SUMMIT
STUDY GUIDES

LMSW

ASWB Masters Practice Exam

Exam 2

Answer Key & Explanations

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

Values and Ethics 35% • Assessment and Planning 33% • 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 Masters 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 the SEARCH rung and distractor family (Chapter 2 of the book).

LMSW Practice Exam 2: Answer Key

The best answer for each question, why it fits, why each alternative is weaker, and the chapter to review.

Section 1 Answers 1-61

1. A Ask for the court's emancipation order before relying on it

When a minor's authority to consent depends on emancipation, the worker should see the court order before relying on it; the client's statement alone is not proof. Aaliyah is not in crisis, so asking for the order first carries little cost. Accepting her statement and having her sign could leave services without valid consent if she is mistaken. Beginning services and noting that emancipation is unverified documents the gap without fixing it. Contacting her parents to check discloses that she is seeking counseling, which she may have good reasons to keep private, and they may not be the right source for a court record.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

2. B Help Amara rank the four goals and set first steps she can reach this month

When a client brings several ambitious goals at once, the worker helps her set priorities and break them into reachable first steps, keeping her in charge of the order. Ranking the goals with Amara and setting this month's steps does that. Assigning 90-day time frames to all four sounds realistic but is the worker's decision and still loads four goals at once. Building the plan around court-ordered steps would fit if the court had set requirements, but none exist yet. Updating the safety plan comes first when danger is current, but she finished one last week and has had no contact from her former partner.

Assessment, Diagnosis & Planning · Review: Chapter 13

3. C Help her secure housing changes or supports that let her get out again

The life model holds that many problems arise when the environment no longer fits a person's capacities, and it treats changing the environment as a legitimate target. Ms. Adeyemi's isolation follows from stairs she can no longer manage, so finding a ground-floor unit, a stairlift, escorts or other supports restores her ability to reach the world. Challenging her belief about being useless treats a mismatch with her housing as a thinking error. A depression screening may be worthwhile, but it addresses mood rather than the fit. A phone group eases loneliness while leaving her still confined to her apartment.

Intervention Methods & Practice Settings · Review: Chapter 15

4. C Negative punishment

Punishment decreases a behavior, and negative punishment does so by removing something the person values after the behavior. Losing tablet time follows hitting, and hitting decreases. Negative reinforcement is a frequent mix-up: it removes something unpleasant to increase a behavior, so it cannot explain a drop in hitting. Extinction also decreases behavior, but by withholding the reinforcer that used to follow it, such as no longer giving attention for a tantrum, rather than by taking away an unrelated privilege. Positive punishment would add something unpleasant, such as a lecture, rather than remove a privilege.

Intervention Methods & Practice Settings · Review: Chapter 15

5. A Identifiable client information is kept outside the agency's secure system.

The problem is where the information is kept: the Code requires reasonable steps to protect the security of client records and identifiable information. A home notebook with clients' names and session details sits outside the agency's safeguards. De-identification is expected when consulting people outside the agency, but his supervisor already has legitimate access to his cases, so using names in supervision is not the issue. Personal reflections prepared for supervision are not ordinarily part of the record that clients can request, so client access is not the main concern either.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

6. C Working with the district to revise its suspension policy for all schools

Macro practice targets organizations, communities and policies, producing change for many people at once. Working with the district on its suspension policy changes conditions for every student in every school, which is what the supervisor wants more of. Leading a social skills group for six students is mezzo practice with a small group. Counseling a student about her parents' separation is micro practice. Planning classroom supports with a teacher looks like systems work because it involves another professional, but its target is one student's functioning, so it remains micro-level work.

Intervention Methods & Practice Settings · Review: Chapter 18

7. C Progressive muscle relaxation to lower his physical arousal

Anger has cognitive, behavioral and physiological parts, and the technique should match the part that is driving the problem. Paulo's remaining difficulty is bodily: muscle tension and a racing heart that build over the day and leave him easily set off. Progressive muscle relaxation lowers that physical arousal. Cognitive restructuring is the right tool when angry interpretations drive outbursts, and he has already learned it with good results. Assertiveness training helps clients who hold back or express needs aggressively, and he already states his needs calmly. Neither addresses the physical tension he describes.

Intervention Methods & Practice Settings · Review: Chapter 17

8. B Help him submit a request to health information management and offer to discuss it

Patients have a right to see their records, and in a hospital that right is exercised through the designated process, which here is health information management. Helping Lorenzo submit the request honors both his right and hospital policy, and offering to discuss the assessment supports his understanding. Showing it on her screen today is responsive but bypasses the required process. A verbal summary is helpful information but does not give him the access he asked for.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

9. C Include tasks for both, such as a fixed curfew and set consequences

Family contracts work best when tasks are reciprocal and address what each member contributes to the conflict. Imani's complaint that the rules keep changing points to a task for her father, keeping the curfew fixed, alongside her own. Coaching communication first would fit a family that could not talk without escalating, but they are discussing it calmly. Meeting with Imani alone again repeats a step already taken last week. A rules-and-privileges contract can suit a young child, but for a teenager it ignores the father's part in the pattern.

Assessment, Diagnosis & Planning · Review: Chapter 13

10. B Nominal group technique

The nominal group technique is a structured face-to-face process: members generate ideas silently, share them in round-robin order without debate, clarify them together, and rank them privately. It keeps dominant voices from steering the group, and the worker's steps match it closely. The Delphi technique also gathers and ranks ideas, but participants respond in rounds of questionnaires without meeting face to face. A focus group is a guided open discussion used to explore views in depth; it has no silent writing or formal private ranking.

Assessment, Diagnosis & Planning · Review: Chapter 11

11. D Help her plan what to say and offer to go with her to see the principal

Empowerment-oriented advocacy supports clients in speaking for themselves, adding only the help they need to do it. Halima wants to raise the issue with the principal herself but is nervous, so helping her prepare and offering to go with her builds her capacity while respecting her choice. Calling the principal for her may get results but takes over a task she wants to do. Joining the parent council is a sound path for collective change, but it is slower and is not the direct conversation she has chosen. A volunteer translator solves her immediate problem but leaves the school's practice unchanged for her and other families.

Intervention Methods & Practice Settings · Review: Chapter 18

12. D Scarcity from the eviction is taxing his attention and memory

Research on scarcity shows that severe financial stress consumes mental bandwidth, reducing attention, planning and memory for other tasks; missed appointments and forms often reflect this load, not lack of caring. Marcus faces eviction while working two jobs, and his difficulties began in this context. Avoidance due to feeling judged does not fit, since he values the school's help. Depression can impair concentration, but he sleeps well and enjoys time with his son. An attention disorder would show a lifelong pattern, and he has no such history.

Human Development, Behavior & Trauma · Review: Chapter 8

13. A Name the tension and ask members to discuss how they want the group to run

Conflict over control and challenges to the leader mark the storming stage, and the leader helps the group move forward by naming the conflict and involving members in shaping how the group works. Asking members to discuss how they want the group to run turns the conflict into norm-building. Restating agreements is useful structure, but continuing the agenda leaves the challenge unaddressed. Letting members work it out alone can suit a mature group, but a third-meeting group needs the leader's help. Talking privately with critics fits a single disruptive member, yet here the tension involves the whole group and belongs in the group.

Intervention Methods & Practice Settings · Review: Chapter 16

14. C Stimulant-induced psychotic disorder, which usually clears with abstinence

When psychosis appears during or soon after heavy stimulant use in a person with no prior history, a substance-induced psychotic disorder is the most likely explanation, and the course during abstinence helps confirm it. Tyrell's symptoms began during a methamphetamine binge after a period of doing well. Schizophrenia does often begin in the early twenties, but it requires symptoms over at least six months and cannot be diagnosed when a substance explains the picture. Bipolar mania would need a mood episode not caused by drug use. Brief psychotic disorder also excludes symptoms caused by a substance.

Human Development, Behavior & Trauma · Review: Chapter 8

15. A Plan for him to join coworkers on a break and record what actually happens

When a client accepts the evidence intellectually but still feels the belief is true, a behavioral experiment lets him gather new evidence through direct experience. Hyun-woo has already done weeks of thought records, so more of the same is unlikely to shift the belief. The downward arrow finds the core belief under an automatic thought, but they identified that belief last month. Relaxation helps a client whose avoidance is driven by anxiety, and he denies feeling anxious in the break room. Planning a break with coworkers and recording what happens tests his prediction against reality and addresses the avoidance that keeps the belief alive.

