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LMSW

ASWB Masters Practice Exam

Exam 5

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 5: 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. C Record it as the neighbor's report, apart from the worker's observations

Documentation separates what others report from what the worker directly observes, attributing each statement to its source. The neighbor's statement is recorded as a report, and the worker's observations of no alcohol and no injuries are recorded separately. Calling it evidence of alcohol misuse treats an unverified claim as a finding. Leaving it out until confirmed loses relevant information that may guide later inquiry. Blending it with observations into a summary hides which facts were seen and which were heard.

Assessment, Diagnosis & Planning · Review: Chapter 11

2. A Privilege means unearned advantages tied to a favored group, which can coexist with real hardship

Privilege refers to unearned advantages that come from membership in a socially favored group, and a person can hold privilege on one dimension, such as race, while facing real disadvantage on another, such as class. Explaining this honors Brian's history while clarifying the concept. Describing privilege as disadvantages built into laws confuses it with institutional oppression, its opposite, and wrongly implies that class hardship cancels racial privilege. Professional power over clients is a real dynamic in helping relationships, but it is a separate concept about role, not about advantages tied to social group membership.

Diversity, Equity & Social Justice · Review: Chapter 7

3. C The family's tie to its new church is strong and a source of help

An ecomap shows the household in the center and its connections to outside systems, with lines that show whether each tie is strong, weak or stressful. The family's strong, helpful tie to a new church is exactly that kind of information. A grandmother's cause of death and the parents' birth order are multigenerational facts that belong on a genogram. Ranking work above child care is a prioritized problem list used in goal setting, not a map of relationships, so it is not what an ecomap displays.

Assessment, Diagnosis & Planning · Review: Chapter 11

4. A Give clients advance notice and discuss how the change will affect each of them

Clients have a right to know about fee changes before they take effect, and a change can affect whether they can continue, so the worker gives advance notice and discusses its impact. With three months' lead time and clients on tight budgets, discussing options such as a sliding scale or adjusted frequency respects their informed choices. Promising current clients a frozen fee commits the practice to a policy Daniela does not set. Posting the rate when it takes effect is technically notice but gives clients no time to plan.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

5. A Open the meeting with residents presenting their own list of priorities

Empowerment-oriented community practice structures meetings so that the least powerful participants set the agenda in their own voice. Residents have already prepared their priorities, so opening the meeting with residents presenting them gives their voice the first and most visible place. A residents-only meeting is a strong organizing step, but it has already happened twice. Presenting the list for them puts the worker between residents and officials and keeps residents silent. Mixed breakout groups can improve participation in general, but they dilute a list residents are ready to present together.

Diversity, Equity & Social Justice · Review: Chapter 7

6. D The team must review whether the behavior was caused by his disability or by IEP failure

A removal of more than ten consecutive school days is a change of placement for a student with an IEP, and IDEA requires a manifestation determination review: the team decides whether the behavior was caused by, or had a direct relationship to, the disability, or resulted from failure to implement the IEP. Adding a behavior goal may follow, especially if the behavior is a manifestation, but it does not replace the review. A reevaluation is not required before discipline. Providing services after day ten is a real IDEA requirement during long removals, but it applies in addition to the manifestation review, not instead of it.

Intervention Methods & Practice Settings · Review: Chapter 17

7. C Brief counseling focused on problem-solving and planning her work

Service intensity should match the severity of the problem and the client's own request. Abena's functioning is intact, she is already using campus supports, and she wants help with workload and stress, so brief, focused problem-solving counseling fits. Weekly ongoing therapy exploring adjustment and family ties is more intensive than her mild, expected transition stress warrants. Pointing her again to clubs and tutoring without follow-up underserves her, since she has already used those resources and is asking for direct help.

Assessment, Diagnosis & Planning · Review: Chapter 13

8. D Her belief that she must succeed at everything or count for nothing

In Ellis's ABC model, the activating event does not directly cause emotional consequences; the person's beliefs about the event do, so REBT disputes irrational beliefs such as absolute demands. Marisol's statement that she must succeed or be nothing is the belief driving her distress. The promotion decision is the activating event, and appealing it may be reasonable, but changing the event leaves the belief ready to cause distress the next time. Her worthlessness and withdrawal are the consequences REBT aims to relieve, not the point of intervention. Her father's criticism may explain where the belief came from, but REBT works on the belief in the present rather than on its origins.

Intervention Methods & Practice Settings · Review: Chapter 15

9. B Demystifying the helping process

Feminist practice seeks an egalitarian relationship, and one way to build it is demystifying the helping process: making clear how the work proceeds, what records contain and how the client can question the worker's methods, so the client is an informed partner. That is what the worker does at the start of work with Imani. Gender-role analysis examines the messages a client has received about gender and how they shape her life. Purposeful self-disclosure is the worker's sharing of relevant personal experience to reduce isolation and power differences. Both are feminist techniques, but neither describes explaining the process and the record.

Intervention Methods & Practice Settings · Review: Chapter 14

10. A Seemingly irrelevant decisions

Seemingly irrelevant decisions are small choices that look harmless on their own but step by step bring a person closer to a high-risk situation. Taking the route past his old bar to save time, then stopping in to see friends, fits that chain closely. The abstinence violation effect describes the guilt and giving-up response after a lapse, which has not happened here. Positive outcome expectancies are beliefs that drinking will bring benefits, which Rob has not described. Lifestyle imbalance refers to too many obligations and too few rewarding activities, a broader pattern than this chain of choices.

Assessment, Diagnosis & Planning · Review: Chapter 13

11. D A pattern lasting months does not fit time-limited crisis and needs broader assessment

Crisis theory describes crisis as a time-limited state, usually resolving within four to six weeks. When a person presents with repeated emergencies over many months, the pattern points to ongoing difficulties, such as chronic stress, unmet needs, or a mental health condition, that call for a comprehensive assessment rather than more crisis responses. Treating each call as a new crisis continues an approach that has not changed the pattern. Limiting contact to weekly sessions sets a boundary before understanding what drives the calls. A coordinated crisis plan sounds organized, but it still frames six months of difficulties as crisis and skips the broader assessment.

Human Development, Behavior & Trauma · Review: Chapter 9

12. B Ask Amara what her family expects of her and how she understands those expectations.

General cultural information is a hypothesis that the client's own account overrides. Amara has not named her ethnic group, and her description already departs from the article, so asking her what her family expects and what it means to her is the best next move. Comparing her family with Yoruba norms assumes an ethnicity she has not stated and keeps the article as the yardstick. Sharing the article for her to react to has the same problem. Consulting a colleague from her community can help in some cases, but here it bypasses Amara, risks her privacy, and assumes someone else knows her family better.

Diversity, Equity & Social Justice · Review: Chapter 7

13. A Say briefly that she is in recovery, then turn the focus back to his trust concerns

Self-disclosure is justified only when it serves the client's treatment needs, and it should be brief and return the focus to the client. Here the meaning of the question has already been explored, and Darnell's engagement depends on knowing whether the worker understands recovery, so a short, honest answer followed by a return to his trust concerns serves him. Continuing to explore without answering repeats a step already done and risks losing a client who nearly dropped out. Telling her recovery story in detail shifts attention to the worker and burdens the client with her history, which goes beyond what his engagement requires.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

14. A The Code advises against it, and the worker bears the full burden of showing no harm

The Code says social workers should not engage in sexual activities or contact with former clients because of the potential for harm, and a worker who does so assumes the full burden of showing that the former client was not exploited or harmed. Written consent from Carmen does not shift that burden, because the power difference from the earlier relationship can affect consent. The Code does not impose an absolute lifetime ban for former clients, as it does for current ones. A two-year waiting period comes from other professions' codes, not from the NASW Code.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

15. B She remains responsible for keeping current through her own ongoing study

The Code's standard on competence calls on social workers to stay current with emerging knowledge in their areas of practice through ongoing reading, study and continuing education. Ana's duty to learn the changed guidelines that affect discharge planning continues regardless of board hours or agency offerings. Completing the required continuing education hours satisfies licensure rules, but licensure minimums do not define the full ethical duty of competence. The hospital does have a responsibility to support staff development, yet a gap in employer training does not suspend her individual obligation to practice competently.

