supervision

2. Mr. Sandoval, 31, is in a drug court program. As a condition of entry, he signed a consent that, under the program's rules, cannot be revoked until he completes drug court and that authorizes the treatment program to report his test results to the court. His urine test this week was positive for methamphetamine. He asks the social worker to "leave it off the report this once." What should the social worker do?

- **A.** Report the result as authorized and discuss how treatment can respond to the relapse
- **B.** Report the result and recommend that the court impose a sanction
- **C.** Leave this result off the report, since a first relapse is an expected part of recovery
- **D.** Ask the judge informally whether a single positive test needs to be reported

3. A social worker at a university counseling center notices she has been giving Kayla, 19, extra session time, answering her emails at night, and feeling protective in a way she does not with other clients. Kayla reminds her of her younger sister, who struggled with an eating disorder. What should the social worker do FIRST?

- **A.** Bring her reactions to clinical supervision
- **B.** Tell Kayla about the resemblance to explain the extra attention
- **C.** Refer Kayla to another counselor to avoid a conflict of interest
- **D.** Set a firm schedule with Kayla and stop answering her emails

4. A supervisor spends part of each weekly meeting role-playing open-ended questions and reflective listening with a new hospice social worker, then assigns a short reading on motivational interviewing. In Kadushin's model, which supervisory function is the supervisor carrying out?

- **A.** Administrative
- **B.** Educational
- **C.** Supportive

5. A social worker is reviewing a client's history of elevated mood. What is the minimum duration required for a hypomanic episode?

- **A.** Seven consecutive days
- **B.** Two consecutive days
- **C.** Four consecutive days

6. A county board asks a senior services agency for evidence that its in-home counseling program reduces depression among homebound older adults. Staff propose mailing a satisfaction survey, noting that last year's ratings averaged 4.8 out of 5. What is the BEST recommendation?

- **A.** Send the survey, since high satisfaction suggests the program helps
- **B.** Give a validated depression measure at intake and at set intervals
- **C.** Interview a few satisfied clients and share their stories with the board
- **D.** Report the number of home visits completed over the past year

7. In a group home, Tyrell, 14, yells and bangs on the office door whenever he is told to turn off his video game. Evening staff usually let him keep playing so the noise stops. The yelling has become more frequent, and so has the evening staff's habit of giving in. Which statement BEST describes the staff's behavior?

- **A.** Giving in is negatively reinforced because it ends Tyrell's yelling
- **B.** Giving in is positively reinforced because Tyrell becomes calm and pleasant
- **C.** Giving in is being punished because the yelling keeps coming back
- **D.** Giving in reflects an extinction burst in the staff's own behavior

8. At his first meeting with the school social worker, Kai, 13, says, "If I tell you something, will you promise not to tell anyone?" He has not yet said what it is. What is the BEST response?

- **A.** Suggest he share it with his parents first and then come back
- **B.** Tell him she cannot promise anything until she knows what it is
- **C.** Explain that most of what he says stays private, but she must tell others if someone is hurting him or he is in danger
- **D.** Promise to keep his secret so he feels safe enough to talk

9. A man calls an inpatient psychiatric unit and asks whether his wife is a patient. At admission, she asked that no one be told she is there. What should the social worker do?

- **A.** Decline to confirm whether she is a patient
- **B.** Put the call through to her room so she can decide
- **C.** Confirm she is there and share no further details, since he is her husband

10. Curtis, 40, tells his solution-focused social worker that on days he takes a short walk at lunch, he argues less with his teenage son in the evening. He mentions in passing that he recently changed jobs. Which response BEST fits the solution-focused approach?

- **A.** "Keep taking the walks, and notice what else is different on those days."
- **B.** "Let's look at what usually sets off the arguments with your son."
- **C.** "What do the arguments remind you of from your own childhood?"
- **D.** "Let's set a goal of having no arguments at all this coming week."

11. A school-based mental health program randomly selects 8 of the district's 30 middle schools and surveys all students in the selected schools about bullying. Which sampling method is this?

- **A.** Cluster sampling
- **B.** Stratified random sampling
- **C.** Purposive sampling

12. At a hospice team meeting, the nurse is called away and asks the social worker to explain a patient's new morphine dosing schedule to the family later that day. The family has questions about side effects. What should the social worker do?

- **A.** Explain the dosing schedule to the family using the written orders in the chart
- **B.** Explain the schedule herself and refer the side-effect questions to the nurse
- **C.** Ask the nurse or physician to answer the family's medication questions

13. Teresa, 38, has video sessions from home for depression. Today she whispers that her husband has started checking her phone and listening outside the door during sessions, and she seems frightened. She says she can take the bus to the clinic on Tuesdays while he is at work. What should the social worker do NEXT?

- **A.** Continue video sessions and agree on a code word she can use if he is listening
- **B.** Switch to phone sessions so there is no video for him to see
- **C.** Move her sessions to in-person visits at the clinic on Tuesdays
- **D.** Ask Teresa to invite her husband to a session to discuss his concerns

14. Ahmed, 36, had bar fights in his twenties and has been sober for three years. Since his divorce he describes intense anger at his ex-wife and says he 'gets why people snap,' but he denies thoughts of harming her, has no weapons, and follows the custody order. The social worker's violence risk formulation is low to moderate. Which plan BEST fits this formulation?

- **A.** Refer him for an emergency psychiatric evaluation because of his history of violence
- **B.** Treat the comment as venting and wait to raise risk unless he makes a threat
- **C.** Continue treatment with an anger plan and direct questions about harm each session
- **D.** Notify his ex-wife that he has expressed anger toward her

15. Trevor, 35, has methamphetamine use disorder and has decided to stop using. His outpatient clinic does urine testing twice a week and has funding for prize-draw incentives. He has a 4-year-old daughter and works nights at a warehouse. Which intervention BEST matches the evidence for his condition?

- **A.** Motivational interviewing to build his readiness to stop using
- **B.** Weekly supportive group counseling as the main treatment
- **C.** Psychodynamic exploration of the reasons he started using
- **D.** Contingency management with prizes for negative urine tests

16. Under a return-to-work agreement with her hospital, Danielle, a registered nurse, must attend sessions with a social worker, who will report to the hospital's employee health office on whether she is participating. At the first session, what should the social worker do FIRST?

- **A.** Explain exactly what will be reported to employee health and get her written authorization
- **B.** Begin the assessment and decide later what is relevant to report
- **C.** Assure Danielle that her sessions are confidential, just as they would be in any other counseling

17. Ray, 50, has alcohol use disorder and has been sober for three weeks in an outpatient program. His wife, Donna, wants to help and is willing to attend sessions; neither reports any violence. Arguments about his drinking are frequent. Which addition to Ray's treatment is BEST supported?