Intervention Methods & Practice Settings · Review: Chapter 15

16. A Explain exactly what the program reports to the board and what it does not

Members of a mandated group have a right to understand exactly what information leaves the group and to whom, so they can choose what to share. The worker spells out what goes to the board. Describing confidentiality with a safety exception is accurate for many groups, but it omits the reporting arrangement that matters most here. Referring him to his parole officer passes along a question the program can answer. Advising caution respects his choice, yet without the facts he cannot make an informed one.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

17. A When the study's value justifies it, no other approach would work and review boards approve

The Code permits research without full disclosure only when it is justified by the study's prospective scientific, educational or applied value, when equally effective procedures that avoid deception are not feasible, and after appropriate institutional review; participants must then be debriefed. Telling participants they can withdraw is required in all research and does not justify deception. Minimal risk and anonymous data are protections, but they do not address the need for deception or the lack of alternatives. Reporting only summary results protects privacy but is unrelated to whether deceiving participants is warranted.

Research, Evaluation, Supervision & Administration · Review: Chapter 19

18. B Help her state the bill problem and her goal for it in concrete terms

Structured problem solving proceeds in order: identify problems, choose one, define it concretely with a goal, generate options, choose and act, then review. Abena has listed her problems and picked the electric bill, so the next step is to define that problem and her goal in specific terms, such as the amount owed and the shutoff date. Listing every problem has already been done. Brainstorming comes after the problem is clearly defined, because vague problems produce vague options. Choosing an action comes after options are generated and weighed, so it is two steps ahead of where they are.

Intervention Methods & Practice Settings · Review: Chapter 17

19. C private speech that he uses to plan and direct his own actions

Vygotsky viewed a young child's talking aloud during tasks as private speech, a tool for planning and regulating behavior that later becomes silent inner speech; it tends to increase when tasks are challenging. Kenji's comments direct his puzzle moves, which fits this view. Piaget called the same behavior egocentric speech and saw it as a sign of limited perspective taking that fades with socialization, but the question asks for Vygotsky's perspective. Describing it as an anxiety-coping habit adds a problem that nothing in the vignette suggests; Kenji's speech is task-focused, not distressed.

Human Development, Behavior & Trauma · Review: Chapter 8

20. A Explain that the aim is to learn her own view, so no answer is wrong

The CFI begins by framing the interview as a way to understand the person's own perspective, which is especially important when a client worries about giving the 'correct' answer. Elena's repeated questions show she is treating the interview like a test, so explaining that the aim is to learn her view and no answer is wrong addresses what is blocking her. Offering an interpreter is a sound step when language may be limiting a client, but Elena speaks fluent English. Starting with her country, faith and background gathers useful information, but it does not ease her concern and moves to categories before she feels free to speak.

Assessment, Diagnosis & Planning · Review: Chapter 11

21. B Work with Esperanza and her mother on child care options and a schedule that lets her attend

When absences come from a family's practical constraint and both parent and student want attendance, the least intrusive effective response is problem solving with the family: exploring subsidized child care, Head Start or pre-K for the younger children, and schedule changes so Esperanza can attend. A formal truancy conference fits families who are not engaging with the school, but this family is cooperative and the cause is already known, so it adds pressure without solving the child care gap. Online credit recovery suits a student who must be home, but Esperanza wants to attend school, and it would keep her in the caregiving role.

Intervention Methods & Practice Settings · Review: Chapter 16

22. A Ask him to rate his readiness from 0 to 10 and explain his number

The right tool depends on what is being measured and how much time is available. A readiness ruler, asking for a 0 to 10 rating and the reason behind it, measures readiness in a minute and invites the client to voice his own motivation. The AUDIT is a brief, valid tool, but it measures how risky the drinking is, not readiness to change. A longer stages of change questionnaire does measure readiness, but it takes too long for a few-minute visit and is less conversational.

Assessment, Diagnosis & Planning · Review: Chapter 11

23. A A stress reaction to the deployment and the changes it brought at home

Children of deployed parents commonly show irritability, clinginess, and acting out as stress reactions to the separation and to changed family routines. Ethan's change began with the deployment, followed an easygoing history, and comes with repeated questions about his father's return, which points to a stress reaction. Normal limit testing would not explain such a sharp change tied to a specific event. Learning behavior from new classmates is a social-learning explanation the facts do not support. Separation anxiety disorder requires fear of separation that is excessive for his developmental level, while Ethan's worry is an expectable response to a real, prolonged separation, and nothing suggests excessive fear about his mother.

Diversity, Equity & Social Justice · Review: Chapter 7

24. A Revisit the plan with Olumide to reflect his new caregiving role

Service plans are working agreements that should be revised with the client when circumstances change. Olumide's new caregiving role changes his priorities and capacity, so the case manager reassesses with him and rewrites the plan together, which might add caregiver supports, change job-search timelines or both. Keeping the employment goals and adding respite looks supportive, but it decides for him that employment stays primary. Pausing the plan leaves him without help at a stressful time, when services such as caregiver supports may be most needed.

Assessment, Diagnosis & Planning · Review: Chapter 13

25. B Use guided questions to help her weigh the evidence for and against the thought

In Beck's approach, a newly identified automatic thought is usually examined first through guided discovery, with Socratic questions about the evidence, before it is tested in action. Bianca believes the thought strongly and cannot yet imagine speaking up, so weighing the evidence in session is the fitting next step. A behavioral experiment is a powerful way to test the thought, but planning one now asks her to act before her belief has loosened. The downward arrow technique is legitimate for reaching core beliefs, but it is usually used after work on the surface thought, not as the next step here.

Intervention Methods & Practice Settings · Review: Chapter 15

26. C Stereotype threat

Stereotype threat is the drop in performance that occurs when people fear confirming a negative stereotype about their group in a setting where the stereotype is made relevant. The same students scored lower only when the test was framed as measuring innate ability, so the framing, not the students, produced the gap. Intersectionality describes how combined identities create distinct experiences, but it does not explain a gap that appears and disappears with test framing. Internalized oppression is the lasting acceptance of negative beliefs about one's group, which would not vanish when the label changed. Double jeopardy is an additive model of disadvantage from two marginalized statuses.

Diversity, Equity & Social Justice · Review: Chapter 7

27. A It flags anxiety symptoms whose cause needs fuller assessment

A screening score identifies symptoms that need further evaluation; it does not establish their cause. Tariq's anxiety began three weeks ago with exam stress and heavy caffeine use, so the score calls for assessing those factors. A provisional diagnosis of generalized anxiety disorder is not supported, because that diagnosis requires about six months of excessive worry, and caffeine-related anxiety must be considered. Setting the result aside until he cuts back discards useful information; the symptoms are real and should be assessed now, with caffeine as one possible cause.

Assessment, Diagnosis & Planning · Review: Chapter 11

28. A Cyclothymic disorder

Cyclothymic disorder involves at least two years in adults of numerous periods with hypomanic symptoms and numerous periods with depressive symptoms that never meet full criteria for a hypomanic or major depressive episode. Ethan's three-year pattern fits. Bipolar II disorder requires at least one full hypomanic episode and one full major depressive episode, which he has not had. Borderline personality disorder includes mood instability, but those shifts usually last hours and are tied to interpersonal events, along with fear of abandonment, identity disturbance and impulsivity not described here.

Human Development, Behavior & Trauma · Review: Chapter 8

29. D Describe the relevant facts, leaving out details that would identify him

Consultation should share only the information needed for the question, and de-identified consultation does not require client consent. Describing the relevant facts without identifying details gets expert advice now. Seeking consent and sending the full record protects his rights but shares far more than the question needs. Consulting only within the agency keeps information close, but it gives up the specialized expertise the case calls for. Waiting for a release is necessary only when identifying information must be shared, so it delays advice for no reason.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

30. B Stay calm and neutral and ask each partner about his own part in the pattern

Bowen therapy depends on the therapist staying out of the couple's emotional triangle, remaining calm and asking process questions that help each partner think about his own part. When each partner tries to recruit her, a neutral stance with questions to each keeps her detriangled. Offering her view to reach a compromise may seem helpful, but it draws her into the triangle the couple is trying to form. Having partners talk directly to each other is an enactment from structural therapy; Bowen therapists usually have partners speak to the therapist to lower reactivity.

Intervention Methods & Practice Settings · Review: Chapter 16

31. A What feeling like a burden means to him in his family's culture

When a client raises a concern during the CFI, the next step is to explore its meaning in his own cultural and family frame. Abebe says he feels like a burden to his son, so asking what that means to him within his family and culture follows his lead. Prolonged grief disorder requires at least 12 months since the death in adults, and his loss was eight months ago. More meals would address a practical need, but the church already brings food and Abebe did not raise meals as a problem. His son's family's view may be gathered later with consent, but it should not replace Abebe's own account.