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

16. A Differentiation

The Boston model of Garland, Jones and Kolodny describes five stages: preaffiliation, power and control, intimacy, differentiation and separation. This group has moved through guarded preaffiliation and a power-and-control struggle and now shows intimacy, with personal sharing and family-like closeness. The next stage is differentiation, in which members accept their differences, the group becomes more autonomous and members work on their goals with less reliance on the leader. Separation is the final stage, as the group nears its end. Power and control has already passed; a return to it can occur, but it is not the expected next step.

Intervention Methods & Practice Settings · Review: Chapter 15

17. B Conduct the assessment in Portuguese through a professional interpreter

High-stakes assessments require full fluency, and a worker with conversational skills in a language should use a qualified interpreter. A suicide risk assessment depends on precise understanding of intent, plan and nuance, so Carmen should conduct it in Portuguese through the available professional interpreter. Conducting it in Portuguese herself honors his preference but relies on fluency that may miss critical detail. Conducting it in English uses a language he speaks less comfortably, which can hide meaning when he is distressed. Calling an interpreter only for unfamiliar words assumes Carmen will recognize what she has misunderstood.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

18. C Joon and the intern, each credited for the work they actually did

The Code says social workers should take responsibility and credit, including authorship credit, only for work they have actually performed and to which they have contributed, and should honestly acknowledge others' contributions. Joon designed the study and the intern collected, analyzed and wrote it up, so both are credited. Design is a real contribution, but it does not let Joon claim the intern's work. Supervisory accountability is a genuine responsibility, yet approving and overseeing a project does not by itself earn authorship; the supervisor might instead be acknowledged.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

19. A It is a diagnosis in ICD-11 but is not a separate diagnosis in DSM-5-TR

Complex PTSD is a distinct diagnosis in the World Health Organization's ICD-11, defined by PTSD symptoms plus disturbances in self-organization: affect dysregulation, negative self-concept, and relationship difficulties. DSM-5-TR did not add it as a separate disorder; such presentations are diagnosed as PTSD, sometimes with other conditions. The 2022 text revision added prolonged grief disorder, not complex PTSD, which makes the claim of a 2022 addition a common confusion. PTSD does have a dissociative specifier, covering depersonalization or derealization, but that specifier is not called complex PTSD and does not include the self-organization features.

Human Development, Behavior & Trauma · Review: Chapter 8

20. B Tell her supervisor about the relationship and ask that the case be reassigned.

The Code directs social workers to avoid dual relationships with clients when there is a risk of exploitation or harm, and serving a relative's spouse creates such a risk, especially when other workers are available. Telling her supervisor and requesting reassignment is the appropriate step. Keeping the case and avoiding him at family events does not remove the overlap between their family and professional roles. Asking him whether he is comfortable places on the client a decision that is the worker's responsibility, and he may feel unable to say no.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

21. C Route the request to the accommodation process and evaluate as scheduled

Under disability law, a request for accommodation starts an interactive process, usually handled by a designated office, and accommodations apply going forward rather than erasing past performance. The supervisor should route the request to human resources and complete the evaluation on its usual schedule. Removing the concern changes the record of past performance. Asking Imani to bring medical documentation to her supervisor sends private health information to the wrong place; the accommodation office handles any documentation. Delaying the evaluation can seem fair, but the review covers a past period and need not wait.

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

22. A Use a qualified interpreter, since her Spanish is not proven for clinical work

Workers practice within their competence, and conversational ability in a second language does not equal the fluency needed for trauma-focused clinical work. Using a qualified interpreter lets Lucia speak in her preferred language accurately. Conducting sessions in Spanish and asking her to clarify sounds collaborative, but it shifts the burden to the client and risks missing meaning in sensitive material. Sessions in English with Spanish handouts ignore her stated preference for discussing trauma in Spanish.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

23. D Her partner's daily use in their shared home

Level-of-care decisions weigh each assessment area, and an area showing high current risk drives the recommendation. Alicia's hypertension is controlled, her cravings are occasional and managed with new skills, and her single relapse was two years ago after a major loss. Each could raise the level of care in another case, such as uncontrolled illness, unmanaged cravings or repeated recent relapse, but here each is stable. Returning to a home where her partner uses daily, with no alternative housing, is an active and high risk to her recovery and most affects whether she needs a structured setting such as recovery housing.

Assessment, Diagnosis & Planning · Review: Chapter 11

24. A Delusional content from psychosis rather than gender dysphoria

DSM-5-TR lists psychotic disorders as a differential: delusions about changing gender can occur in psychosis and differ from the persistent incongruence of gender dysphoria. A sudden belief tied to a voice and satellites, after stopping medication, points to psychosis, and he should be assessed and connected with his prescriber. Gender dysphoria with recent onset fails the six-month duration. Gender dysphoria with schizophrenia can co-occur, but nothing here suggests incongruence apart from the delusion. Framing this as exploring a nonbinary identity misreads a bizarre, externally caused belief as identity development.

Diversity, Equity & Social Justice · Review: Chapter 7

25. B Intensive family preservation services

Intensive family preservation services are short-term, home-based and intensive, designed to prevent out-of-home placement when children can be kept safely at home with help. The Delgado children are at imminent risk of removal, can stay home safely with intensive support, and have never been in care, which matches that purpose. Post-reunification aftercare supports families after children return from foster care, which has not happened here. Post-adoption support serves adoptive families after finalization and does not apply to a birth family facing possible removal.

Intervention Methods & Practice Settings · Review: Chapter 16

26. A Economic abuse

The Power and Control Wheel describes economic abuse as controlling a partner's access to money and employment, such as taking her earnings, putting her on an allowance, demanding accounts of spending and interfering with her job. Mariam's husband does all of these, so economic abuse is the best fit. Isolation means limiting contact with family, friends or outside activities, and Mariam still sees her sister and friends. Coercion and threats involve threatening harm, suicide or reports to authorities to force compliance. Using male privilege refers to treating her as a servant and making all major decisions as 'master of the house.'

Human Development, Behavior & Trauma · Review: Chapter 10

27. C Help Kevin examine whose needs the disclosures have been meeting

Supervision addresses boundary problems by helping the worker understand them, because insight is what prevents repetition. Kevin's repeated disclosures about his own ongoing custody dispute suggest the sharing is meeting his needs, so helping him examine that, and stop, is the best response. Transferring Mr. Ruiz disrupts the client's care for a problem that can be corrected. A blanket ban on self-disclosure is broader than the problem and removes a tool that can help clients when used for their benefit, without teaching Kevin to tell the difference.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

28. B An infant who does not turn or look up when her name is called

Responding to one's name is expected by about 9 months, so a 12-month-old who does not turn to her name has missed a social-communication milestone for several months, a red flag for hearing problems or autism that warrants screening. Waving typically emerges around 12 months and pointing to request closer to 15 months, so their absence at exactly 12 months calls for monitoring more than immediate referral. Saying "mama" and "dada" with few other words is typical at 12 months. Walking while holding furniture is also typical; many children walk independently between 12 and 15 months.

Human Development, Behavior & Trauma · Review: Chapter 8

29. A Cover the clinic's social media policy in informed consent at the start of services

Boundary problems are best prevented by setting expectations before they arise, so the social media policy belongs in the informed consent discussion at the start of services. When clients know in advance that workers do not connect online, a later refusal is not experienced as personal rejection, which is what drove one client away. Explaining the policy only after a request arrives is the reactive pattern that already failed. Training staff on privacy settings is useful for protecting workers' information, but it does not tell clients what to expect and would not have prevented the client from feeling rejected.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

30. B Make the report herself without waiting for the supervisor's review

Where each mandated reporter has an individual duty, telling a supervisor does not satisfy it, and no one in the agency can decide for the reporter that a report is not needed. A child's disclosure of being hit with a belt is reasonable suspicion, so Aisha must report. Waiting while the supervisor contacts the family delays the report and may alert the uncle. Asking the supervisor or director to act today seems prompt and respectful of the chain of command, but Aisha's own duty remains unmet unless she reports.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

31. D Tell him she is not judging him and wants to understand his situation

Unconditional positive regard is conveyed when the worker answers a client's fear of judgment with acceptance of him as a person. Telling Ahmed she is not judging him and wants to understand his situation meets that fear directly. Asking how the affair began and whether his wife knows gathers useful history but skips the feeling he just voiced and can sound like a judgment. Suggesting his fear mirrors his own self-judgment is an interpretation, which may be accurate later but does not first offer acceptance. Restating confidentiality would help if he doubted privacy, but he has already said he trusts the process.