- **A.** Weekly Al-Anon meetings for Donna in place of any joint sessions with Ray
- **B.** Insight-oriented couples therapy to explore the origins of his drinking in their marriage
- **C.** Behavioral couples therapy with a daily sobriety support routine
- **D.** A family intervention in which relatives confront Ray about the harm his drinking caused

18. Yusuf, 35, begins each session by describing his recent accomplishments in detail and watches the social worker closely for a reaction. When she responds with enthusiasm, he brightens; when she seems distracted, he deflates and says the session is pointless. In self psychology, which selfobject need is MOST evident?

- **A.** Mirroring
- **B.** Idealizing
- **C.** Twinship

19. A community mental health social worker posts flyers for a new 10-week anxiety group and receives 14 calls from interested clients. The group's purpose, size, and schedule are set. What should the social worker do NEXT?

- **A.** Enroll the first 10 callers and review the group rules together at the first session
- **B.** Mail each caller a symptom checklist and enroll the 10 with the highest scores
- **C.** Interview each candidate before the group to assess fit and explain its rules
- **D.** Start the group with all 14 and let membership settle naturally after a few weeks

20. Which situation presents a conflict of interest for a social worker?

- **A.** Serving on a hiring panel for a job that a current client has applied for
- **B.** Providing services at two agencies that serve different client populations
- **C.** Consulting a colleague about a client's case with the client's consent
- **D.** Referring a client to a program where the social worker once interned

21. Leah, 26, is in individual therapy for bulimia, and her older sister Rachel has joined three family sessions. After one session, Rachel catches the social worker in the parking lot and asks her to dinner. Leah's treatment is ongoing. What is the BEST response?

- **A.** Accept, since Rachel is not the identified client
- **B.** Accept after Leah's treatment ends, if Rachel is still interested at that point
- **C.** Tell Leah about the invitation and ask how she would feel
- **D.** Decline the invitation clearly and keep her contact with Rachel professional

22. Gideon, 19, has fainted twice during blood draws and for two years has avoided the vaccines his college program requires, because the sight of a needle makes his heart pound and then slow until he feels faint. He has no other fears. What is the MOST likely diagnosis?

- **A.** Panic disorder
- **B.** Illness anxiety disorder
- **C.** Specific phobia, blood-injection-injury type

23. Under the NASW Code of Ethics, a social worker's billing records should:

- **A.** include the full progress note so that insurers can see the clinical details
- **B.** list the supervising clinician on claims for services by supervisees
- **C.** accurately reflect the nature and extent of services and who provided them

24. Calvin, 30, told his social worker that he will run his ex-girlfriend's car off the road after his cousin's party on Saturday. State law requires reasonable efforts to warn an identifiable victim and to notify law enforcement when a client makes a serious threat of physical violence. The worker has notified police and is now calling the ex-girlfriend. Which information should the worker share with her?

A. The nature of the threat, when he said it might happen, and steps she can take to stay safe
B. His diagnosis, treatment history, and recent stressors, so she understands how dangerous he may be
C. A general caution to be careful this weekend, without describing what he said
D. A copy of the session note, so she has his exact words and the full context

25. On a hospital interdisciplinary team, which contribution BEST fits the social worker's role?

A. Recommending changes to the patient's medication schedule
B. Explaining the patient's test results to family members
C. Setting the patient's discharge date based on the medical team's progress notes
D. Psychosocial assessment and coordination of community resources for discharge

26. A home-visiting social worker sees Daniela, 24, nine days after she gave birth. Her husband says she has barely slept in three days. Daniela is confused about the date, says a voice is telling her the baby "is not really hers," and is holding the infant tightly while pacing. What should the social worker do FIRST?

A. Screen her with the Edinburgh Postnatal Depression Scale
B. Normalize her stress and schedule a follow-up visit next week
C. Arrange an emergency psychiatric evaluation for Daniela today
D. Help the couple set up a night feeding schedule so she can sleep

27. Mrs. Oyelaran, 66, has had five weeks of severe depression with insomnia, weight loss, slowed movement, and guilt. She now believes she is being punished for "ruining" her family and hears a voice calling her worthless. Her family says she has not had these beliefs or voices outside this episode, and a depression 10 years ago was not psychotic. Her medical workup is normal. What is the MOST likely diagnosis?

A. Major depressive disorder, recurrent, with psychotic features
B. Schizoaffective disorder, depressive type
C. Delusional disorder
D. Schizophrenia

28. Ahmad, 24, left Afghanistan as a teenager. He says he no longer feels Afghan, avoids his family's community, and has not found a place among his American coworkers either: 'I don't belong anywhere.' In Berry's model, which acculturation strategy does this BEST describe?

A. Assimilation
B. Separation
C. Integration
D. Marginalization

29. A study of a music program will include nursing home residents with moderate dementia who cannot give informed consent. Under the NASW Code of Ethics, what is required?

A. Consent from an appropriate proxy, plus each resident's assent to the extent possible
B. Consent from the nursing home administrator on behalf of all of the participating residents
C. Consent from each resident's physician, who knows the resident's capacity
D. Consent from a family member, with no further involvement of the resident

30. A community mental health agency is revising its intake process to be trauma-informed. Which change BEST reflects the principle of voice and choice?

- **A.** Training all intake staff to recognize common signs of trauma
- **B.** Screening new clients with a standardized trauma history checklist
- **C.** Letting clients choose whether to discuss trauma history at intake
- **D.** Hiring peer support specialists with lived experience of trauma

31. Mr. Takahashi, 74, has a court-appointed guardian of the estate who manages his finances. At a clinic visit, he declines a recommended flu vaccine. His guardian, who is present, says, 'I'm his guardian. I'll sign for it.' What should the social worker do?

- **A.** Ask the physician to give the vaccine, since it is routine, low-risk care
- **B.** Ask the court to expand the guardianship to include health decisions
- **C.** Check the court order; if it covers finances alone, the vaccine decision stays with him
- **D.** Accept the guardian's consent, since a guardian is appointed to represent the ward's interests

32. Rosa, 26, and her social worker are writing a treatment plan for social anxiety that keeps her from speaking in meetings at work. Rosa asks, 'How will we know when I'm done with counseling?' What should the worker include in the plan to answer her question?

- **A.** A set number of sessions based on the agency's usual length of treatment
- **B.** Observable signs, agreed on with Rosa, that will show the goal has been met
- **C.** The worker's judgment at each session about whether Rosa seems ready to end

33. Mr. Delgado, 60, has advanced glaucoma and arrives for his first appointment at an outpatient clinic. The receptionist gave him standard-print consent and privacy forms, and he tells the social worker he cannot read them. What should the social worker do FIRST?