Assessment, Diagnosis & Planning · Review: Chapter 11

32. B An intensive outpatient or partial hospital program

Level of care should match the client's risk and functioning, using the least restrictive setting that is enough. Hannah's depression is worsening despite weekly therapy, but she has no plan or intent, has secured her firearm, and has a supportive partner, so an intensive outpatient or partial hospital program adds structure without hospitalization. Weekly therapy with an updated safety plan would be right if she were improving, but three months have not been enough. Inpatient admission is for imminent risk or inability to stay safe, which the facts do not show.

Assessment, Diagnosis & Planning · Review: Chapter 13

33. C Bring her documented concerns to the board of directors, which oversees the director

Internal reporting should go to a body with authority over the person involved, and in a nonprofit the board of directors oversees the executive director. Bringing documented concerns to the board uses the internal route that can actually correct the problem. Raising it directly with the director sounds like the respectful first step used with colleagues, but here the director is the source of the wrongdoing and controls all staff, so the concern may be dismissed and evidence lost. Reporting to the federal funder first skips an internal channel that can still act. Gathering coworker signatures spreads unverified accusations and delays action.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

34. C Arrange a qualified ASL interpreter at no cost to Mr. Nguyen

Under the ADA, public agencies must provide effective communication, which for a Deaf ASL user in a detailed assessment generally means a qualified interpreter at no cost; minor children may interpret only in an emergency. Arranging a qualified ASL interpreter meets that duty. Asking whether he wants his daughter to interpret sounds respectful, but the rules bar relying on a minor in a scheduled, non-emergency meeting, and it exposes her to private family information. Written notes may work for brief exchanges, but they are not effective for a complex eligibility assessment, especially when English is not his primary language.

Diversity, Equity & Social Justice · Review: Chapter 7

35. A Explore her reactions to the family and agree on limits for after-hours contact

When a supervisee overidentifies with clients, the supervisor helps her understand the reaction and set sustainable limits, since the behavior will return if its source is ignored. Exploring the identification and agreeing on after-hours limits addresses both the cause and the boundary problem. Reassigning the family would cost them the only caseworker who speaks their language; it fits only if limits fail or harm is occurring. A work-hours rule controls one behavior but leaves the identification that drove the late nights unexamined, so it is likely to show up in another form.

Research, Evaluation, Supervision & Administration · Review: Chapter 19

36. B Meet with Keisha and her family to learn what is behind the pattern of absences

Assessment comes before intervention, and a Monday and Friday pattern in a previously successful student may reflect caregiving duties, a weekend custody arrangement, substance use, conflict or other problems that only Keisha and her family can explain. Filing a truancy referral is a later step, and district policy requires a family meeting first. An attendance contract is a reasonable intervention once the cause is known, but it may miss the real problem. Asking teachers about changes gathers useful collateral information, but it is secondary to hearing directly from Keisha and her family.

Intervention Methods & Practice Settings · Review: Chapter 18

37. D Becoming one's own man near the end of settling down

Levinson described a late phase of the settling down period, roughly ages 36 to 40, called becoming one's own man, when the person seeks independence, authority and recognition and often breaks from a mentor who now feels constraining. Kwame's age and his push to stop answering to a former champion fit this phase. Generativity is Erikson's concept of guiding the next generation, which is not what Kwame describes. The midlife transition comes slightly later and involves broader questioning of the life structure. Entering the adult world occurs in the twenties when a first structure is built.

Human Development, Behavior & Trauma · Review: Chapter 8

38. C Document who is being turned away and ask leadership to revise the address rule

When a social worker believes an agency policy is unjust, the Code supports working to change it through appropriate channels, starting within the agency and with evidence of its effects. Documenting who is turned away and asking leadership to revise the rule addresses the cause and gives decision makers a chance to fix it. Referring people to other pantries meets immediate needs but leaves the barrier in place. Filing a complaint with the state oversight agency may become appropriate if leadership refuses, but it skips the internal step. Consulting a legal aid attorney could support later advocacy, yet it delays raising a problem leadership may readily correct.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

39. A Tie each note's assessment to the specific goals in the client's service plan.

Progress notes should show how services relate to the agreed goals so the record supports continuity and evaluation. Tying each note's assessment to the specific plan goals addresses exactly what the reviewer found missing. A standardized symptom score is useful measurement, but his clients' goals concern housing, employment, and family contact, so symptom scores would not show progress on them. A DAP format reorganizes the note without requiring any link to goals. The client's own description of progress adds a valuable perspective but still leaves the worker's assessment of each goal unstated.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

40. C Break down the reports by source and decision point to see where gaps arise

Before recommending a fix for a disparity, an evaluator needs to know where in the process it arises. The finding rests on a raw count, so analyzing reports by source and by each decision point, such as screening, investigation, and substantiation, shows whether the gap comes from the hospital's reporting, the agency's own decisions, or both. Presenting the findings to the hospital and requesting a joint review is a sensible partnership step once the analysis supports it. Bias training assumes a cause not yet shown. A family advisory group is valuable for designing the response but cannot locate the disparity in the data.

Diversity, Equity & Social Justice · Review: Chapter 7

41. A Help her schedule set times on weekends for calls with her sister.

In behavioral activation, monitoring data guide activity scheduling: activities linked to better mood are planned at specific times, especially during low periods. Scheduling weekend calls with her sister builds directly on what the records show. Asking her to give up phone use in bed entirely is a sweeping restriction that removes something without adding a rewarding replacement, and it is harder to sustain than adding a positive activity. Exploring her feelings about her sister sounds careful and may matter later, but it turns the session away from the concrete plan the data support.

Intervention Methods & Practice Settings · Review: Chapter 17

42. D Grounded theory

Grounded theory develops a theory of a process directly from the data, using ongoing comparison of new interviews with earlier ones, and suits topics where little existing theory applies. The LMSW wants to explain how youth make a decision, which is a process. Phenomenology would describe what the experience of aging out feels like rather than explain how the decision unfolds. A quasi-experimental design tests an intervention's effect with comparison groups and does not build theory from interviews. A narrative case study explores one or a few life stories in depth rather than building a general explanation.

Research, Evaluation, Supervision & Administration · Review: Chapter 19

43. C Help him identify the major problems and the events that set off the crisis

Roberts' model moves in order: assess lethality, establish rapport, identify the major problems including the precipitating event, deal with feelings and emotions, generate and explore alternatives, develop an action plan, and follow up. With safety assessed and rapport established, the third stage, identifying the major problems and what triggered the crisis, comes next. Exploring feelings with validation is stage four, which follows once the problems are defined. Generating alternatives is stage five and depends on knowing which problems to address. Developing an action plan is stage six and would be premature before the problems and options are clear.

Intervention Methods & Practice Settings · Review: Chapter 17

44. D Contact the program officer to ask whether early intervention qualifies

When a funder's guidelines are unclear, the first step is to clarify fit with the program officer before investing in a proposal or deciding not to apply. The guidelines are ambiguous about early intervention and there is a month before the deadline, so contacting the program officer comes first. Submitting with a section linking treatment to prevention risks a mismatch that clarification could prevent. Redesigning a component may be right later, but it commits resources before knowing what qualifies. Skipping the cycle may be premature if early intervention turns out to be eligible.

Intervention Methods & Practice Settings · Review: Chapter 14

45. C Earning recognition, status, and respect from others for one's accomplishments

Maslow's esteem level includes both self-respect and the respect and recognition of others. Paulo's wish to be recognized for his skill and feel proud of his work fits this level. His housing and income cover physiological and safety needs, and his relationships cover belonging, so his current focus is the next level up. Self-actualization describes realizing one's potential and acting from inner values, a growth motive that is less dependent on others' approval. A stable, threat-free environment describes safety needs, which Paulo already has met. Identifying which needs are satisfied shows which level is now driving his goals.

Human Development, Behavior & Trauma · Review: Chapter 8

46. C Raise the terms at the next team meeting and propose using person-first language

Dignity and worth of the person calls for respectful treatment of clients, including in how they are described, and concerns about colleagues' practice are usually raised first with those colleagues. Because the team discusses practice at its meetings, Leila can raise the language directly where it occurs. Asking the director for a documentation policy is a reasonable later step if discussion does not change the practice, but it goes over the team's head first. Modeling person-first language herself is good practice but leaves the demeaning terms in use in meetings and in records participants may read.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

47. D Explain his limited training and ask about training or co-leading

Social workers practice within their competence and build new skills through training, consultation and supervision before working independently. Olumide should tell his supervisor about his limited training and ask about training or co-leading with the experienced DBT clinician. A published manual is a useful tool but does not replace training and supervised practice. Declining outright would fit if no route to competence existed, but here a co-leader is available. Leading first and training afterward exposes group members to a model he is not yet prepared to deliver.