Intervention Methods & Practice Settings · Review: Chapter 15

32. B Offer verbal support and let Keisha set the pace for leaving

Physical contact is appropriate only when it serves the client, and the worker's own urge to comfort is not a reason to offer it, especially with a client who has said touch startles her. Verbal support while letting Keisha leave at her own pace meets her needs without risk. Asking whether she wants a hug can work with some clients, but it places her in the position of refusing a helper and raises a topic she has already flagged as distressing. Extending the session would fit if she were unsafe to leave, but she reports she can drive and has support waiting.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

33. A Social indicators analysis

Social indicators analysis estimates need from existing public statistics, such as census, health and school data, that are associated with need in a population. The nonprofit is comparing local poverty, housing burden, infant mortality and absence rates with state averages without contacting anyone, which fits this low-cost approach. The key informant approach would require interviewing knowledgeable community members. Rates-under-treatment analysis uses data on people already receiving services, such as agency caseloads or waiting lists, rather than population statistics.

Assessment, Diagnosis & Planning · Review: Chapter 11

34. B Disintegration

In Helms's model, disintegration is marked by new awareness of racism along with guilt, confusion, and conflict between loyalty to White peers and belief in fairness. Claire sees racism she missed before, feels guilty, and is torn between keeping family peace and her values. Contact describes obliviousness to racism, which Claire has moved past. Reintegration involves resolving discomfort by blaming people of color and idealizing White people, which she has not done. Pseudo-independence involves an intellectual commitment to fairness with growing understanding, but Claire is still caught in the conflict rather than acting from a settled stance.

Diversity, Equity & Social Justice · Review: Chapter 7

35. A Work with him on safely disposing of the saved pills now

Reducing access to lethal means is a core suicide prevention step, and the most direct action targets the means already in hand. Mr. Petrov has a stockpile within reach, denies a plan or intent, and is willing to talk, so working with him to dispose of the saved pills now removes the most immediate means. Asking his physician for smaller supplies is a good follow-up that limits future stockpiling, but it leaves the current pills in his drawer. Stockpiling is a warning sign that calls for a full risk assessment, and a same-day crisis evaluation would follow if that assessment showed high risk, but it does not address the pills in his drawer.

Intervention Methods & Practice Settings · Review: Chapter 17

36. A Ask Ngozi what the experience means to her and how she understands it

Before an unusual experience is labeled, the worker should understand what it means to the client within her own beliefs. Ngozi describes a comforting experience that fits her tradition, with organized thinking and good functioning, so asking what it means to her comes first. Documenting a hallucination and requesting a consult treats a culturally normal grief experience as illness. Telling her it is common in grief is accurate but skips learning her own view. A structured psychosis screen fits a person with distress or other symptoms, which she lacks.

Assessment, Diagnosis & Planning · Review: Chapter 11

37. A Regression to the mean

Regression to the mean occurs when participants are chosen because of extreme scores; on later measurement their scores tend to move toward the average even without intervention. Choosing only the 30 students with the most absences sets up exactly this pattern, so a drop could happen without the program. Maturation refers to natural growth or change over time, which is unlikely to cut absences by 40 percent in one semester. History would require a specific outside event during the semester, and none is described. Selection is a threat when groups being compared differ at the start, but there is no comparison group here.

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

38. D The Universal Declaration of Human Rights

The Universal Declaration of Human Rights, adopted by the United Nations in 1948, names an adequate standard of living, including housing, food and medical care, as a human right, which supports a rights-based argument for housing. The U.S. Bill of Rights protects civil and political liberties such as speech and due process but does not establish economic rights like housing. The Americans with Disabilities Act bars disability discrimination, including in some housing contexts, but does not create a general right to housing. The Social Security Act created income programs and social insurance, not a right to housing.

Diversity, Equity & Social Justice · Review: Chapter 7

39. B Arrange training in the model and supervision from someone skilled in using it

The Code's competence standard says social workers should use intervention approaches new to them only after appropriate study, training, consultation, and supervision from people who are competent in those approaches. Rebecca has done the study but has had no supervised practice, so she needs training plus supervision from someone skilled in this model. Beginning now because she finished the course and manual treats study alone as enough. Reviewing each session with her current supervisor adds oversight, but the supervisor has not been shown to be competent in this specific model, which is what the standard requires.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

40. C Help Kofi examine whether the plan rests on assumptions about blindness

Supervisors help workers notice when a case decision rests on assumptions about a group rather than on evidence. With no safety concerns and no stated reason beyond caution, the extra visits appear to reflect assumptions about blindness, and helping Kofi examine this addresses the source. An occupational therapy assessment is useful when a specific parenting task is in question, but none has been identified. Consulting a disability specialist on adaptive supports is good practice when supports are needed, yet it does not address why the plan treats this mother differently. Approving the visits for a trial month still subjects her to extra scrutiny without cause.

Diversity, Equity & Social Justice · Review: Chapter 7

41. D Use the garage, pay the standard rate, and keep contact brief and businesslike

In remote communities, unavoidable business contact with clients is managed by keeping it brief, ordinary and free of special benefit. Paying the standard rate and keeping the contact businesslike meets Will's need without blurring roles. Checking in on Mr. Halvorsen's grief at the garage turns a business setting into a counseling one. Towing the truck 70 miles imposes a large cost to avoid a manageable overlap. Accepting a discount gives the worker a personal benefit from the client, which creates the conflict of interest the standard rate avoids.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

42. D No report is indicated, since the children's needs are met despite poverty

Many state definitions exclude conditions caused solely by poverty from neglect, focusing instead on a caregiver's failure to meet basic needs when resources are available or offered. Monique keeps her children clean and fed, works, and is actively seeking housing, so no reasonable suspicion of neglect exists. Lack of stable housing alone is a poverty condition, not maltreatment. Several missed days during a housing crisis fall short of the chronic absence educational neglect involves. Making a report to obtain housing help misuses child protection; the school social worker can connect the family to McKinney-Vento services and housing resources directly.

Human Development, Behavior & Trauma · Review: Chapter 10

43. A A time-limited group that follows a planned curriculum of information and skills

Group type should match the purpose members and referrers have stated. A psychoeducational group follows a planned curriculum to teach information and skills over a set number of sessions, which fits a six-week goal of understanding the illness and learning coping skills. A process or therapy group relies on members' here-and-now interactions to change personal patterns; it is valuable for emotional difficulties, but relatives have said they want information, not therapy. A peer-led self-help group can offer lasting mutual support and may be a good later referral, yet it has no professional leader to deliver accurate medical content within the requested timeframe.

Intervention Methods & Practice Settings · Review: Chapter 16

44. C Ask Rosa directly about suicidal thoughts, intent and the pills she has saved

Possible suicide risk comes before every other problem, and the level of risk must be known before choosing a response. Rosa's remark suggests means, but no one has asked about thoughts, intent or a plan, so the worker asks directly now; asking does not raise risk. An emergency hospital evaluation would fit if she reported intent or a plan to act soon, which is not yet known. A written safety plan with means restriction is the right step once risk is assessed as manageable in the community. Starting the job search honors her priority but leaves a possible emergency unexamined.

Assessment, Diagnosis & Planning · Review: Chapter 13

45. A Development of socializing techniques

Development of socializing techniques refers to learning and practicing basic social skills in the group, and it is most explicit in structured skills groups that use role-play. Members practicing small talk and eye contact with feedback fits directly. Imitative behavior is learning by observing others and is part of the picture, but the vignette emphasizes deliberate practice. Interpersonal learning is insight about one's impact on others through feedback in a process group. Imparting information is teaching content, while here members are rehearsing skills rather than receiving facts.

Intervention Methods & Practice Settings · Review: Chapter 15

46. C Comment on the pattern and ask members how they want to share time

When a pattern persists after gentle redirection and individual discussion, a process comment brings it to the group, which shares responsibility for how time is used. Commenting on the pattern and asking members how they want to share time engages the silent members and gives Ms. Mori feedback from peers. Another private meeting repeats a step that has already been tried without lasting change. Continuing gentle redirection has also been tried for three sessions. A permanent go-round format may help a single session, but imposing it for the rest of the group restricts everyone's spontaneity in response to one member's behavior.