- **A.** Provide the forms in large print or read them aloud, and confirm he understands before he signs
- **B.** Ask his daughter, who came with him and is in the waiting room, to read the forms to him
- **C.** Have him sign the forms now and review the details together at the next session
- **D.** Refer him to low-vision rehabilitation services before continuing with the intake

34. A social worker asks 14-year-old Imani to place each family member in the room to show how close or distant they feel. Imani puts her father by the door facing away, her mother clinging to her brother, and herself in a corner. Which technique is this?

- **A.** Enactment
- **B.** Family sculpting
- **C.** Genogram construction

35. Kendra, 37, will finish five days of medically managed alcohol withdrawal tomorrow. She has agreed to continue in an intensive outpatient program. What should the social worker do before she leaves?

- **A.** Call the program with Kendra present and schedule her intake
- **B.** Encourage her to call the outpatient program when she gets home
- **C.** Give her a list of local outpatient programs and mutual help meetings

36. Which activity is a core task of the termination phase?

- **A.** Introducing a new intervention to address the concerns that remain unresolved
- **B.** Reviewing progress and planning how the client will maintain gains
- **C.** Setting new long-range goals for another contract
- **D.** Completing a full psychosocial history

37. At a first appointment at a county family services office, the Delgado-Hill family sits with arms crossed. The father says, "The school made us come. We handle our own business." The social worker has already noticed that the 16-year-old son appears to hold more power than his parents. Using a structural approach, what should the social worker do FIRST?

- **A.** Acknowledge the father's frustration and respect his role as the family's spokesperson
- **B.** Point out the hierarchy problem and assign the parents a task that puts them in charge of school attendance
- **C.** Ask the family to enact a typical argument about school so the social worker can observe the pattern
- **D.** Reframe the son's behavior as an effort to protect his parents from worry about school

38. A hospital social worker holds a discharge planning meeting for Mr. Kowalski, 84, who is alert and oriented after treatment for pneumonia. His son and daughter answer every question about where he will go after discharge, and Mr. Kowalski sits quietly. What should the social worker do NEXT?

- **A.** Ask his son and daughter to wait outside so he can speak freely
- **B.** Accept the children's plan, since they know his home situation best
- **C.** Ask Mr. Kowalski directly what he wants for his discharge

39. During a meeting about a denied housing application, Mr. Vance, 38, slams his fist on the desk, stands, steps toward the social worker, and says, 'Fix this today or you'll regret it.' The office door is behind the worker. He has no known history of violence. What should the social worker do FIRST?

- **A.** Reflect his frustration about the denial and ask what upset him most
- **B.** Lower her voice and invite him to sit so they can review the decision together
- **C.** Set a firm limit that he must sit down or the meeting will end
- **D.** End the meeting, leave the office, and alert security per agency protocol

40. Leticia, 42, has bipolar I disorder and uses cocaine on weekends. She is in an integrated dual-disorders program, takes her mood stabilizer, and says her cocaine use "isn't a problem" and she has no plans to change it. Her mood has been stable for three months. Which approach BEST fits integrated treatment at this point?

- **A.** Pause her psychiatric services until she agrees to an abstinence goal for cocaine
- **B.** Keep her psychiatric care going and use motivational strategies about cocaine
- **C.** Refer her to a separate substance use program so the team can focus on her bipolar disorder
- **D.** Begin relapse prevention skills for cocaine so she is prepared when she decides to stop

41. Devin, 19, is referred to a college counseling center because he keeps falling asleep in class and was written up for dozing during a work shift. He sleeps eight hours a night, but several times a day he has sudden, irresistible sleep attacks. When he laughs hard, his knees buckle and his jaw goes slack for a few seconds, though he stays aware. He denies low mood. Which diagnosis is MOST likely?

- **A.** Major depressive disorder with atypical features
- **B.** Narcolepsy
- **C.** Insomnia disorder
- **D.** Obstructive sleep apnea hypopnea

42. A social worker's pregnancy becomes visible to her clients. This is BEST described as:

- **A.** a boundary crossing that she should report to her supervisor
- **B.** an unavoidable self-disclosure that may need to be discussed with clients
- **C.** a deliberate self-disclosure that requires each client's consent
- **D.** a personal matter she should leave unmentioned unless a client raises it first

43. Over the past three weeks, Mateo, 15, has snapped at his family nearly every day, stopped going to soccer practice because "nothing is fun," slept until noon and napped after school, and said he is tired all the time and cannot focus on homework. He had no history of temper problems before this month, and his pediatrician found no medical problem. His parents also mention he recently got braces. What is the MOST likely diagnosis?

A. Persistent depressive disorder
B. Disruptive mood dysregulation disorder
C. Major depressive disorder

44. Two years after her son died, Delphine, 54, has started volunteering at the youth soccer league he loved and keeps his jersey framed in her office. She is dating again and says, "He's part of how I live now, not a weight I carry." In Worden's model, Delphine's statement BEST reflects which task?

A. Finding an enduring connection while going on with life
B. Accepting the reality of the loss
C. Processing the pain of grief

45. Annika, 44, has taken lorazepam three times a day for four years. In session she says she is tired of "depending on pills" and plans to stop all of it this weekend while her kids are at their father's. She has not told her prescriber. What is the BEST response?

A. Support her decision and help her plan coping skills to use over the weekend
B. Explore her feelings about dependence on medication before going into the details of her plan
C. Explain the withdrawal risk of stopping suddenly and help her plan a taper with her prescriber
D. Suggest she cut her dose in half this weekend rather than stopping all at once

46. A residential addiction program offers a private practice social worker $500 for each client she refers who is admitted. She would provide no services as part of the referral. What does the NASW Code of Ethics say about this arrangement?

A. It is acceptable if she tells clients about the payment before referring them
B. It is prohibited because she would be paid for a referral without providing a service
C. It is acceptable if the payments are reported as income by her practice
D. It is acceptable if the program is the best available clinical fit for each client she refers

47. A social worker at a rural Alaska Native health clinic finds a well-designed randomized trial showing that a parenting program reduced child behavior problems. The trial enrolled urban, mostly English-speaking families recruited through a university. She is deciding whether to recommend the program to a family she serves. What should she weigh MOST during appraisal?

A. Whether the trial used a large enough sample to reach statistical significance
B. How closely the trial's participants and setting resemble the family she serves
C. Whether the trial appeared in a peer-reviewed journal with a high citation rate
D. Whether the trial's authors reported financial ties to the program's developers

48. A family therapist works with the Morales family, who have an open child protective services case for neglect. Today, 9-year-old Diego shows her a fresh bruise on his cheek and says his father hit him last night. The family's CPS caseworker will attend a team meeting next week. State law requires reporting suspected abuse. What should the therapist do?