Research, Evaluation, Supervision & Administration · Review: Chapter 19

48. D Linking him to home health and transportation services

An ecomap guides planning by showing strengths to build on and gaps to fill. Mr. Okafor has no ties to home health or transportation, and he will need both, so linking him to those services fills the clearest gaps. Asking his son for help would fit a supportive relationship, but this one is stressful. Church rides draw on a real strength but cover only transportation, not care at home. A rehabilitation stay would fit someone who cannot yet manage at home, which the physician has not indicated.

Assessment, Diagnosis & Planning · Review: Chapter 11

49. C A vertical stressor

Carter and McGoldrick distinguish vertical stressors, the patterns, legacies, secrets, and burdens passed down through generations, such as repeated cutoffs, from horizontal stressors that move through time with the family. Horizontal stressors include predictable developmental transitions and unpredictable events such as sudden job loss, which is the father's horizontal stressor here. Calling the cutoffs a horizontal developmental stressor confuses an inherited pattern with a normal life cycle transition. A first-order change is a change within the system's existing rules, a concept about how families change, not a type of stressor. Anxiety rises most when horizontal stress hits a family already carrying vertical stress.

Human Development, Behavior & Trauma · Review: Chapter 9

50. C Adjusting to a world without the deceased

Worden's third task, adjusting to a world without the deceased, includes external adjustments such as taking on roles and skills the person used to handle, as well as internal and spiritual adjustments. Tomás has acknowledged the death and has been grieving, but he now has to manage finances and parenting tasks his wife performed, so this task is central. Accepting the reality of the loss is the first task, which he has already done. Processing the pain of grief is the second, and he describes having grieved deeply. Finding an enduring connection is the fourth. Practical help with new roles is grief work under this task.

Human Development, Behavior & Trauma · Review: Chapter 8

51. D Ask what knowing the answer would mean to her before deciding to share.

Before answering a personal question, a worker considers what the question means to the client and whether disclosure would serve her. Mei Lin asked right after voicing fear of being judged, so exploring what the answer would mean to her addresses that fear directly and informs any decision to disclose. Saying yes and returning to her worries can be acceptable when the question is simple curiosity, but here it skips the concern driving it. Declining to share sets a boundary, yet it may confirm her fear of judgment. Describing how the worker coped shifts focus to the worker's story.

Intervention Methods & Practice Settings · Review: Chapter 17

52. D It met her need, but he should have sought an exception openly

Social workers advocate for clients within agencies by seeking exceptions and policy changes openly, not by bending rules in secret. Hamid correctly saw that Ofelia should not be sent out after surgery, and the director can approve exceptions, so he should have sought one openly. The Code does not simply rank client need above agency rules; it asks workers to work to change harmful policies. Calling secret rule-bending professional discretion ignores that it bypasses accountability and leaves other residents unprotected. Requiring Ofelia to follow the rule now would punish her for his choice and ignore a real medical need.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

53. C Choose members who share the loss but differ in how they are coping

Support groups work best with homogeneity on the shared problem and some heterogeneity in coping and resources, so members identify with one another and can also learn from different approaches. All referrals share recent widowhood but cope in different ways, which is a useful mix. Matching members by point in grief sounds sensible, but grief is not linear and such matching is neither reliable nor needed. Choosing members with widely different losses weakens the common bond that makes a support group work.

Intervention Methods & Practice Settings · Review: Chapter 16

54. A A difficult life transition and traumatic life event

Germain and Gitterman identified three kinds of life stressors: difficult life transitions and traumatic life events, environmental pressures, and dysfunctional interpersonal processes in families and groups. A new diagnosis of a chronic illness that forces a change in work and identity is a difficult transition and a traumatic event. Environmental pressures come from unresponsive organizations, networks or physical settings, which may arise later if his workplace or housing does not adapt. Nothing suggests problems in his relationships. A developmental crisis tied to a life stage is Erikson's framing; the life model folds developmental changes into life transitions, and Bao's diagnosis is not tied to his life stage.

Intervention Methods & Practice Settings · Review: Chapter 15

55. D Decline, since recently bereaved families are vulnerable to undue influence

The Code bars soliciting testimonials from people who, because of their circumstances, are vulnerable to undue influence, and families in early grief who are still receiving bereavement support are such people. Ji-ho should decline and can suggest other ways to describe the program. Promising no consequences does not remove the pressure of being asked by one's support provider. Asking to use survey comments is soliciting consent to use earlier statements as testimonials, which the standard also covers. Targeting high raters is still solicitation, just more selective.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

56. C Whistleblowing

Whistleblowing is reporting serious wrongdoing within an organization, such as fraud, abuse, or danger to clients, to people or bodies with power to stop it, often after internal channels have failed. Sofía tried internal routes, then took evidence of false billing to the state fraud unit, which fits that definition. The coworker's label is understandable because clients may benefit, but case advocacy means acting for a particular client to secure services or rights, such as appealing a benefit denial. Cause advocacy seeks change for a group through policy, legislation, or organizing. Sofía is exposing misconduct inside her own agency, which marks it as whistleblowing.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

57. B Delete the recording under agency procedure and note her withdrawal of consent

Clients may withdraw consent at any time, including consent to recording, and the worker honors the withdrawal promptly. Deleting the recording under agency procedure and documenting the withdrawal does that. Keeping it until the next session postpones a clear request. Exploring her reasons can be useful in conversation, but the decision is hers and does not depend on the worker understanding why. Offering to let her listen first sounds respectful, yet it adds a step meant to reopen a choice she has already made.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

58. C Explain that she cannot confirm or deny whether any person attends

Membership in a treatment group is itself confidential, and substance use treatment records carry additional federal protection, so the worker can neither confirm nor deny attendance. A supportive motive does not authorize disclosure. Checking for a release sounds procedural, but looking up a name confirms the worker is checking a client list, and any response signals the answer. Al-Anon and similar groups help people affected by someone's drinking, but offering them does not answer his question and may imply the coworker has a problem.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

59. B Randomly select clients within each office in proportion to its caseload

Proportionate stratified sampling treats each office as a stratum and randomly selects from each in proportion to its size, which guarantees that every office is represented by its share of the caseload. Selecting an equal number from each office is disproportionate stratified sampling, which is useful for comparing offices but over-represents small offices. Randomly choosing two offices and surveying all their clients is cluster sampling, which leaves three offices out. A simple random sample from one combined list would match office shares only on average, so any one sample could miss the target the evaluator wants guaranteed.

Research, Evaluation, Supervision & Administration · Review: Chapter 19

60. C Use the app only after clinic approval and clients' informed consent

New technology that handles client information needs both organizational review of its security and informed consent from clients. Using the app only after clinic approval and client consent meets both. Client consent alone does not show the app is secure, and the clinic, not an individual worker, decides which tools may handle its records. A business associate agreement is one required safeguard, but obtaining it herself bypasses the clinic's review and leaves clients uninformed.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

61. A Permissive

Baumrind's permissive or indulgent style combines high warmth and responsiveness with few demands, limits or consistent rules, which matches a loving parent who lets her teenager set her own limits and avoids conflict. The uninvolved style is also low on demands but is low on warmth and involvement as well, which does not fit a parent who adores her daughter. The authoritative style is warm but also sets and enforces clear expectations. The authoritarian style is high in control and low in warmth, the opposite of this description on both dimensions.

