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NCE

Full-Length Practice Exam

Exam 4

Answer Key & Explanations

Weighted to the six NCE content domains • Original practice questions

2014 ACA Code of Ethics • DSM-5-TR • Content current as of October 2026

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How to Use This Material

Answer each question on your own first, choosing the single BEST answer. The current NCE gives you 3 hours and 45 minutes for 200 questions, so this full-length exam is timed the same way: aim for about 1 minute per question. Then check your work against the separate answer key and read every explanation, including for the questions you got right, because the reasoning is what transfers to new questions on exam day.

NCE Practice Exam 4: Answer Key

The best answer for each question, with an explanation of why it is right and why the most tempting alternative is wrong.

1. C Notice his reaction and explore what prayer means to Edna

The ASERVIC spiritual competencies and ACA Code of Ethics A.4.b ask counselors to be aware of how their own beliefs affect their work and to respect clients' spiritual frameworks as potential strengths. Disputing her belief would impose Paul's worldview, and spirituality falls within counseling when the client finds it meaningful.

2. B Rolling with resistance

Rolling with resistance (from the earlier MI principles) means avoiding argument, reflecting the client's view, and emphasizing her autonomy instead of countering the grandfather example with statistics. Developing discrepancy would highlight a gap between her values and her smoking, and supporting self-efficacy would build her confidence that she can change.

3. B Withhold the records; Part 2 requires client consent or a qualifying court order

42 CFR Part 2 bars disclosing records that identify someone as a substance use disorder patient in response to a subpoena alone; a court order that meets Part 2's specific requirements, or valid patient consent, is needed (a subpoena may accompany such an order). Even confirming that the person is a patient is a protected disclosure, which is why that answer is tempting but wrong. Diane should respond to the subpoena without disclosing protected information and consult legal counsel.

4. A continue working with Jordan and seek training or supervision to avoid imposing personal values

ACA Code A.11.b says counselors refrain from referring prospective and current clients based solely on the counselor's personally held values, attitudes, beliefs, and behaviors, and A.4.b directs them to seek training where they risk imposing values. Framing the referral as protecting the client is the tempting rationale, but it is exactly the kind of values-based referral the Code prohibits.

5. B Schizophreniform disorder

Schizophreniform disorder requires the same Criterion A symptoms as schizophrenia, with an episode lasting at least 1 month but less than 6 months (DSM-5-TR); because Marcus has not yet recovered, it would be recorded as provisional. Schizophrenia is tempting, but it requires continuous signs of disturbance for at least 6 months. Brief psychotic disorder lasts less than 1 month, and delusional disorder excludes hallucinations and disorganized speech of this kind.

6. C To let counselors licensed in one member state practice in other member states

The Counseling Compact is an interstate agreement that allows a counselor holding a home-state license in a member state to practice in other member states through a privilege to practice, improving portability and telehealth access. It does not create a national license; each counselor remains licensed in a home state, and member state boards retain disciplinary authority.

7. B Accepting the client matters, but too much warmth may feed approval needs

Ellis valued unconditional acceptance of the client but warned that too much warmth could reinforce the client's demand for approval, and he did not see the relationship as sufficient for change. The "necessary and sufficient" view belongs to Rogers, and a neutral stance for transference belongs to psychoanalysis.

8. D Trait-factor approach

The trait-factor approach, rooted in Parsons and Williamson, measures individual traits and matches them with occupational factors, exactly as this counselor does. A life-span, life-space approach would consider Ahmed's developmental stage and life roles. A social learning approach would examine his learning experiences and beliefs, and cognitive information processing focuses on how he processes career information and makes decisions.

9. D Explore with Raj what got in the way of completing it

In CBT, noncompletion is treated as useful information: the counselor looks into practical barriers, beliefs about the task ("It won't help"), or unclear instructions, then adjusts collaboratively (J. Beck). Dropping homework is tempting to avoid conflict, but it gives up a core part of the treatment before the problem is understood.