A. Document the bruise and monitor for further injuries
B. Leave a voicemail for the caseworker, since CPS is already involved
C. Report the new incident to the child abuse hotline today
D. Tell the CPS caseworker about the bruise at next week's meeting

49. In the first sessions of interpersonal psychotherapy with Aaron, 34, the social worker reviews each important person in his life, what he gets from the relationship, what he would like to change, and how the relationship relates to his depression. Which IPT technique is this?

- **A.** Interpersonal inventory
- **B.** Ecomap
- **C.** Genogram

50. In the Ethical Principles Screen, which principle ranks immediately below autonomy and freedom?

- **A.** Quality of life
- **B.** Least harm
- **C.** Equality and inequality
- **D.** Truthfulness and full disclosure

51. A social worker at a refugee resettlement agency has just finished a session in which Samuel, 38, described being tortured in detention. The professional Tigrinya interpreter, who has worked with the agency for years, is pale and quiet after Samuel leaves and says, 'That one was hard.' Samuel's next session is in a week. What should the social worker do FIRST?

- **A.** Thank the interpreter and confirm the time for next week's session
- **B.** Debrief briefly with the interpreter in private and offer support resources
- **C.** Request a different interpreter for Samuel's future sessions
- **D.** Ask the interpreter about Samuel's cultural background to plan next week's session

52. When using a HEEADSSS-style psychosocial interview with an adolescent, why does the social worker usually begin with home and school before asking about drugs, sexuality, and suicide?

- **A.** Home and school problems are the most common cause of adolescent distress
- **B.** Parents usually want school information reported to them first
- **C.** Sensitive topics are left out unless the teen raises them
- **D.** Starting with less sensitive areas builds rapport before harder questions

53. In the minority stress model, which is an example of a proximal stressor?

- **A.** Being denied an apartment because of one's identity
- **B.** Experiencing a physical assault motivated by prejudice against one's group
- **C.** Expecting rejection and staying on guard in new settings
- **D.** Losing a job after coworkers learn about one's identity

54. A private practice social worker uses a brief session rating scale at the end of each session to monitor the therapeutic alliance. Corinne, 38, who usually rates sessions highly, gives today's session her lowest rating, without comment. What should the social worker do NEXT?

- **A.** Ask Corinne what about today's session did not fit for her
- **B.** Note the rating and see whether it improves next session
- **C.** Explain that low ratings are common and usually pass
- **D.** Shift the next session to a more structured, skills-based approach

55. Mrs. Lim, 42, lives with her husband, their two teenagers, and her parents, a multigenerational household that is her family's tradition. She calls her mother several times a day from work, and the family makes major decisions together at Sunday dinner. She seeks help because her 17-year-old son is failing classes and says he wants "some space to figure out what I want." Which approach is BEST?

- **A.** Identify the family as enmeshed and begin boundary work to separate the grandparents from the parental subsystem
- **B.** Recommend that the son start individual therapy so he can differentiate from the family's expectations
- **C.** Assess how the family's closeness works for each member, starting with the son's wish for space
- **D.** Coach Mrs. Lim to cut back her daily calls to her mother as a first step toward clearer boundaries

56. A home-based therapist tells her clinical director that her agency laptop, which holds client records, was stolen from her car last night. The laptop was password protected but not encrypted. What should the director do FIRST?

- **A.** File a police report and wait to see whether the laptop is recovered
- **B.** Send letters to all clients on the therapist's caseload explaining the theft right away
- **C.** Notify the privacy or security officer to begin the HIPAA breach assessment
- **D.** Remind staff in writing not to leave agency laptops in their cars

57. Ms. Herrera, 47, tells her social worker that her apartment has had black mold for months and her landlord ignores her requests. The worker offers to help her file a complaint with the city housing inspector. Ms. Herrera declines, saying she fears the landlord will raise her rent or refuse to renew her lease. She lives alone, and the mold has not affected her health. What should the social worker do?

- **A.** Respect her decision, explain tenant protections against retaliation, and offer to revisit it
- **B.** File the complaint without naming her, since the conditions likely affect other tenants as well
- **C.** Encourage her to file now, explaining that landlord retaliation is against the law in most places
- **D.** Contact a local tenant union about the building's conditions without identifying her

58. Mr. Ibrahim, 52, an asylum seeker in counseling for depression, asks his social worker whether he should mention his depression at his upcoming asylum hearing and whether doing so could hurt his case. He does not yet have a lawyer. What is the BEST response?

- **A.** Advise him to mention it, since evidence of trauma can support an asylum claim
- **B.** Advise him to leave it out, since a mental health diagnosis could raise concerns
- **C.** Offer to write a letter describing his depression for him to bring to the hearing
- **D.** Explain that it is a legal question and connect him with an immigration attorney

59. Parents take away their 15-year-old's phone for the weekend each time he comes home after curfew. Over two months, his late arrivals decrease. Which operant procedure does this describe?

- **A.** Negative reinforcement
- **B.** Positive punishment
- **C.** Negative punishment
- **D.** Extinction

60. A social worker in private practice wants to offer reduced fees. Which approach BEST reflects an ethical sliding-scale policy?

- **A.** Reduced fees for the clients the worker judges to be most motivated for change
- **B.** Written income and household-size criteria applied consistently to all clients
- **C.** Reduced fees decided case by case as clients request them
- **D.** Reduced fees for clients who agree to fewer sessions per month

61. Which description BEST distinguishes cultural humility from a traditional cultural competence approach?

- **A.** It treats the client as the expert on their culture and calls for ongoing self-critique about power
- **B.** It asks the worker to master a defined body of knowledge about the beliefs of each group the agency serves
- **C.** It sets cultural factors aside so that each client is assessed against the same objective standards
- **D.** It relies on matching clients with workers who share their racial or ethnic background

Section 2 Questions 62-122

62. After a workplace argument, a city transit agency requires Renata, 46, a bus driver, to complete counseling before she returns to duty. In the second session she agrees with every suggestion and asks, 'How soon can you clear me?' What is the BEST response?

- **A.** Point out that agreeing with everything suggests she is not yet taking the process seriously
- **B.** Give her the return-to-duty criteria and tell her to focus on meeting them
- **C.** Acknowledge that returning to work matters and ask what else she wants from the sessions

63. Dominic, 33, injects methamphetamine several times a week and says he sometimes shares needles with his roommate. He says he is not interested in stopping right now. What is the MOST appropriate next step?

- **A.** Explain that the agency can offer services once he is ready to commit to abstinence
- **B.** Link him to a syringe services program for sterile supplies and HIV and hepatitis C testing
- **C.** Refer him to residential treatment, since injection drug use calls for a higher level of care
- **D.** Focus on exploring his ambivalence and wait to discuss needle use until he raises it

64. A school team reduced 8-year-old Omar's calling out in class by having his teacher ignore call-outs and praise raised hands. After three weeks with almost no call-outs, Omar returns from winter break and calls out several times on the first day. What is this MOST likely?