Human Development, Behavior & Trauma · Review: Chapter 8

Section 2 Answers 62-122

62. B Obtain Ava's consent and review the limits of confidentiality before starting

Where state law lets minors consent to outpatient counseling, the minor gives consent and is told the limits of confidentiality, such as danger to self or others. Ava is 15 and the state threshold is 14, so the worker obtains her consent and reviews those limits. Seeking her parents' consent is required in many other states but not here, and it would override her legal right. A standardized screening is useful, but services, including screening, start after consent. Asking for a release for attendance information pushes disclosure she has said she does not want.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

63. B Seek training and consultation on the community and learn each elder's own views

Cultural competence combines the worker's own effort to learn about a community with attention to each client's individual views. Seeking training and consultation while learning from each elder does both. Asking adult children to explain customs puts the burden of teaching on clients' families and may not reflect each elder's own views. Reassignment to a Hmong-speaking worker may help in some cases, but it avoids building skills the agency needs. Planning around research patterns risks stereotyping individuals.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

64. A Provide the record, withholding the information his sister gave in confidence.

The Code's standard on client records gives clients reasonable access while requiring workers to protect the confidentiality of other people identified in the record. Victor's sister shared information in confidence, and nothing else in the record poses a risk, so he should receive the record with her information withheld. Delaying access to ask the sister holds up Victor's request when she has already stated her wish. Referring to counsel hands off a task that agency procedures assign to the worker. Releasing everything treats the sister's confidential report as if it were Victor's own information.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

65. D Her notes analyzing session content, kept apart from the rest of the record

HIPAA defines psychotherapy notes narrowly as a mental health professional's notes documenting or analyzing the contents of counseling sessions, kept separate from the rest of the record. They receive extra protection and usually require a specific authorization to disclose. The definition expressly excludes session start and stop times, modalities, and frequency of treatment. It also excludes summaries of diagnosis, symptoms, functional status, treatment plan, and progress, as well as test results and medication information. All of the excluded items belong in the regular record, which is what an auditor may review.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

66. B Contact the district's homeless education liaison to resolve the enrollment

Under McKinney-Vento, children experiencing homelessness must be enrolled immediately without proof of address, and every district has a homeless education liaison whose job is to resolve such barriers. Contacting the liaison is the least adversarial step that can enroll Amari quickly. A formal dispute is available if the liaison cannot resolve it. Returning to the school of origin is a McKinney-Vento right, but his previous school is in another state. An attorney's letter escalates before the designated liaison has had a chance to fix the problem.

Intervention Methods & Practice Settings · Review: Chapter 18

67. C Combine classroom work with shadowing and a gradually growing caseload

Effective onboarding pairs classroom learning with supervised field experience and builds workload gradually. Exit interviews named two problems, training that felt abstract without real cases and full caseloads too soon, and only combining classroom training with shadowing and a growing caseload addresses both. Adding shadowing to the first week helps the first problem but still drops a full caseload on new workers. More classroom time deepens the abstract learning they found hard to apply. Daily check-ins with full caseloads offer support but keep the overload that drove workers to leave.

Research, Evaluation, Supervision & Administration · Review: Chapter 19

68. A Pursue continuing education and supervision to update her knowledge

Social workers must keep current with emerging knowledge and practice only within their competence, so a worker returning after a long absence updates her knowledge through continuing education and supervision. Limiting cases to familiar problems avoids some gaps but leaves outdated privacy and practice knowledge unaddressed. Relying on colleagues' notes is informal and depends on cases arising first. A postgraduate certificate and reduced caseload are more than needed when targeted training and supervision can close the gap.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

69. B Acknowledge she has not served and ask what Linda would want her to know.

When a client names a cultural gap in the relationship, the worker acknowledges it honestly and invites the client to teach her. Acknowledging she has not served and asking what Linda wants her to know builds trust and treats Linda as the expert. Describing the agency's military-culture training is meant to reassure but answers a personal concern with credentials. Moving to the sleep problem is reasonable soon, yet passing over her comment can feel dismissive in a first session. A Vet Center referral may fit if Linda prefers it, but offering it first suggests the worker cannot serve her.

Diversity, Equity & Social Justice · Review: Chapter 7

70. A Conduct a new needs assessment of the neighborhood as it is today

Program redesign should rest on current, direct information about the people the center is meant to serve. A new needs assessment of today's neighborhood captures the young families who have arrived and the changed needs of remaining residents. Surveying current participants is useful for improving existing services, but it misses the newcomers, who mostly do not use the center. Updating census figures shows who lives there now but not what they need or want. Adopting a neighboring agency's model skips assessment of this community altogether.

Assessment, Diagnosis & Planning · Review: Chapter 13

71. C Resolve it with informed judgment and consultation, since the Code does not rank values

The Code states that it does not specify which values, principles, and standards are most important when they conflict, and it asks social workers to use informed judgment and seek consultation. Daniel has already checked the standards and policy, so judgment and consultation are his next tools, and he may draw on outside decision aids along the way. The Ethical Principles Screen, which places protection of life first, is a real aid from the ethics literature, but the Code does not adopt it. The Code's sections begin with responsibilities to clients, yet that order organizes the standards and is not a ranking of the core values.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

72. A Document the consultation and how it informed his decision.

Consultation that shapes a clinical decision should be recorded in the client's record, noting that it occurred and how it informed the plan. Documenting the consultation and its effect on his decision gives later readers the reasoning behind the plan. A consultant has no responsibility for the case and does not write in the client's record; the worker documents the consultation. Recording his decision and the teen's response matters too, but the teen has not yet been asked, and that entry would omit the consultation that shaped the plan.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

73. B Ask him how he understands these symptoms and what help he expects

When a client's understanding of his problem differs from the referral, the next step is to learn his own explanation and expectations, which is the focus of the Cultural Formulation Interview. Mr. Nguyen describes 'weak nerves' and does not know why he was referred, so asking how he understands his symptoms and what help he expects comes first. The physician's reasons are already in the referral note, and a fresh PHQ-9 would add little to last week's score. Explaining that depression can appear as physical symptoms is useful psychoeducation later, but offered now it imposes the clinician's frame before his own has been heard.

Assessment, Diagnosis & Planning · Review: Chapter 11

74. C Raise the inaccurate title with the program manager so it can be corrected

Social workers should take steps to prevent unauthorized and unqualified practice of social work, and the usual first step is to address the problem within the agency where it can be quickly fixed. The brochure is an agency document, so raising it with the program manager is the direct path to correcting it. Reporting to the licensing board may be needed if the misuse continues, but it skips a simple internal fix. Asking counsel whether the law is violated delays correction when the title protection is already clear.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

75. A A self-written plan of daily wellness tools, triggers, warning signs and crisis steps

A Wellness Recovery Action Plan, developed by Mary Ellen Copeland, is written by the person and covers daily wellness tools, triggers, early warning signs, signs things are breaking down and a crisis plan. A signed legal document stating treatment choices for a future period of incapacity is a psychiatric advance directive, which a WRAP crisis plan may complement but does not replace. A brief plan of warning signs, coping steps and contacts for suicidal crises describes a safety plan such as the Stanley-Brown model. All three are person-centered tools; only one is a WRAP.

Assessment, Diagnosis & Planning · Review: Chapter 13

76. A Name the racial difference and ask what feels unsafe about working together

When a client raises a racial difference with the worker, the first step is to address it openly and learn what it means to her before deciding anything. Naming the difference and asking what feels unsafe shows the worker can tolerate the topic and gives Keisha room to shape the work. Offering a transfer is a fair option later, but raising it now, when she has not asked, can signal the worker would rather not engage. A support group may help later, after the worker understands her needs. Describing the worker's training centers the worker's credentials instead of Keisha's experience.

Diversity, Equity & Social Justice · Review: Chapter 7

77. C Share the timeline and that no position decisions have been made

During organizational change, managers build trust by sharing accurate information they are authorized to share and being clear about what is not yet known. Leadership has already told Mei Ling what she may share, so she should share the timeline and that no position decisions have been made. Checking with leadership first would be wise if she had no guidance, but she has it. Saying that leadership will try to avoid layoffs sounds reassuring, but it goes beyond what she knows and could damage trust if layoffs occur.

Research, Evaluation, Supervision & Administration · Review: Chapter 19

78. B The Veterans Crisis Line, reached by dialing 988 and pressing 1

A safety plan's crisis contacts should be ones the client can reach quickly and is willing to use. Sgt. Ruiz wants to talk with someone who understands military life, and the Veterans Crisis Line, reached through 988 by pressing 1, offers responders trained to work with veterans, any time, from anywhere. Plain 988 is a sound crisis contact for most clients, but it does not meet his stated preference. The VA walk-in clinic is a good resource for ongoing care, but a two-hour drive makes it a poor contact for a moment of crisis.

Intervention Methods & Practice Settings · Review: Chapter 17

79. B Encourage him to see his physician for a medical evaluation

When sexual problems appear in someone with conditions that affect blood flow and nerves, medical causes must be ruled out before psychosocial interventions. Henry's diabetes, hypertension and possibly his medications can cause erectile difficulty, and he has not told his physician, so encouraging a medical evaluation comes first. Sensate focus is a sound intervention for anxiety-related difficulty but would be premature. Exploring relationship stress is a useful part of assessment, yet starting there risks missing a treatable physical cause. Information on normal aging is helpful psychoeducation, but it could lead him to accept a problem that has a medical cause.