Intervention Methods & Practice Settings · Review: Chapter 15

47. B Monitoring and evaluating the decision's effects and recording them

Reamer's final step is to monitor, evaluate and document the results of a decision once it has been put into practice. Two months after the plan began, Mei Lin should look at how sharing with the teacher has affected the student and record what she finds. Documenting the decision and its reasoning is the sixth step, which the stem says she already completed. Reexamining reasons for and against sharing repeats the fourth step and is not called for unless monitoring shows a problem. Consulting colleagues about whether sharing was right repeats the fifth step, which she also completed before deciding.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

48. A Agree on a code word or signal she can use if it is unsafe to talk

Telehealth with a survivor living with an abuser needs a way to end or shift a session safely if the abuser appears. Amara's partner has unpredictable hours, so a code word or signal she can use when it becomes unsafe to talk is the key addition. Scheduling around his work hours is a sound strategy when his schedule is predictable, but his hours change without notice. Text reminders are routine in telehealth, but he checks her phone, so they could reveal her sessions. Location and emergency contact are already confirmed each time.

Intervention Methods & Practice Settings · Review: Chapter 17

49. B Structured life review that includes painful events, aimed at integration

Robert Butler described life review as a structured look back over the whole life, including painful and unresolved events, with the goal of integration and acceptance; that matches Mr. Castellano's wish to make sense of the good and the bad. Simple reminiscence, which recalls pleasant memories to improve mood and connection, fits clients seeking enjoyment or social contact, not resolution of a painful estrangement. Cognitive stimulation therapy helps people with mild to moderate dementia maintain thinking skills, and he is cognitively intact. Reality orientation is used with confused clients, which does not apply here.

Intervention Methods & Practice Settings · Review: Chapter 17

50. B Store the gun outside the home for now, such as with a trusted relative

Lethal means counseling aims to put time and distance between a person at risk and a firearm, and storing it outside the home during a crisis is the most protective option when the family is willing. Ella's parents will do whatever is safest, and Ella knows the safe's combination and has used their keys before, so storing the gun with a trusted relative is best. Keeping it in the family safe would be strong advice if Ella could not open it, but she can. A cable lock and a locked case both depend on keys she may find. Removing ammunition helps, but a teen with access to keys could still reach the gun.

Intervention Methods & Practice Settings · Review: Chapter 17

51. D Ask how bedtime care is going and assess her mother's safety at home

A caregiver's admission of frustration, with no sign that harm has occurred, calls for assessment of the caregiver's strain and the older adult's safety before deciding whether reasonable suspicion exists. Asking how bedtime care goes and assessing safety supplies those facts. Respite care and a calming routine are strong interventions for caregiver stress, but choosing them before assessment may miss risk. Reporting to protective services would be required if there were signs of harm, but feelings she has not acted on do not yet create reasonable suspicion.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

52. D Chronic sorrow

Chronic sorrow, described by Olshansky, is a normal, recurring grief that parents of children with lifelong disabilities may feel, often triggered by milestones that highlight differences from peers. Rafael's parents adjusted well, then felt renewed sadness at kindergarten entry, which fits. A major depressive episode requires persistent symptoms and impairment, not a wave of sadness linked to a transition. Ambiguous loss, in Boss's sense, involves a loss that remains unclear, such as a loved one who is missing or psychologically absent, while their grief here is clearly tied to milestones. Prolonged grief disorder involves persistent, impairing grief after a death, not periodic sorrow while caring for a living child.

Human Development, Behavior & Trauma · Review: Chapter 8

53. B Help leadership develop a policy on insurance, training, and approval

When a common practice carries risk and has no policy, the agency needs a policy that manages the risk while keeping the service clients depend on. Developing a transport policy that covers insurance, training, and approval does both. Suspending all transport would make sense if the practice were clearly unsafe, but the accident was minor and many clients would lose access to medical care. Requiring proof of personal insurance is a reasonable piece of such a policy, but by itself it leaves training, approval, and agency coverage unaddressed.

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

54. A I notice I feel encouraged hearing how calmly you handled that call.

A self-involving statement, the worker's immediate reaction to the client, is the form of self-disclosure that keeps attention on the client's experience. Saying the worker feels encouraged by Antoine's calm handling of the call discloses a present reaction and reinforces his progress. Describing the worker's own past dread of such calls is self-disclosure too, but it shifts attention to the worker's history. Noting that he seems to play down his success is an observation about him, not a disclosure, and assumes something he did not show. Reflecting his pride is a sound empathic response but involves no self-disclosure, which was the worker's chosen tool.

Intervention Methods & Practice Settings · Review: Chapter 17

55. D Raise the conflict with his manager and propose a revised process

Social workers practice within their competence and scope and work to correct agency policies that conflict with them, starting with the people responsible for the policy. Oskar has not raised the issue, so he should take the scope and bylaw conflict to his manager and propose a revised process, such as contributing psychosocial information to physicians' determinations. A short online course does not create competence for formal determinations that the bylaws assign to physicians. Asking the ethics committee may help if management does not respond, but it bypasses the manager. A physician's cosignature does not make the social worker's determination valid or within scope.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

56. C Review with him what led up to that night and what helped him stop

Relapse prevention treats a lapse as information: reviewing what led up to it and what helped the client stop strengthens the plan and reduces shame. Doing that with Hector turns the lapse into learning. Reassurance about progress is supportive but skips the analysis that could prevent the next lapse. Twice-weekly sessions would suit a client whose use was escalating, but Hector drank once and stopped on his own. Asking him to sign a new abstinence agreement focuses on commitment rather than understanding and may deepen the shame he already feels.

Assessment, Diagnosis & Planning · Review: Chapter 13

57. C Present the process and name Anton as the person who developed it.

The Code requires social workers to acknowledge others' contributions, including those of supervisees. Presenting the process and naming Anton as its developer gives leaders the information now and credits him accurately. Waiting for Anton to present it later delays a decision the meeting can make today, even though inviting him to future meetings may be a good development opportunity. Presenting it as team work blurs his individual contribution. Supervisory accountability for the unit's results does not convert a supervisee's idea into the supervisor's or the unit's work.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

58. B Have physicians introduce patients to on-site behavioral staff during visits

A fix should target the step where the referral breaks down. Here information flows well in both directions; the gap is that patients do not make the first contact. A warm handoff to the on-site clinician during the medical visit removes that step and builds trust, which is known to raise engagement. Sending a fuller referral summary improves information for behavioral health, but staff already find it complete, and the patient still has to call. Feedback notes to physicians close the loop after a first visit, yet physicians already receive them, and the notes do nothing for patients who never arrive.

Intervention Methods & Practice Settings · Review: Chapter 17

59. C Continue working on her frustration and record the risk screening just completed

Disclosure without consent is justified only when assessment points to serious, foreseeable and imminent harm. The worker has already asked directly, and Priya denies intent or plan, has no history of violence and describes venting, so the right step is to keep working on her frustration and document the screening that supports this decision. A psychiatric evaluation would be sensible if the screening had raised concern, but here it adds intrusion without new risk. Consulting the director about notifying the employer treats ordinary venting as a possible threat and moves toward an unjustified breach.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

60. B Develop a logic model linking resources, activities and outcomes

Program planning moves from needs assessment to program design, and a logic model is the design tool that links resources and activities to intended outcomes before work begins. The needs assessment is complete and the board has chosen a program, so the next step is building the logic model. Conducting a needs assessment is the right first step for a new area, but Amara has already done it. Comparing results with other counties is an evaluation step that requires the program to be running. Recruiting drivers is implementation, which should follow a plan that defines activities and expected outcomes.

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

61. D Name a calm behavior she will use instead, such as pausing, and how often

Objectives work best when they state a positive behavior to perform, not only a behavior to stop, especially when the client does not know what to do instead. Naming a replacement such as pausing and speaking calmly, with a frequency, gives Mrs. Kim a skill to practice and a way to count it. A cap of twice a week is measurable but still only tells her what not to do. More logging would help if no baseline existed, but her two-week log already provides one. A matching objective for her son may belong in a family plan, but it does not fix her own objective.