- **A.** An extinction burst
- **B.** Spontaneous recovery
- **C.** Stimulus generalization
- **D.** Failure of the intervention

65. Sophie, a therapist at an outpatient clinic, has been assigned 15 new clients this month on top of a full caseload. She has started postponing safety follow-ups and cutting sessions short. What should Sophie do FIRST?

- **A.** Stop accepting new clients on her own until her caseload has gone back down
- **B.** Continue as assigned and work extra hours each week to catch up
- **C.** Contact some clients to suggest they seek therapy elsewhere
- **D.** Tell her supervisor how the caseload is affecting care and ask for review

66. Rosalind, 41, is admitted to a psychiatric unit after three days of no sleep, nonstop pressured speech, and wandering the highway shoulder at night to "direct traffic with her mind." Her family says she had a depressive episode two years ago and no other episodes. Her urine drug screen and blood work are normal, and she takes no medications. What is the MOST likely diagnosis?

- **A.** Bipolar I disorder
- **B.** Bipolar II disorder
- **C.** Brief psychotic disorder
- **D.** Other specified bipolar and related disorder

67. Gabriel promised himself he would study for his licensing exam but went to a concert instead. Afterward he felt intensely guilty and berated himself for being 'weak.' In Freud's structural model, the guilt comes from which part of the personality?

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

68. Ash, 24, is nonbinary, uses they/them pronouns, and seeks counseling for stress about finishing a graduate thesis. Ash says, "I'm comfortable with who I am. I'm not interested in hormones or surgery." A social work intern asks whether Ash's chart should include a diagnosis of gender dysphoria. What is the BEST answer?

- **A.** Yes, because Ash's gender identity differs from the sex they were assigned at birth
- **B.** Yes, as a provisional diagnosis until a complete gender history has been gathered
- **C.** No, because the diagnosis requires distress or impairment tied to gender incongruence
- **D.** No, because the DSM-5-TR diagnosis applies to people who identify as the other binary gender

69. A social worker is running a research focus group with parents of children in foster care. During the consent process, what should she tell participants about confidentiality?

- **A.** Their names will appear in the report unless they ask to be anonymous
- **B.** What is said in the group is legally privileged and cannot be disclosed
- **C.** Confidentiality rules do not apply here because no clinical services are being provided
- **D.** She will protect their information but cannot control what other participants repeat

70. A home visiting social worker assesses Leo, 14 months. His mother, who works rotating night shifts and is being treated for depression, is warm on some days and withdrawn on others. Leo clings to her, becomes very upset at brief separations, and when she returns he reaches for her, then kicks and pushes away and stays upset for a long time. Which attachment pattern does this MOST suggest?

- **A.** Insecure-resistant (ambivalent)
- **B.** Disorganized
- **C.** Secure
- **D.** Insecure-avoidant

71. A social worker leads an eight-week support group for caregivers of people with dementia. Which focus is BEST for the final session?

- **A.** Introduce a new stress-reduction technique members can try at home
- **B.** Help members plan a reunion so the group can keep meeting informally after the program ends
- **C.** Spend most of the time on the members who are still struggling
- **D.** Members review what they gained, plan how to use it, and share feelings about ending

72. An outpatient program uses vouchers to reward Gabe, 31, for each stimulant-negative urine screen. After eight weeks of consistently negative screens, the team wants his abstinence to hold up once the vouchers end. Which adjustment is BEST supported by learning principles?

- **A.** Keep rewarding each negative screen until discharge, then stop the vouchers
- **B.** Stop the vouchers now, since eight weeks of abstinence shows the habit is set
- **C.** Switch to rewarding group attendance instead of negative screens
- **D.** Shift gradually to intermittent rewards while building natural reinforcers

73. A social worker in private practice is part-owner of a residential substance use program. Her client, Tobias, 35, needs residential treatment. Her program is a strong clinical fit, and two other programs in the region also fit his needs and accept his insurance. What is the BEST course of action?

- **A.** Disclose her ownership, present all three programs, and support his choice
- **B.** Refer Tobias to her program, since it is the strongest clinical fit for his needs
- **C.** Refer Tobias to one of the other programs to avoid any conflict
- **D.** Present all three programs without mentioning her ownership

74. A clinical supervisor at a large agency oversees eight supervisees and worries about her liability for their work. Which practice would MOST reduce her risk while also improving client care?

- **A.** Having supervisees sign statements that accept full responsibility for their own cases
- **B.** Limiting her review to the cases that supervisees choose to bring to supervision
- **C.** Purchasing additional malpractice coverage that names each of her supervisees
- **D.** Meeting regularly, knowing each supervisee's high-risk cases, and documenting guidance

75. Mr. Ibarra, 84, is ready for discharge after a stroke and needs two-person help for transfers. He and his wife, Lucía, 81, want him to come home. Lucía has severe arthritis in her hands and told the nurse privately that she is 'scared I'll drop him.' The team is planning a home discharge with home health visits three times a week. What should the social worker do NEXT?

- **A.** Meet with Lucía to assess her capacity and wishes, then share findings with the team
- **B.** Arrange for the physical therapist to teach Lucía transfer techniques before discharge
- **C.** Recommend skilled nursing placement to the team
- **D.** Proceed with the home discharge, since the couple has chosen it

76. A community clinic intake form for Jerome, 39, covers his presenting symptoms, mental status, psychiatric history, family relationships, employment, housing, faith community, and legal history. He mentions he has had headaches and trouble sleeping since starting a new blood pressure medication. Which domain of the biopsychosocial-spiritual assessment is MOST underdeveloped?

- **A.** Social, because his friendships are not listed
- **B.** Biological, because his health and medications are not covered
- **C.** Spiritual, because the meaning of his faith is not explored

77. While building a genogram with Farah, 42, a social worker reaches Farah's father. Farah becomes quiet and says, "We haven't spoken in nine years. I don't want to get into it." The genogram is meant to explore the family context of her depression. Which response is BEST?

- **A.** Mark the cutoff on the genogram, note it, and let her decide when to return to it
- **B.** Gently explain that the relationship may be central to her depression and ask more
- **C.** Leave her father off the genogram to avoid causing her distress
- **D.** Ask whether other relatives could give information about her father instead

78. Omari, 22, has been seeing a White social worker at a college counseling center for three months. He recently joined the Black Student Union, is reading intensively about Black history, and says he is 'tired of explaining myself to White people,' including in therapy. He asks whether he can see a Black counselor, and one has openings. What should the social worker do NEXT?