Human Development, Behavior & Trauma · Review: Chapter 8

80. B Volunteer his services through the county's family assistance center

The NASW Code of Ethics bars uninvited solicitation of potential clients who are vulnerable to undue influence because of their circumstances, and newly bereaved families are a clear example. Volunteering through the county's family assistance center lets Gustavo help within a coordinated system that families can use by choice. Asking funeral homes to pass along his card, mailing letters to each family, and offering free sessions at the vigil are all ways of reaching out to vulnerable people who did not ask, even though each sounds generous. A free offer is still solicitation, and routing it through a third party does not change that.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

81. D Explore what led to the use and update her relapse prevention plan.

A single lapse after long stability is best treated as information for relapse prevention rather than as failure. Jasmine's use followed a specific trigger, a fight with her partner, so exploring what led to it and updating her plan addresses the real driver. A higher level of care would fit repeated or escalating use, which this is not. A dose review is appropriate when a client reports cravings or withdrawal, but she says her dose holds her and she has had no cravings. Reviewing policy on use and screening is not wrong, but it shifts focus to rules when she has openly disclosed a lapse that needs exploring.

Intervention Methods & Practice Settings · Review: Chapter 17

82. B Activities

In a logic model, activities are what the program does with its resources, such as delivering services, training or outreach. Conducting weekly home visits with a curriculum describes the program's work, so it is an activity. Outputs are the countable products of activities, such as the number of visits completed or families served. Inputs are the resources invested, such as staff, funding, space and the curriculum itself. Outcomes are changes in participants, such as improved parenting knowledge or fewer injuries, that the activities are intended to produce.

Research, Evaluation, Supervision & Administration · Review: Chapter 19

83. B Have you been having thoughts of killing yourself lately?

When a client makes an indirect statement suggesting suicidal thinking, the worker should ask directly whether he is having thoughts of suicide; asking does not increase risk. Rahul has not yet been asked, so a direct question about suicidal thoughts is the next step. Asking how he would end his life is a needed question about plan, but it comes after ideation is confirmed and can feel presumptive if asked first. Asking what he means invites clarification but can let an ambiguous answer stand without ever naming suicide, so the direct question is preferred.

Assessment, Diagnosis & Planning · Review: Chapter 11

84. C Following the father's lead on who speaks and adopting the family's pace

In structural family therapy, joining comes first: the worker accommodates to the family's style and hierarchy, through tracking and mimesis, to build an alliance before challenging patterns. The Lees are guarded and no rapport exists yet, so following the father's lead and matching the family's pace is the right technique. An enactment, asking members to interact while the worker observes, is used once the worker has joined. Unbalancing by temporarily siding with one member is a restructuring technique that challenges the system and would be premature before an alliance exists.

Intervention Methods & Practice Settings · Review: Chapter 16

85. C It shows a link, but not whether use leads to anxiety or anxiety leads to use

A cross-sectional study measures all variables at one point in time, so it can show an association but cannot establish which variable came first. These teens were surveyed once, so the study cannot tell whether social media use raises anxiety or anxious teens use more social media. Saying use was measured a year earlier would describe a longitudinal design, which this was not. Dismissing the finding as chance contradicts the statistically significant result. Controlling for age and gender rules out only those two explanations; other factors could still explain the link, and the direction of influence remains unknown.

Research, Evaluation, Supervision & Administration · Review: Chapter 19

86. C Release the record except that report, and note in the file why it was withheld.

Under the Code's standard on client access, workers may limit access to part of a record only in exceptional circumstances, when there is compelling evidence that access would cause serious harm, and must document the request and the reason. That test is met for one report, so releasing everything else and noting why that portion was withheld is correct. Releasing the full record, even with a review session planned, disregards the team's evidence of serious harm. Postponing the entire record withholds far more than the evidence supports. Collateral-source consent concerns third-party privacy, not harm to Rosalind, so obtaining it would not address the risk.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

87. A Discuss whether this group fits his goals and what other help he may need

A pregroup meeting exists to check the fit between each person's goals and the group's purpose and to explain what the group offers. Mr. Tran's main goal is coping with job loss, which a diabetes education group is not designed to address, so the worker should talk with him about fit and other help. Enrolling him on the hope that he will open up later ignores the mismatch. Teaching self-care skills in advance does the group's work early. Asking him to agree to stick to diabetes topics secures compliance without meeting his actual need.

Assessment, Diagnosis & Planning · Review: Chapter 11

88. B Describe Rosa's progress in counseling and the missed visits accurately.

Reports to courts must be accurate and complete within what was requested, because decisions about children rest on them. The court asked about Rosa's progress and her participation in visits, so describing both her progress and the missed visits is required. Reporting only attendance withholds the clinical observations the court asked for. Leaving the visits to the visit supervisor omits information the court specifically requested from her. Emphasizing her gains produces a slanted report that could mislead the court, even with good intentions toward reunification.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

89. A The imaginary audience

Elkind's imaginary audience describes the adolescent belief that others are as focused on one's appearance and behavior as one is oneself, which is exactly Diego's conviction that classmates will stare at his face all day. The personal fable is the companion belief that one's experiences are unique or that one is invulnerable, which does not match his fear of being watched. Identity diffusion is Marcia's status for a teen without commitments or exploration and does not explain a sudden appearance-focused fear. Social anxiety disorder involves marked fear of social situations that typically persists six months or more; Diego enjoyed presentations and is comfortable with friends, and his worry began only with the breakout.

Human Development, Behavior & Trauma · Review: Chapter 8

90. A Reassess whether the barter is harming their relationship and change it if so

When a social worker accepts goods or services as payment, the Code places the full burden on the worker to show that the arrangement is not detrimental to the client or the professional relationship. Her irritation during sessions is a sign the barter may be affecting her work, so she reassesses it and changes or ends it if needed, with supervision. A signed statement of satisfaction from Mr. Haugen does not shift the burden, which stays with her. Confirming that the arrangement fits the fee policy addresses business compliance, not the clinical harm she is noticing.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

91. B Reflect his view and ask what he has noticed about his own health lately

Motivational interviewing meets sustain talk with reflection and evocation rather than argument. Reflecting Mr. Bello's view and asking what he has noticed about his own health keeps him engaged and invites him to consider his own experience. Explaining how diabetes changes his risk is accurate information, but offered unasked in reply to his objection it becomes the righting reflex and usually prompts more defense. Moving on to medication would respect a client who declined the topic, but he agreed to discuss food and has not asked to stop, so dropping it now misses the chance to explore his ambivalence.

Intervention Methods & Practice Settings · Review: Chapter 15

92. B Ask Mei and the members what hearing and sharing this was like for them

Yalom found that catharsis helps most when emotional expression is followed by reflection that gives it meaning and connects members. Asking Mei and the others what sharing and hearing this was like turns her expression into shared learning and cohesion. Inviting her to keep sharing memories extends catharsis without the reflective step. A moment of quiet and a private check-in are caring, and a private follow-up may still be wise, but moving the processing out of the room loses the group's chance to respond to her and to its own silence.

Intervention Methods & Practice Settings · Review: Chapter 14

93. A As an external target whose interests conflict with those of residents

Social action assumes that power holders and the disadvantaged group have conflicting interests, so the power structure is an external target to be pressured into change. A rent strike reflects that view. Seeing power holders as partners engaged through shared interests is the locality development view, which relies on consensus. Seeing them as employers or sponsors who define the problem is the social planning view, in which the planner often works for those in power. Seeing officials as neutral parties who will act once needs are documented reflects the rational, data-driven assumptions of social planning, not the conflict view behind a rent strike. Each model's view of power shapes its tactics.

Intervention Methods & Practice Settings · Review: Chapter 18

94. B Plan his return home with daily home health aide visits

When more than one option meets a client's needs safely, the least restrictive setting that honors the client's choice is preferred. Mr. Nilsen has capacity, the team agrees home with daily aide visits is safe, and he wants to go home, so that plan respects both safety and self-determination. Assisted living is more restrictive than needed, and his daughter's preference does not override his decision. A skilled nursing stay is unnecessary because he has no remaining skilled needs, and it would add a more restrictive setting without clinical reason.