Assessment, Diagnosis & Planning · Review: Chapter 13

Section 2 Answers 62-122

62. A A structured family psychoeducation program on the illness and relapse management

Psychoeducation is a structured, teaching-centered intervention that gives clients and families accurate information about a condition and practical skills for managing it, which is exactly what Arturo's parents asked for. Psychodynamic family therapy examines how past relationships shape current reactions, a fit for families seeking insight, which these parents ruled out. An open caregiver support group suits relatives who mainly need to share grief and feel less alone, but it lacks a teaching curriculum on warning signs. Structural family therapy reorganizes boundaries and alliances when household structure is the problem, and nothing in the request points there.

Intervention Methods & Practice Settings · Review: Chapter 15

63. B Count his outbursts each day for a baseline and then during the intervention

A single-system design measures one client's target behavior repeatedly, first during a baseline and then during the intervention, so the worker can see changes as they happen. Daily counts of Tyler's outbursts before and during the approach show week-by-week change. A self-report scale at intake and at the end is a pre-post measure, which shows overall change but not the week-by-week pattern. Comparing him with classmates suits group evaluation and does not track his own course. A single teacher rating at the end of term comes too late to guide the work.

Intervention Methods & Practice Settings · Review: Chapter 17

64. B Tolerance

Tolerance is a reduced response to a substance after repeated use, so more is needed for the same effect. Helen's nightly lorazepam for three years has built tolerance to benzodiazepines, which explains why a higher dose was needed for sedation. Cross-tolerance would apply if her reduced response came from a different substance, such as heavy alcohol use, but she drinks very little. Sensitization is the opposite process, in which repeated use increases a drug's effect. A synergistic effect describes two drugs combining to produce more than either alone, which would make her more sedated, not less.

Human Development, Behavior & Trauma · Review: Chapter 8

65. B Length of stay should depend on progress and ongoing reassessment

The ASAM Criteria treat length of stay as variable, set by a client's progress and continuing reassessment rather than a fixed program length. A rule discharging everyone at 28 days contradicts that principle directly. Matching placement to needs across the assessment dimensions is also a core ASAM principle, but it governs where a client starts, not how long the stay lasts. Integrated care for co-occurring conditions and access to addiction medications are likewise ASAM-consistent standards, yet neither speaks to a fixed discharge date.

Assessment, Diagnosis & Planning · Review: Chapter 11

66. A The MoCA detects subtler deficits, such as in executive function

The MoCA is more sensitive than the MMSE to mild cognitive impairment because it tests executive function, attention and delayed recall more thoroughly. Trouble planning meals and managing bills suggests early executive changes, which the MMSE often misses. Neither tool is designed to distinguish delirium from dementia; delirium is identified by acute onset and fluctuating attention, and this person is alert with a steady routine. The MoCA does add a point for 12 or fewer years of education, but that scoring adjustment is not the reason it is chosen for mild changes.

Assessment, Diagnosis & Planning · Review: Chapter 11

67. C Tolerance and withdrawal from medication taken as prescribed do not count toward a use disorder

Physical dependence, shown by tolerance and withdrawal, is an expected result of long-term opioid treatment and is different from a use disorder. DSM-5-TR does not count tolerance or withdrawal toward opioid use disorder when the medication is taken as prescribed under medical supervision. Gloria takes her medication exactly as directed, so her withdrawal does not count as a criterion. A use disorder is defined by a pattern of problems such as loss of control, craving, and use despite harm, not by duration of use, so three years of daily use is irrelevant. Describing dependence and addiction as one process blurs a distinction that guides treatment and reduces stigma.

Human Development, Behavior & Trauma · Review: Chapter 8

68. A Triangulation

Triangulation occurs when tension between two people is managed by drawing in a third, often a child, which lowers the pair's anxiety at the third person's expense. Bilal's parents pull him into their conflict, and his illness halts their arguments, so his symptoms stabilize the couple. Scapegoating means the family blames one member as the source of its troubles, but his parents do not blame him. Parentification gives a child adult duties or makes him a parent's emotional caretaker, and nothing in the stem suggests either. Enmeshment describes generally diffuse boundaries and overinvolvement, not a three-person pattern organized around conflict.

Human Development, Behavior & Trauma · Review: Chapter 8

69. A The refugee definition requires a well-founded fear of persecution

The 1951 Refugee Convention defines a refugee as someone outside their country with a well-founded fear of persecution based on race, religion, nationality, political opinion, or membership in a particular social group. Environmental harm alone does not meet this definition. The UN Guiding Principles on Internal Displacement are real and do address disasters, but they apply to people displaced within their own country, not those who have crossed a border. Showing that a government caused environmental damage is not the test; the issue is persecution for a protected reason, not the source of the harm.

Diversity, Equity & Social Justice · Review: Chapter 7

70. D Review the session's purpose, confidentiality, and interpreting ground rules

A brief pre-session meeting with the interpreter should set the purpose, confidentiality, and ground rules such as first-person, complete interpretation. Reviewing these is the first task. Checking dialect and community ties is important before any interpreted session, but the language service has already confirmed both. Asking the interpreter about Afghan cultural norms treats the interpreter as a cultural authority and invites generalizations about a client the interpreter has not met. Sharing the full case file gives the interpreter more information than the role requires, which conflicts with the minimum necessary principle.

Diversity, Equity & Social Justice · Review: Chapter 7

71. C Ask each family about devices and connectivity and offer options that fit

The Code's standard on cultural competence asks workers who provide electronic services to assess each client's access to and comfort with technology. Enrollment is the time to ask each family about devices and connectivity and offer options. Surveying tribal leaders gives useful community-level information, but it does not tell the worker what each family needs. Using the community center may be one option, but making it the plan for everyone decides for families. Moving all families to the phone removes the video option even for those who can use it.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

72. C Respond in writing asserting privilege and ask the court to quash or limit it

A subpoena requires a timely response, but without consent or a court order it does not compel release of privileged records. Once the client and parent decline, the clinician should respond in writing asserting privilege and ask the court to quash or limit the subpoena. Releasing a summary limited to the minimum necessary still discloses without authorization; the minimum necessary standard limits authorized disclosures, it does not create permission. Waiting for a court order without responding at all ignores the subpoena and can expose the clinician to contempt, even though the eventual outcome may be a court order that settles the question.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

73. C Develop a safety plan with Leilani for while she remains at home

Survivor-led practice respects an adult's decision about staying or leaving and focuses on safety within the choice she has made. Leilani has weighed her options, shows no immediate lethality indicators, and has declined shelter, so the next step is to develop a safety plan for while she remains at home. Reviewing escalation risk is part of good practice, but encouraging her to reconsider shelter pushes a choice she has already declined. A protective order is a valuable tool for survivors who want separation, which does not fit her plan to stay. A support group may help later, but it does not address her immediate safety.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

74. B Explain that placement follows intake criteria and tell her supervisor

Individual board members have no authority over client services, and pressure to bypass fair procedures should be declined and reported through the chain of supervision. Keisha should explain that placement follows the intake criteria and inform her supervisor, who can address the request at the right level. Reassessing the file would make sense if it had not been reviewed or new facts had emerged, but she checked it this morning. Asking the neighbor for new documentation, at a board member's prompting, gives the case special handling. Writing to the board chair skips her supervisor and escalates before the agency has had a chance to respond.

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

75. C Use a qualified interpreter to review services and consent

When clients have difficulty understanding the primary language of the setting, the Code directs social workers to ensure comprehension, which often means arranging a qualified interpreter. Ana wants services here and a qualified interpreter is available, so the worker should review services and consent through that interpreter. Referring her to an agency with Tagalog-speaking counselors could make sense if she preferred it, but she has chosen this agency. A bilingual daughter is not a qualified interpreter and may affect what Ana feels free to say. A translated form helps readers, but Ana has trouble reading, so it would not ensure she understands.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

76. C Prepare brief written testimony with whom she represents, her position, data and an example

Effective legislative testimony is brief and organized: it identifies the speaker and whom she represents, states a clear position on the bill, gives a few key facts, and includes a concrete example, with a written copy for the record. A detailed research summary is useful as a written attachment, but reading it aloud in three minutes buries the message. A vivid story from her caseload risks identifying a client without consent, and personal stories are most powerful when de-identified or told by people who chose to share them. Preparing for likely questions is wise, but it supplements prepared testimony rather than replacing it.