- **A.** Explore whether the request reflects anger at the worker that could be worked through in therapy
- **B.** Support the request and arrange a warm transfer to the Black counselor
- **C.** Explain that changing counselors midstream could set back the progress he has made

79. At a busy community clinic, Dr. Okafor, an LCSW, co-signs about 150 notes a week written by unlicensed staff so the agency can bill for them. She rarely reads the notes and meets with the staff as a group once a month. An auditor asks what her signature means. Which answer is MOST accurate?

- **A.** It indicates she reviewed the documented services and accepts responsibility
- **B.** It confirms that the notes were completed by the agency's deadline
- **C.** It shows the staff member, rather than she, holds clinical responsibility
- **D.** It is an administrative formality that payers do not rely on when paying claims

80. A utilization reviewer denies authorization for further sessions for Ms. Abara, who has PTSD. She has improved but still has nightmares several nights a week and avoids public transit, which she needs to get to work. The social worker believes continued treatment is needed. What should the social worker do FIRST?

- **A.** Tell Ms. Abara that her treatment will end and begin planning termination with her
- **B.** Offer to see Ms. Abara at no charge until her symptoms resolve
- **C.** Request a peer-to-peer review or appeal, citing her documented symptoms

81. Mr. Sandoval, 63, will be discharged tomorrow after a heart attack. While reviewing his plan, he tells the hospital social worker that his insurance plan denied coverage for one of his new heart medications and he cannot afford it. What should the social worker do NEXT?

- **A.** Suggest he take half doses of the medication to make it last
- **B.** Tell him to work out the coverage issue with his pharmacy once he is discharged home
- **C.** Inform the team and help find a covered alternative or an assistance program
- **D.** Ask the physician to delay discharge until coverage is approved

82. An employee assistance program social worker sees Dmitri, 39, after his supervisor referred him for conflicts with coworkers. Dmitri signed a release allowing the EAP to confirm to his employer that he is attending sessions. The supervisor calls and asks what Dmitri has said about the conflicts. What is the BEST response?

- **A.** Decline to confirm anything, including his attendance
- **B.** Agree to send an update once Dmitri signs a broader release
- **C.** Share a brief summary of the sessions, since the employer made the referral
- **D.** Confirm that he is attending and decline to discuss what he has said

83. A social worker coaches a parent to say, "After you finish your math homework, you can play your video game." This arrangement uses a more preferred activity to reinforce a less preferred one. What is this principle called?

- **A.** Negative reinforcement
- **B.** The Premack principle
- **C.** Shaping

84. Jaxon, 38, moved across the country after college and has not spoken with his parents in nine years. He tells a telehealth social worker, "They don't affect me anymore." When his mother emails about his grandfather's illness, he cannot sleep for days and starts a fight with his partner. This pattern is BEST described as:

- **A.** high differentiation of self
- **B.** detriangling
- **C.** emotional cutoff
- **D.** disengagement

85. Sokha, 16, is referred to a school social worker for conflict with her parents, who survived the Khmer Rouge period before resettling in the United States. They rarely talk about their past, will not let her attend evening events, and check on her constantly. Sokha calls them "paranoid." What is the BEST approach?

- **A.** Encourage her parents to describe their trauma in family sessions so Sokha can understand them
- **B.** Help the family see how past experiences may shape the parents' protectiveness, at their pace
- **C.** Coach Sokha to assert her independence and set firmer limits with her parents
- **D.** Refer her parents for a PTSD evaluation based on their history and behavior

86. Ines, 30, describes two separate stretches in the past year, each lasting about a week, when she slept four hours a night without fatigue, talked faster, and took on extra projects; friends noticed, but her work did not suffer and she was not hospitalized. She has not had a period of depression lasting more than a few days, and she has no other mood symptoms between these stretches. Her drug screen and thyroid tests are normal. What is the MOST likely diagnosis?

- **A.** Cyclothymic disorder
- **B.** Other specified bipolar and related disorder
- **C.** Bipolar I disorder, most recent episode hypomanic
- **D.** Bipolar II disorder

87. Nine months after his wife's death, Gerald, 58, reports two months of depressed mood most of the day, loss of interest in everything including his grandchildren, early-morning waking, a 15-pound weight loss, and a persistent sense that he is worthless "in every way." He has passive thoughts of death. What is the MOST accurate diagnostic consideration?

- **A.** Normal bereavement, since his symptoms fall within the first year after a death
- **B.** Prolonged grief disorder, since his grief has lasted more than six months
- **C.** Major depressive disorder, which can be diagnosed in the context of bereavement

88. Valentina, 39, has been in treatment for major depressive disorder for eight weeks at a community clinic. Her social worker wants a brief, repeatable way to track whether her symptoms are improving. Which approach BEST fits this purpose?

- **A.** Repeat the full structured diagnostic interview at regular intervals throughout treatment
- **B.** Ask her at each session whether she feels better or worse overall
- **C.** Have her complete the PHQ-9 at regular intervals and review the scores with her
- **D.** Administer the MMSE monthly to track her concentration problems

89. Since his wife's death eight months ago, Hamid, 67, has been learning to pay the bills, cook simple meals, and manage the household calendar, all tasks his wife used to handle. He tells his social worker he feels clumsy but is "getting there." In Worden's model, which task is he MOST actively working on?

- **A.** Accepting the reality of the loss
- **B.** Processing the pain of grief
- **C.** Finding an enduring connection with the deceased
- **D.** Adjusting to a world without the deceased

90. A social worker who is an out lesbian notices that she keeps encouraging Jun, 31, a gay client, to come out at his engineering firm. Jun has said several times that he is comfortable keeping his personal life private at work and came to therapy for help with panic attacks. What should the social worker do NEXT?

- **A.** Share her own coming-out story so Jun can weigh the benefits of disclosure
- **B.** Raise the pattern in consultation and refocus sessions on Jun's goals for his panic
- **C.** Continue the encouragement, since concealing identity is linked to higher stress
- **D.** Refer Jun to an LGBTQ support group where he can hear others' coming-out experiences

91. Ms. Abara, 58, has schizophrenia that has been stable for years. After her physician explains a colonoscopy, she declines it, saying she is afraid of sedation and would rather do the stool-based screening test he also described. She can explain the trade-offs in her own words. The physician asks the social worker whether her refusal should be accepted. What is the BEST response?

- **A.** Her diagnosis warrants a formal capacity evaluation before her refusal of the colonoscopy is accepted
- **B.** She shows capacity for this decision, so her choice of the stool test should be supported
- **C.** Her psychiatrist should be asked to encourage her to have the colonoscopy
- **D.** Her sister should be asked to make the decision, since she helps with appointments

92. Which finding in a 14-year-old is MOST consistent with typical adolescent development?

- **A.** Withdrawing from friends and losing interest in activities he used to enjoy
- **B.** Spending more time with friends and arguing more with parents about rules and privacy
- **C.** Frequent intense conflict with parents that includes physical fights

93. Krystal, 61, became depressed three months after retiring from 30 years of teaching. She says she no longer knows who she is without her classroom and has lost touch with former colleagues. Her social worker is using interpersonal psychotherapy. Which IPT problem area BEST fits her depression?