Assessment, Diagnosis & Planning · Review: Chapter 13

95. D A forehead bruise fits her mobility and the history, so home safety guidance is appropriate

Concern about bruising depends on whether the injury fits the child's mobility and the explanation. Amira cruises, and the forehead is a bony area that new walkers commonly bump; her history is consistent and she has no other findings, so safety guidance fits. Sentinel-injury rules apply to bruises in infants who are not yet mobile or to protected areas such as the ears, neck, or cheek, not to a forehead bump in a cruising child. A bleeding disorder workup is reasonable when bruising is unusual or recurrent, which is not the case here. A report requires reasonable suspicion, and this bruise is explained and developmentally expected.

Human Development, Behavior & Trauma · Review: Chapter 8

96. C Milestones follow a fairly predictable order, but timing varies among children

Developmental milestones tend to follow a predictable sequence, but the age at which healthy children reach them varies widely, and some children skip steps such as crawling without later problems. Aram is pulling to stand at 13 months with a normal pediatric exam, so reassurance with ongoing monitoring fits. The claim that motor milestones arrive at nearly the same ages for every child is inaccurate; timing varies by child and by cultural practice. The belief that skipping crawling predicts later delay overreacts to a common variation and is not supported by research.

Human Development, Behavior & Trauma · Review: Chapter 8

97. A Records cannot be used in proceedings against the patient without consent or a court order

The 2024 amendments kept Part 2's core protection that records may not be used in civil, criminal, administrative, or legislative proceedings against the patient without specific consent or a court order. They loosened other rules: a single consent can now cover all future treatment, payment, and operations disclosures, so a separate consent for each disclosure is no longer required. HIPAA-covered recipients of records under that consent may generally redisclose as HIPAA permits.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

98. C Her humor appears to be a mature defense alongside acceptance of her prognosis

Vaillant classified humor as a mature defense that lets a person face painful realities while easing distress. Agnieszka talks openly about her prognosis, has completed her advance directive, and has said goodbye, so her humor accompanies acceptance rather than avoiding it. Viewing it as protective denial reflects a real hospice principle, that denial can be adaptive and should not be forced, but the evidence shows she is not denying her illness. Screening for depression is wise when humor hides low mood, yet she eats, sleeps, and enjoys visits, with no signs of depression.

Human Development, Behavior & Trauma · Review: Chapter 8

99. B Replace the requirement with services that address both conditions in one plan

Co-occurring mental health and substance use conditions are common, and current evidence supports treating both together rather than requiring sobriety first. Sobriety requirements keep people like Lauren out of care when they are often most at risk. Shortening the waiting period still leaves a barrier that the evidence does not support. Referring clients to substance use treatment while they wait for mental health care creates the split, sequential model that integrated care replaced. Keeping the rule for conditions cannabis can worsen sounds clinically careful, but those clients most need care that addresses both issues at once, so the barrier should be removed rather than targeted.

Human Development, Behavior & Trauma · Review: Chapter 8

100. C Flight of ideas

Flight of ideas is a thought-process finding in which ideas come rapidly and shift often, but each new idea has a recognizable link to the last one, often through word play, sounds, or associations. Marcus moves from mom to apple pie to pie charts to boss, and each link is easy to follow. Loose associations involve shifts with no understandable connection between ideas, which is not the case here. Perseveration is the repetition of the same word, idea, or response even after the topic has changed, the opposite of Marcus's rapid shifting. Accurate terms help the team track changes across the hospitalization.

Assessment, Diagnosis & Planning · Review: Chapter 11

101. B Ask how drinking fits with the music career he is working toward

The strengths perspective builds on the client's own goals and uses them as the path for addressing risks, without ignoring those risks. Asking how drinking fits with his music career starts from his goal and invites him to consider drinking on his own terms. Requiring sobriety before career work overrides his goals and invites more resistance. Identifying triggers at music venues is a solid relapse-prevention task, but it assumes he already sees drinking as a problem, which he has not said. Leaving drinking aside until he raises it ignores a daily risk in a substance use program.

Diversity, Equity & Social Justice · Review: Chapter 7

102. C The number of sessions and dates for reviewing his progress

A service contract usually includes goals, tasks for client and worker, time frames such as the number and frequency of sessions, and dates for reviewing progress. The draft already has the goal and both sets of tasks, so time frames are missing. Time limits create focus and give both parties points at which to evaluate and renegotiate. A list of employers contacted is useful progress information but not a contract element. His work history and the reasons for the layoff belong in the assessment. The theory guiding the work may be explained to him but is not a contract element.

Assessment, Diagnosis & Planning · Review: Chapter 13

103. C Decatastrophizing

Decatastrophizing asks the client to spell out the worst, best and most likely outcomes and how she would cope with each, which shrinks an imagined disaster to a realistic and manageable size. That is exactly the sequence the social worker uses. A cost-benefit analysis lists the advantages and disadvantages of holding a belief or making a choice, such as the pros and cons of continuing to worry; it does not examine likely outcomes. A behavioral experiment tests a prediction through planned action in real life, such as asking a supervisor for feedback; no outside task has been planned here.

Intervention Methods & Practice Settings · Review: Chapter 17

104. A Explain that looking for hidden toys usually begins later in the first year

Object permanence, the understanding that objects continue to exist when out of sight, develops gradually in Piaget's sensorimotor stage, and infants typically begin searching for fully hidden objects around 8 months. At 5 months, losing interest in a covered toy is expected, so reassurance with accurate information is the best response. Arranging a developmental evaluation overreacts to a typical behavior. Linking the behavior to attachment confuses a cognitive milestone with the relationship with the caregiver. Stranger wariness is a social milestone that also appears later and does not explain how she responds to a hidden toy.

Human Development, Behavior & Trauma · Review: Chapter 8

105. B She keeps her legal rights, and she has the capacity to make this decision

Decision-making capacity is a clinical judgment about a specific decision, while legal competence is presumed for adults until a court rules otherwise. No court has found Lillian incompetent, and her physician found she understands the risks of this decision, so her refusal stands. A memory screen with some deficits does not transfer decisions to her son. Competence is not decided by a psychiatrist; clinicians assess capacity and courts decide competence. Capacity is decision-specific rather than split between daily matters and care decisions, and she has shown capacity for exactly this care decision.

Assessment, Diagnosis & Planning · Review: Chapter 11

106. C Request an exception from the supervisor and document the hospitalization

When a policy's literal application would harm a client in a way its purpose never intended, the first step is to seek an exception through the proper channel for that client. Requesting an exception from the supervisor and documenting the hospitalization keeps Gloria in care now. A new intake follows the rules but puts her on a six-week waitlist. Proposing a policy revision at a staff meeting is worthwhile, yet it is a later step that does not resolve her case. Filing a formal grievance with the board escalates beyond what is needed when an ordinary exception request has not yet been tried.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

107. A External validity

External validity is the extent to which findings generalize to other people, settings and times. Replication across urban, rural and tribal communities with diverse families shows the results are not limited to one context, which is what the practitioner needs to judge whether the model fits her town. Internal validity concerns whether the intervention caused the change within a study; each randomized trial supports it, but repeating results across settings speaks mainly to generalization. Inter-rater reliability is agreement among observers using the same measure, which is unrelated to whether results transfer to new populations.

Research, Evaluation, Supervision & Administration · Review: Chapter 19

108. C Ask Owen to walk through recent cases and consider where race may have mattered

Supervision that builds cultural self-awareness works best when it starts from the supervisee's own practice. Owen has already met the general material and dismissed it as not applying to his clients, so asking him to walk through his own recent cases makes the issue concrete and hard to set aside, while respecting his wish to do good work. More readings on color-blind attitudes repeat an approach that has not reached him. Going over the disparity data again in more detail is also a sound teaching tool elsewhere, but he has already concluded the numbers describe other workers' clients.

Diversity, Equity & Social Justice · Review: Chapter 7

109. D Arrange for his buprenorphine and coverage to continue without a gap

Overdose risk is extremely high in the first weeks after release, and stopping medication for opioid use disorder raises it further. Ensuring that buprenorphine and coverage continue without a gap is the most urgent task. Naloxone is also vital, but prison policy already provides it. Primary care for his well-controlled diabetes and applications for food and housing benefits are important parts of reentry, but they do not carry the same immediate risk of death.

Assessment, Diagnosis & Planning · Review: Chapter 12

110. D The score may reflect schooling and language more than her cognition

Cognitive screens such as the MMSE are strongly affected by education, literacy, and testing in a second language, so a low score in someone with little schooling must be interpreted with caution. Rosa had three years of school, took the test in her second language, and functions well at home, so the score may reflect these factors. Concluding that early dementia has gone unnoticed ignores her strong daily functioning. Treating the score as valid because she speaks Spanish overlooks education effects and her first language. Inferring limited capacity from one screen goes far beyond what it can show.