Intervention Methods & Practice Settings · Review: Chapter 18

77. B A pubertal shift in his sleep and wake timing

During puberty, the body's release of melatonin shifts later, so adolescents naturally fall asleep and wake later, which clashes with early school start times. Tavita's late bedtime, difficulty waking for an early class, and long weekend sleep fit this shift. School avoidance would usually come with reluctance to attend, falling grades, or complaints tied to school, which are absent. Hypersomnia from depression involves excessive sleep along with low mood, loss of interest, or other changes, but his mood, grades, and friendships are stable. Understanding the shift can reframe the parents' view of laziness and support practical changes to his sleep routine.

Human Development, Behavior & Trauma · Review: Chapter 8

78. B Talk with Sofia privately after the session about the disagreement.

Disagreements between colleagues should be handled respectfully and directly, in a way that keeps clients out of the conflict. Talking with Sofia privately lets them understand each other's reasoning and agree on how to present a consistent approach to the family. Bringing the disagreement into the next session puts the family in the middle of a professional dispute. Requesting a new co-therapist is an overreaction to one disagreement that has not yet been discussed. Deferring to Sofia avoids the issue without resolving it and may not serve the family.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

79. D Vicarious trauma

Vicarious trauma is a gradual change in a helper's core beliefs about safety, trust and the world after long exposure to clients' trauma. Gabriel's lasting distrust of all adults and his belief that most people could harm children reflect that shift. Secondary traumatic stress involves PTSD-like symptoms such as intrusive images and hyperarousal, which he does not have. Burnout centers on exhaustion, cynicism toward clients and reduced effectiveness, yet his performance is strong. Countertransference concerns reactions to particular clients within the work rather than a broad change in how he views people outside it.

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

80. A Preconventional

Kohlberg classified moral reasoning by the reasons behind a choice, not by the choice itself. At the preconventional level, right and wrong are judged by punishment, reward and self-interest. Theo mentions a rule, but his reason for following it is avoiding being caught and losing his tablet, and he would break it if undetected, which is preconventional reasoning. Conventional reasoning would rest on approval from others, being a good person, or respecting rules to maintain social order. Postconventional reasoning would appeal to universal principles such as fairness to the cashier, which Theo does not express.

Human Development, Behavior & Trauma · Review: Chapter 8

81. B Propose a combined intake packet to the program manager

The NASW Code of Ethics asks social workers to work to improve their employing agency's policies and procedures and the effectiveness of its services, and the sensible route is to start with the people who have authority to make the change. Because the program manager controls intake and no outside rule requires the duplicate packet, proposing a combined packet to that manager is the direct, appropriate step. The agency board sets broad policy and is not the place to fix an operational procedure that a manager can change. A county contract monitor oversees compliance with the funding contract; involving an outside body is unnecessary for an internal efficiency problem that has not yet been raised internally.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

82. A The effect size, such as Cohen's d

An effect size expresses how large a difference or relationship is, often in standard deviation units, so it lets readers compare the magnitude of results across studies. The director wants to know which program produced the bigger improvement, so effect sizes answer her question. The p-value shows how unlikely a result would be if there were no effect, and it depends heavily on sample size, so a smaller p-value does not mean a larger improvement. Statistical power describes a study's ability to detect an effect if one exists, which matters in planning and in interpreting null results, not in comparing the size of effects.

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

83. D The form lacks content validity

Content validity is the extent to which a measure covers the full range of the concept it is meant to assess. Depression includes loss of interest, hopelessness, and changes in appetite and concentration, so a form limited to sad mood and sleep leaves out major parts of the construct. Face validity concerns whether a measure looks right to users; questions about mood and sleep appear relevant on their surface. Construct validity is tested by how scores relate to measures of related and unrelated concepts. Criterion validity is shown by comparing scores with an outside standard, such as a diagnostic interview; nothing in the case involves such comparisons.

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

84. C Raise ending services with Gloria and plan the final sessions together

Social workers should end services when they are no longer required or no longer serve the client's needs, and they plan the ending with the client. Gloria met her goals months ago and has twice said she has nothing else to work on, so the worker raises termination and plans the final sessions with her. Relapse prevention belongs within a planned ending, but making it the reason for open-ended weekly sessions continues services she does not need. Exploring new goals is sound when needs are unclear, but Gloria has already answered that question twice.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

85. B Tell the colleague today so the colleague can amend the entry.

An entry should be corrected by its author through a dated amendment, and the colleague is on shift and can fix it before tomorrow's transport. Telling the colleague today accomplishes that. Amending the note herself, even with her name and date, alters another professional's entry; write access does not make her its author. Putting the address in her own note and alerting transport may prevent a missed pickup, but it leaves an incorrect address in the chart where others may rely on it, and it bypasses a colleague who is readily available.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

86. B Temporary regression in response to the baby's arrival

Regression, a return to earlier behaviors under stress, is common in young children after a sibling's birth and usually fades with patience and extra attention. Ruby's accidents and bottle requests began with the baby's arrival, and a medical cause has been ruled out. Separation anxiety would show distress when apart from her mother, yet she separates easily at preschool. An adjustment disorder requires marked distress or impairment beyond what is expected; Ruby is cheerful, sleeps well and functions at preschool, so a diagnosis would pathologize an expected reaction.

Human Development, Behavior & Trauma · Review: Chapter 8

87. A Explain that most things stay private, but not if someone is hurting her

Before a child discloses, the worker must explain the limits of confidentiality in words the child understands and must never promise secrecy she may not be able to keep. Ximena seems frightened, which raises the chance of a disclosure about harm, so the social worker should explain that most things stay private but not if someone is hurting her. Promising secrecy and explaining limits later sets up a broken promise at the worst moment. Exploring why the secret is hard to share is supportive, but she still does not know the limits. Suggesting she tell a parent first may send her to the very person who is hurting her.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

88. C Intersex

Intersex refers to natural variations in sex characteristics, such as chromosomes, hormones, or reproductive anatomy, that do not fit typical definitions of male or female; it is about the body, not identity. Tomás's chromosomal and anatomical variation fits this term. Transgender describes a gender identity that differs from the sex assigned at birth, and Tomás identifies as the boy he was assigned. Nonbinary describes a gender identity outside the categories of man and woman, which does not match his identity. Gender nonconforming describes expression that differs from social expectations, and nothing about his expression is described.

Diversity, Equity & Social Justice · Review: Chapter 7

89. B Let her lead on her own problem, giving feedback afterward

Teaching a skill moves from modeling to guided practice to independent use, with the worker fading support as the client shows competence so she can solve problems without help. Lena has done well with prompts for two sessions, so the worker should let her lead on a real problem and give feedback afterward. Modeling again returns to the first stage, which fits a client who has not yet grasped the steps. Continued prompting was right for the past two sessions, but staying there keeps Lena dependent on the worker and does not test whether she can use the skill on her own.

Intervention Methods & Practice Settings · Review: Chapter 17

90. D Arrange a prompt medical evaluation of these recent changes

A sudden change over days in an older adult who was functioning well suggests an acute medical cause such as infection, dehydration or medication effects, so a prompt medical evaluation comes first. A cognitive screen would show confusion but cannot find or treat its cause, and scores taken during an acute illness can be misleading. Talking about assisted living assumes a permanent decline that may be reversible. In-home aide services may help later, but they address symptoms without looking for the cause.

Assessment, Diagnosis & Planning · Review: Chapter 11

91. A Pattern-dynamic reflection

Hollis distinguished several kinds of reflective discussion. Pattern-dynamic reflection examines a client's characteristic tendencies and their inner dynamics, such as Arjun's habit of withdrawing under stress across both home and work. Person-situation reflection concerns the client's understanding of a current situation, others' behavior, and the immediate effects of his own actions, without exploring underlying patterns. Developmental reflection traces how early life experiences shaped current patterns; it would ask where his withdrawal began. Here the worker links similar reactions in two settings to reveal a recurring pattern, which is pattern-dynamic work.