- **A.** Grief
- **B.** Role dispute
- **C.** Interpersonal deficits
- **D.** Role transition

94. A client with schizophrenia speaks in a monotone, shows almost no facial expression, and does not change expression whether describing his brother's wedding or his dog's death. Which term BEST describes this affect?

- **A.** Restricted
- **B.** Labile
- **C.** Incongruent
- **D.** Flat

95. During a substance use assessment, Colette, 50, says she takes prescribed oxycodone for back pain and recently started taking her sister's alprazolam at night to sleep, often with a glass of wine. She came in asking for help with sleep. What should the social worker do FIRST?

- **A.** Screen her for depression as a possible cause of her trouble sleeping at night
- **B.** Teach sleep hygiene strategies she can begin tonight
- **C.** Explain the overdose risk of this mix and, with consent, inform her prescriber
- **D.** Advise her to stop the alprazolam and the wine starting today

96. Ingrid, 50, has had chronic low back pain for three years after a documented disc injury. She spends several hours a day researching her pain, is convinced it signals a disabling condition despite stable imaging, has gone to the emergency department eight times this year, and has stopped seeing friends because she must "save her energy." What is the MOST likely diagnosis?

- **A.** Somatic symptom disorder
- **B.** Factitious disorder imposed on self
- **C.** Illness anxiety disorder
- **D.** Functional neurological symptom disorder

97. A social worker at a small nonprofit wants to text clients appointment reminders. The agency has no secure texting platform, and she plans to use her personal cell phone. What is the BEST course of action?

- **A.** Use her personal phone and delete each text after sending it to protect privacy
- **B.** Seek an agency-approved method and get clients' informed consent to its risks
- **C.** Use her personal phone for clients who have agreed to texting

98. Over the past two years, Callum, 30, has gradually stopped working, rarely bathes, and speaks in a vague, empty way, according to his mother. For the last five months he has heard voices commenting on him and has spoken in loosely connected sentences that are hard to follow. He has had no mood episodes, and his drug screens and medical workup are negative. What is the MOST likely diagnosis?

- **A.** Delusional disorder
- **B.** Schizophreniform disorder
- **C.** Schizotypal personality disorder
- **D.** Schizophrenia

99. Testifying under subpoena in a custody hearing, a social worker is asked by opposing counsel what her client said in therapy about his drinking. The client has not waived privilege. She tells the court the information is privileged. The judge rules that the privilege does not apply here and directs her to answer. What should she do?

- **A.** Ask for a recess so she can obtain the client's written consent first
- **B.** Decline to answer in order to protect the client's confidentiality
- **C.** Answer the question, limiting her response to what was asked
- **D.** Answer, and offer her full notes so the court has complete context

100. A social worker at a tribal health clinic serves a community where many people are related by kinship. Her first cousin, whom she sees at family dinners most weeks, asks to begin counseling with her for anxiety. Another clinician at the clinic has openings and is well regarded in the community. What is the BEST response?

- **A.** Begin services, since kinship overlap is expected in tribal communities
- **B.** Begin services and limit contact at family gatherings during treatment
- **C.** Refer her cousin to the other clinician at the clinic
- **D.** Begin services and consult with a supervisor if problems develop

101. Amara, 41, says that when her siblings argue about their father's care, she either agrees with whoever spoke last or gets so upset she leaves the call. She says she can't tell what she actually thinks until everyone stops talking. In Bowen family systems theory, Amara's pattern MOST reflects:

- **A.** Emotional cutoff
- **B.** Low differentiation of self
- **C.** Triangulation
- **D.** Disengagement

102. A social worker is about to begin a first session with a client who speaks Tigrinya, using an in-person professional interpreter. Which step BEST prepares for the session?

- **A.** Ask the interpreter to summarize the client's answers so the session moves efficiently
- **B.** Ask the interpreter to share background about the client's culture during the session
- **C.** Brief the interpreter on purpose, confidentiality and interpreting everything said
- **D.** Give the interpreter the client's full case file to review before the session

103. At a well-baby visit, a pediatric social worker is asked to see the parents of Aria, 3 months old, who has a bruise on her cheek and another on her ear. Her father says she 'rolled into the crib rails.' She cannot yet roll over. State law requires reporting reasonable suspicion of child abuse. What should the social worker do?

- **A.** Report to CPS and support a medical workup for other injuries
- **B.** Document the father's explanation and schedule a recheck next week
- **C.** Teach the parents safe-sleep practices and how to childproof the crib

104. A community mental health team is choosing an approach to violence risk assessment. Which approach is generally considered MOST accurate?

- **A.** A single self-report question about intent to harm others
- **B.** Structured professional judgment combining known risk factors with clinical judgment
- **C.** Review of the client's diagnosis, since serious mental illness strongly predicts violence
- **D.** Unstructured clinical judgment based on the interviewer's experience

105. During an intake, Mr. Haskins says, "I'm fine, really," while his eyes fill with tears, his voice is quiet, and he looks down for most of the interview. How should the social worker record mood and affect in the mental status exam?

- **A.** Mood: depressed (worker's view); affect: congruent with mood
- **B.** Mood: "fine" (his words); affect: euthymic and appropriate
- **C.** Mood: tearful and sad (observed); affect: reported as fine by the client
- **D.** Mood: "fine" (his words); affect: tearful, incongruent with mood

106. Gwen, a respected social worker nearing retirement at a hospice, has double-booked families three times this month, called a client by a deceased patient's name, and missed a medication-related care conference. A colleague who shares her office has noticed all of it. What should the colleague do FIRST?

- **A.** Ask the families whether they have noticed any problems with the care Gwen has provided
- **B.** Quietly take over Gwen's scheduling so that families are not affected
- **C.** Tell the hospice director that Gwen may be developing dementia
- **D.** Speak privately with Gwen about the changes and encourage her to get an evaluation

107. A woman carrying a newborn walks into a rural hospital's emergency department and tells the social worker she cannot care for him and wants to leave him there. She will not give her name. The baby appears about four days old and unharmed. State law allows a parent to leave an unharmed infant up to 30 days old with hospital staff without prosecution for abandonment and without giving identifying information. What should the social worker do FIRST?

- **A.** Explain that the hospital needs her name and address before it can accept the infant
- **B.** Accept the infant under the law and offer her an optional family medical history form
- **C.** Ask security to keep her in the department until child protective services arrives
- **D.** Encourage her to take the baby home tonight and come back tomorrow to discuss options

108. The working alliance is commonly described as having three parts: agreement on the goals of the work, agreement on the tasks used to reach them, and which third part?