Assessment, Diagnosis & Planning · Review: Chapter 11

111. B Offer him a peer specialist whose own recovery may help build trust.

Peer specialists can engage people who distrust professionals, because their lived experience of recovery offers credibility clinicians may lack. After two months of brief, practical contact, Rafael accepts some help but still avoids clinicians, so offering the peer specialist is the logical next step. Continuing brief contacts was the right start and remains part of the plan, but the team can now offer more without pressure. A psychiatrist meeting runs into the exact distrust he has named. Asking family to encourage him goes around him and may damage the trust the team has built.

Intervention Methods & Practice Settings · Review: Chapter 17

112. C Point out the difference between her words and her voice and ask her about it

Satir's approach aims at congruent communication, so the worker notices when words and nonverbal signals do not match and invites the person to say what is really happening. Pointing out the difference between Zoe's 'I'm fine' and her shaky voice and asking her about it addresses the incongruence directly with her. Respecting her answer and returning later is sensitive pacing, but here the parents have already passed over her, and waiting repeats the family's pattern. Asking her parents what they noticed involves the family, but it talks about Zoe rather than to her and may leave her feeling exposed.

Intervention Methods & Practice Settings · Review: Chapter 18

113. B Emotional arousal and peers weaken self-control despite sound reasoning

Adolescents often reason well in calm settings, but emotional arousal and the presence of peers reduce their self-control, a gap between cold and hot cognition. Aisha understands the risks, wants to stop, and vapes only at parties with friends, which fits this explanation. Precontemplation would mean she does not see a problem, yet she wants to stop. A personal fable would lead her to see the risks as applying to others, but she says they apply to her. Her top quiz score and detailed understanding show she reasons abstractly, so a lack of formal operational thinking does not fit. Context, not knowledge, drives her behavior.

Human Development, Behavior & Trauma · Review: Chapter 8

114. D Her maternal aunt, an approved relative

ICWA's foster care placement preferences, absent good cause or a different tribal order, begin with a member of the child's extended family, then a foster home licensed or approved by the child's tribe, then an Indian foster home licensed by a non-Indian authority, then an institution approved by a tribe. The maternal aunt is extended family and ranks first. The tribally licensed home and the state-licensed Indian home are later preferences. A short stay with a non-Native family does not by itself create good cause to deviate.

Diversity, Equity & Social Justice · Review: Chapter 7

115. B Some federal and state laws protect such reports, but coverage varies

Legal protection against retaliation for whistleblowing comes from statutes, such as the federal False Claims Act's anti-retaliation provision and state whistleblower laws, and coverage depends on the law, the type of report and the employer. A worker should learn which laws apply before reporting. The NASW Code of Ethics sets professional expectations, but it is not law and cannot protect her job. Saying she is protected only if she reports to an outside authority is inaccurate; several laws also protect internal reports or efforts to stop a violation, though details vary. Knowing these limits helps workers report wisely and document carefully.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

116. C Children often report inner feelings that adults around them miss

Children are often the best informants about their own internal states, such as sadness and worry, which parents and teachers may not see. Maya's parents say she is fine, but internalizing symptoms are easy for adults to miss, so asking her directly fills that gap. Adults, especially teachers, are generally better reporters of outward behavior than children. Children's self-reports are not more stable over time than adults' reports. Seeking Maya's assent is good practice, but the parents have already consented, and assent is not the reason for asking about her feelings.

Assessment, Diagnosis & Planning · Review: Chapter 11

117. B The family shifted roles during her absence and has not renegotiated them

Reintegration after deployment requires families to renegotiate roles that shifted while the service member was away. Alisha's husband took over discipline and routines, and the children still follow that arrangement, so she feels like a visitor until roles are rebalanced together. PTSD can cause emotional detachment after deployment and should be screened, but her screening was negative and her distress concerns her place in the family. A coalition would mean her husband and children ally against her, yet he encourages the children to turn to her, which shows the pattern is habit, not exclusion.

Human Development, Behavior & Trauma · Review: Chapter 8

118. A The study may have been too small to detect an effect, so the result is inconclusive

A nonsignificant result means the data did not provide strong enough evidence of an effect, not that no effect exists, and small samples have low power to detect real effects. With only 12 volunteers, the pilot could easily miss a real benefit, so the finding is inconclusive and supports a larger study. Concluding there is no effect would be reasonable only for a large, well-powered study, which this is not. Claiming the group worked because scores fell ignores that the change could be chance. A p of .21 is not the probability that the group has no effect.

Research, Evaluation, Supervision & Administration · Review: Chapter 19

119. D Decline to provide EMDR and arrange cognitive processing therapy with her trained colleague

The Code's competence standard allows a new intervention only after appropriate study, training, consultation, and supervision from people competent in it, and clients should not wait for care when an effective option is available. Cognitive processing therapy is an evidence-based PTSD treatment offered now, at the agency Mr. Okoro prefers. Starting EMDR with outside consultation still means using a technique she has not been trained in. Completing training first is the right path for Priya's growth but delays Mr. Okoro's treatment. Referring him to a private EMDR clinician is reasonable when no in-house option exists, but it ignores his wish to stay and his insurance.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

120. B Encourage her to talk with her prescriber first and help her plan what to say

Decisions about starting, stopping, or changing psychotropic medication belong to the prescriber; the social worker's role is to share general information, support communication, and never advise stopping. Ifeoma asks whether to stop this week, so the LMSW should encourage her to contact her prescriber before then, rather than wait three weeks, and help her prepare her concerns about weight gain. Explaining side effects is within role but does not answer her question or prevent an abrupt stop. Supporting her choice and planning mood monitoring sounds like respecting self-determination, but it endorses a medical decision made without the prescriber.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

121. D Ableism

Ableism is prejudice or discrimination against disabled people, including assumptions that they cannot speak or decide for themselves. Directing questions to a blind client's companion, even while he answers for himself, treats his blindness as a reason to doubt his competence. Ageism is bias based on age, and nothing in the case concerns the client's age. Classism is bias based on social or economic class, which the behavior does not reflect. Stereotype threat describes the anxiety a member of a stereotyped group may feel about confirming the stereotype, which concerns the client's experience, not the worker's behavior.

Diversity, Equity & Social Justice · Review: Chapter 7

122. B Confirm Hamid's current location before continuing with the session

The technology standards call for knowing a remote client's location at each session so that help can be sent in an emergency, and Hamid's plan lists an address where he is not. Confirming where he is parked comes first. Checking whether anyone could overhear addresses privacy, and Hamid has already explained that he chose the car for privacy, so it adds less than the missing safety information. Rescheduling is unnecessary when he is calm, parked and able to talk, and it would interrupt care that one quick question makes safe to continue.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

Your Score Sheet

Count your correct answers in each study area. ASWB reports that the passing score on its 110 scored questions generally falls between 66 and 78 correct (about 60–71%), set separately for each exam form; every question here counts, so use roughly 70% overall as a practice target and 75% or higher as a comfortable margin.

Study area	Questions	Your score	Study if below 70%
Ethics, Confidentiality & Professional Conduct Content area I	33	____ of 33	Chapter 4: Ethical Foundations and Decision-Making Chapter 5: Confidentiality, Informed Consent and Legal Duties Chapter 6: Boundaries, Professional Conduct and Ethical Service Delivery
Diversity, Equity & Social Justice Content area I	10	____ of 10	Chapter 7: Diversity, Equity and Social Justice
Human Development, Behavior & Trauma Content area II	18	____ of 18	Chapter 8: Human Development Across the Lifespan Chapter 9: Human Behavior in the Social Environment Chapter 10: Abuse, Neglect, Violence and Exploitation
Assessment, Diagnosis & Planning Content area II	22	____ of 22	Chapter 11: Assessment Methods Chapter 12: Mental Health, Substance Use and Medications Chapter 13: From Assessment to Plan
Intervention Methods & Practice Settings Content area III	28	____ of 28	Chapter 14: Engagement and the Helping Relationship Chapter 15: Practice Models and Evidence-Based Interventions Chapter 16: Working with Families and Groups Chapter 17: Case Management, Crisis and Practice Across Settings Chapter 18: Communities, Organizations, Policy and Advocacy
Research, Evaluation, Supervision & Administration Content area III	11	____ of 11	Chapter 19: Research, Evaluation, Supervision and Administration

Total: ____ of 122. For every miss, write down the SEARCH rung you missed and the distractor family (D1–D8) you chose; your largest cluster is what to study next.