Intervention Methods & Practice Settings · Review: Chapter 14

92. D Social justice

The Code's value of social justice calls on social workers to pursue social change, particularly with and on behalf of vulnerable and oppressed people, including through policy advocacy. Testifying with tenants for eviction protections that address an unjust pattern is a direct example. Service is tempting because Andrea's earlier case-by-case help with families expressed it, but the testimony aims at changing policy rather than helping one family. Importance of human relationships recognizes relationships as a vehicle for change, and she does work alongside tenants, but that is not what the testimony mainly expresses. Competence concerns practicing within and building expertise.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 4

93. C Ask what he sees as the pros and cons of use; share risks with permission.

A brief intervention with an adolescent starts by eliciting the youth's own view, then offers information with permission, within the limits of confidentiality. With no safety concerns and confidential counseling allowed, asking Diego about the pros and cons of use and then sharing risks with permission fits. Explaining effects on the developing brain is accurate and appropriately permission-based, but leading with information before hearing his view makes the conversation one-sided. Telling him his parents must be informed could become necessary if a safety concern called for it under policy and state law, but none exists. Referral to treatment fits signs of a use disorder, which he does not show.

Intervention Methods & Practice Settings · Review: Chapter 17

94. A Mr. Perez has just become the volunteer coach of her son's soccer team

A dual or multiple relationship exists when a social worker relates to a client in more than one role, such as professional and social, at the same time or in sequence. Seeing Mr. Perez weekly as a client and at practices as her son's coach is a second, social role. Counseling his former wife during a custody dispute is a serious concern, but the Code treats it as a conflict of interest among clients with opposing interests, not a dual relationship. Coordinating with his psychiatrist and probation officer is interdisciplinary collaboration, which the Code encourages.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

95. A Continue the apartment search with her, with no treatment requirement

Housing First provides permanent housing without requiring treatment or sobriety, while keeping services available. Kim's agency uses this model, and she wants her own apartment and has declined treatment, so continuing the apartment search without a treatment condition is correct. The transitional program would fit a client who chose treatment-linked housing, but it imposes a condition Kim has refused. A recovery residence is a good option for someone seeking a sober living environment, yet Kim has not asked for that and it is not the independent apartment she wants. Treatment can still be offered later without making it a condition of housing.

Intervention Methods & Practice Settings · Review: Chapter 17

96. A Summarize both statements and ask Fatima to help make sense of them

When a client's statements conflict, the worker can reflect both side by side and invite the client to explore them, which clarifies the facts without accusation. Summarizing Fatima's report of light drinking alongside her blackouts lets her fill in what is missing. Repeating the AUDIT adds little because she already completed it and the problem is the gap between her answers and her experience. A drinking log is a useful monitoring tool once the pattern is discussed. Telling her blackouts are linked to heavy drinking is accurate feedback, but given now it interprets for her before she has explained.

Assessment, Diagnosis & Planning · Review: Chapter 11

97. B Regular use can lead to physical dependence even at prescribed doses

Benzodiazepines such as clonazepam can cause physical dependence with regular use even at prescribed doses, which is why they are usually tapered rather than stopped. The other statements describe SSRIs. Mild, short-lived discontinuation symptoms such as dizziness fit SSRIs, whereas sudden benzodiazepine withdrawal can cause seizures. A delay of several weeks before effects begin is typical of SSRIs; benzodiazepines act within an hour. SSRIs, along with CBT, are the first-line long-term treatment for panic disorder, while benzodiazepines are generally used short term.

Assessment, Diagnosis & Planning · Review: Chapter 12

98. A Give her kits from the on-site supply and show her how to use them

Naloxone reverses opioid overdose, and harm reduction gets it into the hands of people likely to witness one with as few barriers as possible. Because the program stocks kits, giving Yolanda kits now and showing her how to use them provides immediate access and training. Telling her pharmacies sell naloxone without a prescription is accurate and would be the right answer where no supply is on hand, but it adds a step when kits are available. Asking her friends to get their own kits delays protection for people she knows are at risk. Asking about her own use is worthwhile, but making it a condition puts assessment ahead of a lifesaving tool.

Intervention Methods & Practice Settings · Review: Chapter 15

99. A To capture his typical sleep so later changes can be judged

In single-system evaluation each phase has a purpose, and the period before intervention is the baseline. Its job is to record the usual level and pattern of the target so that later change can be judged against it. Checking consistency of results over time describes test-retest reliability of an instrument, not the purpose of a practice phase. Seeing whether sleep changes once strategies begin is the purpose of the intervention phase, which has not started. Confirming that gains last describes a follow-up phase after the plan ends.

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

100. C Denial

Denial is refusing to acknowledge an external reality that is too threatening to accept, and it often appears after serious medical news. Frank insists his heart is fine and acts as if the heart attack had no consequences, which is denial. Suppression is a conscious, deliberate decision to set aside a worry for now, while still accepting it is real. Rationalization would involve offering plausible-sounding reasons, such as saying rehab is a waste of time because he is so active, to justify a choice. Repression is unconsciously blocking internal thoughts or memories from awareness, not refusing to accept an external fact.

Human Development, Behavior & Trauma · Review: Chapter 8

101. A "Suicidal crises are often brief, and most people do not switch to another method."

Lethal means counseling works because suicidal crises are often short, and when a highly lethal method is unavailable during that window, most people do not substitute another method; many who survive an attempt do not later die by suicide. That answers Mr. Lindqvist's belief that Lars will simply find another way. The fact that firearms account for about half of U.S. suicide deaths is accurate and shows why guns matter, but it does not address substitution, which is his actual objection. The finding that asking about suicide does not increase risk is true and important for screening, yet it is unrelated to storing guns.

Intervention Methods & Practice Settings · Review: Chapter 17

102. B 'So far you've chosen to stay. What does that choice mean to you?'

Existential practice emphasizes freedom and responsibility: even under pressure, people choose, and recognizing choices as one's own is a step toward authentic living. Pointing out that Kwame has chosen to stay and asking what that choice means invites him to own the decision he says he lacks. Reflecting that he feels trapped is a sound person-centered response that conveys empathy, but it accepts his framing of having no choice. Asking for evidence that his family would reject a new career is a cognitive technique that tests a prediction rather than addressing his relationship to his own freedom.

Intervention Methods & Practice Settings · Review: Chapter 15

103. D Say her attention drifted briefly and that she is with him now

Genuineness, or congruence, means the worker's words match her actual experience; she does not present a facade. Because her attention really did drift, briefly owning that and returning to Darnell is congruent and keeps the focus on him without burdening him with her worry. Saying she has been listening closely would fit if she had been attentive, but here it is untrue. Exploring what he noticed is useful when his perception is the issue, yet it sidesteps a question she can answer honestly. Shifting to how much time remains fits a session nearing its end, not twenty minutes in, and dodges his question.

Intervention Methods & Practice Settings · Review: Chapter 15

104. C A randomized trial comparing peer support with usual discharge care

The strongest evidence is the most rigorous source that actually answers the question asked. A systematic review usually ranks highest, but this one did not measure readmission, so it cannot tell Keisha whether peer support reduces it. The randomized trial measured readmissions in a similar setting, making it the best available answer. A qualitative study explains how patients experience peer specialists, which is valuable for implementation but cannot estimate an effect on readmission. An association guideline summarizes expert opinion and may reflect the field's interests, so it ranks below controlled research on the outcome itself.

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

105. A Provide the records, since FERPA allows disclosure to the agency responsible for her care

FERPA, as amended by the Uninterrupted Scholars Act, permits schools to disclose education records without parental consent to a caseworker or other representative of a child welfare agency that has legal responsibility for the child's care and protection. Destiny's caseworker is responsible for her placement, so the records may be shared. The birth parents' retained rights do not override this exception, so neither a court order nor their release is required. Splitting attendance from grades has no basis, since both fall within the same exception.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

106. C Review exit interviews and ask current aides why staff are leaving

An organizational problem should be defined with data from the people most directly affected. Exit interviews and current aides speak to why staff actually leave. Surveying supervisors gathers secondhand opinions, which may simply repeat leadership's assumptions. Comparing wages with regional data would be a sensible first check if pay had never been reviewed, but last year's review already found the agency at the regional median, which makes pay a less likely sole cause and points toward other factors aides can name.

Assessment, Diagnosis & Planning · Review: Chapter 13

107. A Call 911 or arrange emergency care for him right away

Symptoms of a hypertensive crisis after a tyramine load in a person taking an MAOI are a medical emergency, so safety comes before routine channels. A severe headache, stiff neck and racing heart an hour after aged meat and cheese fit that picture, and a crisis can progress to stroke. Phoning the prescriber's office is the right step for questions about diet or mild side effects, but it delays care when warning signs are already present. Resting and rechecking in thirty minutes treats a possible emergency as routine and loses time that emergency staff need to lower his blood pressure.