- **A.** An emotional bond of trust between client and worker
- **B.** A shared schedule for how often and how long sessions will run
- **C.** The worker's chosen theoretical orientation
- **D.** The client's stage of readiness for change

109. A supervisor rates a charismatic, well-liked supervisee highly in all areas of an evaluation, including documentation, even though her notes are often late. Which rating error does this BEST illustrate?

- **A.** Halo effect
- **B.** Central tendency
- **C.** Recency effect

110. Lorena, 38, meets criteria for a current major depressive episode. During the same two weeks she has also had racing thoughts, talked much more than usual, and started several risky projects, though she sleeps about seven hours and her mood is sad rather than elevated. These features have not been numerous or long enough to meet criteria for a hypomanic episode. Which specifier BEST fits her current episode?

- **A.** With melancholic features
- **B.** With mixed features
- **C.** With anxious distress
- **D.** With atypical features

111. Lorna, 41, has been seeing a social worker for grief. This week she is talking fast, sleeping three hours a night, and feels "wired." She mentions that her rheumatologist started her on high-dose prednisone eight days ago. She has no history of mania. What should the social worker do FIRST?

- **A.** Assess for bipolar disorder using a structured mania interview
- **B.** With her consent, contact the prescriber about the new symptoms
- **C.** Suggest she hold the prednisone until she can see her rheumatologist
- **D.** Teach sleep hygiene strategies to help her get more rest

112. Ngozi, a social worker, facilitates weekly interdisciplinary rounds on a rehabilitation unit. A senior physician tends to speak for most of each meeting, and the occupational therapist and nurse rarely share their input. What is the BEST way for Ngozi to improve the meetings?

- **A.** Ask the physician privately to speak less during rounds
- **B.** Send a summary after rounds so others can add comments by email
- **C.** Use a structured agenda that asks each discipline to report on each patient
- **D.** Let the physician lead, since medical decisions drive most rehabilitation plans

113. A client receiving home health services after hip surgery tells the social worker, "I feel like a burden to my son, so I must be one." Which cognitive distortion does this statement show?

- **A.** Should statements
- **B.** Emotional reasoning
- **C.** Mind reading

114. A social worker is gathering a history from Ruby, 5, about when her nightmares started. Which approach is MOST likely to give an accurate sense of timing?

- **A.** Link the question to events she remembers, such as her birthday or a holiday
- **B.** Ask her how many weeks ago the nightmares first started
- **C.** Show her a calendar and ask her to point to the month when the bad dreams began
- **D.** Skip the question with Ruby and ask her parent for the date instead

115. A social worker in private practice realizes he is attracted to a client, Ms. Ortega, 38, and looks forward to her sessions more than others. He has not acted on it, and she has shown no interest in him. What is the BEST course of action?

- **A.** Tell Ms. Ortega about his feelings so that the therapeutic relationship stays open and transparent
- **B.** Seek supervision or consultation about the feelings and monitor their effect on treatment
- **C.** End treatment and refer Ms. Ortega to prevent a boundary violation

116. Samira, 28, developed depressed mood, insomnia, poor appetite, guilt, and trouble concentrating during her seventh month of pregnancy. The symptoms have continued nearly every day, and she is now two weeks postpartum. Which specifier BEST applies to her major depressive episode?

- **A.** With melancholic features
- **B.** With atypical features
- **C.** With seasonal pattern
- **D.** With peripartum onset

117. Under state law, a serious threat of violence that a client's immediate family member reports to the clinician creates the same duty to warn as a threat the client makes directly. The mother of Wes, 24, a client, calls his social worker to say Wes told her tonight that he will kill his ex-girlfriend's new boyfriend and has taken his father's shotgun. What should the worker do?

- **A.** Tell the mother to call the police, since Wes did not make the threat in session
- **B.** Document the call, as a secondhand report does not create a duty
- **C.** Call Wes to schedule an urgent session before deciding anything
- **D.** Make reasonable efforts to warn the boyfriend and notify law enforcement

118. Mr. Haugen, 47, the principal of the town's high school, starts counseling at the town's single mental health clinic, which sits on Main Street. He worries that people will recognize his truck in the clinic lot and assume he is "falling apart." What is the BEST response by the social worker?

- **A.** Reassure him that confidentiality laws protect his information
- **B.** Refer him to a clinic in the next county, where he is less likely to be recognized by people
- **C.** Discuss options with him, such as video sessions from home or less visible appointment times

119. Jalen, 30, has bipolar I disorder. While well, he completed a psychiatric advance directive naming a preferred hospital, listing a medication that helped him, and naming his partner as his agent. He is now in a manic episode, and the crisis team finds he lacks capacity for treatment decisions. His mother wants him taken to a different hospital near her. What should the social worker do?

- **A.** Support his mother's choice of hospital, since she will be most involved in his care
- **B.** Share the directive with the crisis team and advocate following it with his partner
- **C.** Wait for Jalen to regain capacity before making any treatment decisions
- **D.** Ask Jalen which hospital he prefers now, since he is still able to state a clear choice

120. Midway through a closed group for parents in a child welfare reunification program, a member tells the leader that another member posted on social media about "a mom in my group" with enough detail that she could be identified. The member who posted has otherwise participated well. What is the BEST next step?

- **A.** Remove the member who posted from the group, since she broke the group's confidentiality agreement
- **B.** Ask the member who posted to remove it, then revisit the confidentiality norm with the group
- **C.** Report the posting to the family's child welfare caseworker so it can be noted in the case record
- **D.** Wait to see whether the identified member raises it, to avoid embarrassing anyone in the group

121. A therapist at a neighborhood clinic notices that many of her clients describe anxiety and poor sleep linked to frequent shootings near their homes. A coalition of churches, schools, and a tenants' group in the neighborhood is already working on violence prevention. Which action BEST addresses the pattern beyond individual treatment?

- **A.** Connect with the existing coalition while continuing treatment
- **B.** Refer affected clients to a trauma specialist across town
- **C.** Start a new campaign on her own to press the city for more policing
- **D.** Expand her individual therapy hours to see more affected clients

122. A social worker is the only mental health provider in a remote county. Gary, 60, asks for help with gambling that has drained his savings. The worker has no training in gambling disorder. The nearest specialist is 200 miles away, and Gary has no reliable internet for video sessions. What is the BEST course of action?

- **A.** Refer Gary to the specialist 200 miles away
- **B.** Decline to treat Gary, since gambling disorder is outside her competence
- **C.** Treat Gary using the methods she uses for other addictions
- **D.** Treat Gary while getting training and consultation on gambling disorder