Assessment, Diagnosis & Planning · Review: Chapter 13

108. B Now, as part of the contract, and again as the end nears

In time-limited work, termination is part of the contract from the start: the worker names the number of sessions at the beginning and revisits the ending as it approaches, so the client can plan and use the time well. Raising it now, while setting goals for a 12-session contract, fits that principle. Waiting until the next-to-last session is a reasonable time to review progress, but it is too late to introduce the ending for the first time. Waiting for Kofi to raise it leaves an essential feature unstated. Raising it only in the final session leaves no time to process the ending.

Intervention Methods & Practice Settings · Review: Chapter 17

109. B The double question let Dante choose which part to answer

A double, or compound, question asks about two things at once, and clients typically answer only one part, often the easier or more recent one. Asking about housing and the parole officer together is the most likely reason Dante addressed only housing. Concluding that he is avoiding the parole topic reads resistance into a flaw in how the question was built. Calling the question closed is a knowledge error, since "How are things going" is open. Assuming Dante misunderstood the intake's purpose has no support. Asking one question at a time would show whether any reluctance exists.

Assessment, Diagnosis & Planning · Review: Chapter 11

110. B They are forming a couple system and realigning ties with both families

In Carter and McGoldrick's family life cycle, newly married couples must commit to a new system and realign relationships with extended families and friends to include the spouse. Arguments over holidays, calls to parents, and household traditions are typical of this task. Separating from the family of origin is the earlier task of young adults leaving home, and both partners lived independently for years before marrying. Accepting new members describes families with young children, who must make room for a child and realign around grandparenting; Kenji and Priya have no children.

Human Development, Behavior & Trauma · Review: Chapter 8

111. C A genogram

A genogram maps a family across at least three generations, showing members, relationships, cutoffs and recurring patterns such as substance use. The cutoffs passed down the mother's line and the drinking among the father's relatives are multigenerational patterns that a genogram is built to display. An ecomap is a strong assessment tool, but it maps the family's current connections to outside systems such as work, school and agencies. A social network map charts the size and quality of a person's present support network. A family sculpture is an experiential technique in which members physically position one another to portray relationships.

Intervention Methods & Practice Settings · Review: Chapter 16

112. B Routinely waiving copays misrepresents the actual fee charged to insurers

Accurate billing means the fee reported to an insurer is the fee actually charged, and routinely waiving copays while billing the full fee misrepresents the charge and can violate payer contracts or fraud laws. Individual hardship waivers, documented case by case, are treated differently from a blanket policy. The idea that clients value free services less is a common belief, not the ethical issue here. The Code does not prohibit advertising fee policies; it requires that public statements be accurate, so the problem is the billing practice the advertisement describes.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 6

113. B Love and belonging

Maslow's love and belonging level covers the need for friendship, intimacy, family and acceptance in a community. With physiological and safety needs now met, Mr. Haidari's distress centers on isolation and loss of his faith community, so belonging is the most pressing level. Safety needs, such as secure housing, health care and a safe neighborhood, are already in place. Esteem involves respect, recognition and a sense of achievement, which he does not raise. Self-actualization, fulfilling one's potential, typically becomes a focus only after these lower needs are reasonably satisfied.

Human Development, Behavior & Trauma · Review: Chapter 8

114. A Report the suspected financial exploitation to adult protective services

When a mandated reporter has reasonable suspicion of elder abuse, including financial exploitation, the report is required even if the older adult does not want one. An empty refrigerator while the nephew who controls her money buys himself a car with her help is enough for reasonable suspicion; proof is not required. Seeking permission to talk with the nephew sounds respectful, but it may alert the person suspected and is investigation. More frequent visits honor her wish but do not meet the legal duty. A money management program helps with budgeting but does not address possible exploitation by someone controlling her money.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

115. A Factitious disorder imposed on another

Factitious disorder imposed on another occurs when a caregiver falsifies or induces illness in someone else, often a child, without obvious external reward; symptoms that resolve when the caregiver is absent and recur when she visits are a key warning sign, and the worker must report suspected abuse. Somatic symptom disorder would not explain symptoms that track the mother's presence. Illness anxiety disorder involves fear of having an illness oneself and does not include producing signs in a child. Cyclic vomiting syndrome causes recurring episodes, but its timing would not follow the mother's visits so closely, and fevers are not typical of it.

Human Development, Behavior & Trauma · Review: Chapter 8

116. A Postpone the consent discussion until he is able to understand it

Informed consent requires capacity to understand the information, and intoxication can temporarily remove that capacity. Because Bernard is not in medical danger, the worker should postpone the consent discussion until he can understand it, while staying engaged and supportive. Reviewing the forms slowly in plain language is good consent practice, but plain language cannot overcome impairment that prevents understanding. Signing now and reviewing later produces a signature without valid consent. His eagerness to start can be honored by scheduling a prompt return or a plan for when he is sober.

Ethics, Confidentiality & Professional Conduct · Review: Chapter 5

117. D Explore the worker's own reluctance in supervision and plan termination with Elena

Services should end when they are no longer needed, and the worker's own feelings should not decide the timing. Exploring her reluctance in supervision addresses the countertransference, and planning termination with Elena puts the decision back on clinical grounds. Continuing because Elena seems to benefit ignores that her goals were met months ago. Asking Elena whether she wants to continue sounds client-centered, but it leaves the worker's part in the delay unexamined and shifts responsibility to the client. Ending at the next session goes too far the other way, cutting short the planning and closure Elena deserves.

Assessment, Diagnosis & Planning · Review: Chapter 13

118. B Plan brief, focused contact over several weeks while the acute crisis resolves

Caplan's crisis theory holds that an acute crisis state is self-limiting, usually resolving within about four to six weeks into a new equilibrium that may be better, the same or worse than before. Brief, focused help during that window has the greatest effect, so planning several weeks of contact fits. Three days reflects an emergency response period and would end support before the crisis resolves. A six-month plan assumes the acute crisis persists far longer than theory predicts; longer services may be appropriate for underlying problems, but that is a different goal from crisis intervention.

Human Development, Behavior & Trauma · Review: Chapter 9

119. A Ask Gerald directly whether he has thought of ending his life and hers

An exhausted older caregiver with a gun who says he will not leave his spouse behind may be at risk of homicide-suicide, so the worker must first ask directly about thoughts and plans to end both lives. Respite care addresses caregiver strain and is likely part of the plan, but it comes after the risk is clarified. An APS neglect report does not fit the facts and does not address the danger he described. A caregiver burden scale measures strain but does not ask about the lethal intent his words suggest.

Assessment, Diagnosis & Planning · Review: Chapter 11

120. B Help Jamal and his parents update his transition plan for work, living and benefits

Transition planning should be person-centered and should cover employment, living arrangements and adult services well before school services end. With an outdated plan and two years left, updating it with Jamal and his parents is the priority. A vocational rehabilitation referral is likely to be part of that plan, but it addresses only work. A list of agencies leaves an unprepared family to coordinate alone. Guardianship removes rights and is considered only when a person cannot make decisions, which is not the case for Jamal.

Assessment, Diagnosis & Planning · Review: Chapter 13

121. B A sociogram of member interactions

A sociogram charts patterns of attraction, interaction and isolation among members of a group, so it shows the subgroup of three and the two isolated members at a glance. That helps the worker plan structured activities to bring isolated members in. An ecomap maps one person's or family's connections to outside systems such as schools and agencies, not relationships inside the group. A genogram maps family members across generations and would describe each teen's family rather than the group's internal dynamics.

Assessment, Diagnosis & Planning · Review: Chapter 11

122. C Use drawings and real objects to show step by step what will happen

Piaget's concrete operational stage, about ages 7 to 11, is marked by logical thinking tied to concrete, observable things. Andre, 8, will understand best with drawings, real objects and a step-by-step account of what will happen to him. A short scientific explanation of cell effects depends on abstract ideas he cannot yet use. Waiting until treatment begins leaves him unprepared, and children cope better when told honestly ahead of time at their level. Talking through hypothetical outcomes requires formal operational thinking, which typically emerges in adolescence, and could increase his fear without helping him understand.

Human Development, Behavior & Trauma · Review: Chapter 8

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.