10. D Desensitization

In Shapiro's eight-phase EMDR protocol, phase 4 (desensitization) has the client hold the target memory with its negative cognition and body sensations during bilateral stimulation until Subjective Units of Disturbance approach zero. Installation (phase 5) strengthens the positive cognition, and the body scan (phase 6) checks for residual physical tension.

11. D Danger or threat in the future

Beck proposed that each emotion has typical thought content: anxiety centers on future threat or danger, depression on loss and failure, and anger on others breaking rules or acting unfairly. Loss and failure is the tempting answer because anxiety and depression often occur together, but loss is the theme Beck linked to depression.

12. D An acculturation gap between parents and child

When children acculturate to the host culture faster than their parents, the resulting intergenerational acculturation gap often produces conflict over values such as dating, autonomy, and family obligations, which fits the Morales family. Enmeshment and triangulation are structural family concepts that could be explored, but nothing in the vignette points to blurred boundaries or a marital conflict. Cultural encapsulation refers to helping professionals who view others only through their own cultural lens, not to parents in this situation.

13. B Assess whether Leon intends to inform his partner

ACA Code of Ethics B.2.c permits disclosure to an identifiable third party at serious and foreseeable risk of a contagious, life-threatening disease, but only after the counselor assesses the client's intent to inform that person, and always within state law (some states restrict HIV disclosure). Warning the partner right away skips this required step.

14. C He may not use the protected title, but the statute does not restrict the services

A title act protects the use of specific professional titles but does not restrict the practice of the activity itself; a practice act regulates both the title and the scope of services. Under a title-only law, Devon may not use the protected title, but the statute does not bar the services. CACREP accredits programs and has no role in registering individual practitioners.

15. D 40

For an independent-samples t-test, df = n1 + n2 - 2, so 22 + 20 - 2 = 40. The value 41 would result from subtracting only one, which is the rule for a single-sample or paired test.

16. A Spitting in the client's soup

Spitting in the client's soup exposes the hidden payoff of a behavior, so the client can keep doing it but it no longer feels as rewarding. 'Catching oneself' is something the client does, noticing the old pattern as it starts, rather than a counselor exposing its purpose.

17. C Historical trauma

Brave Heart defined historical trauma as cumulative emotional and psychological wounding over the lifespan and across generations, emanating from massive group trauma such as colonization, forced relocation, and boarding schools. Vicarious trauma and secondary traumatic stress describe effects on helpers exposed to others' trauma. Complex trauma refers to repeated, prolonged interpersonal trauma within an individual's life, not collective intergenerational wounding.

18. B Provide naloxone, fentanyl test strips, and syringe service referrals

Harm reduction meets people where they are and aims to reduce the death, disease, and other harms of use without requiring abstinence first. Naloxone, drug-checking tools, and syringe services are core harm reduction strategies, and maintaining the relationship keeps the door open to later change. Making services depend on abstinence or residential entry contradicts the model, and admitting powerlessness is a 12-step concept.

19. C Cognitive impairment associated with a depressive disorder

Depression-related cognitive impairment (sometimes called pseudodementia) typically has an abrupt onset tied to a mood change, "I don't know" answers, and a client who emphasizes her own deficits. Alzheimer's-related decline usually begins gradually, with patients often minimizing deficits or confabulating, and delirium involves acute, fluctuating disturbances in attention. A full medical evaluation is still warranted.

20. B CPT can be delivered with or without a written trauma account

Resick and colleagues developed CPT with a written account (CPT+A) and without one, and research supports both versions, with the cognitive work as the core mechanism. The account is used to access natural emotions and stuck points, not repeated for habituation as in prolonged exposure, and Socratic questioning remains central in either version.

21. D Illumination of the process underlying those interactions

For Yalom, here-and-now experiencing alone is insufficient; the group must also step back and reflect on what just happened, a step he calls process illumination or process commentary. Structured exercises and catharsis can produce strong emotion, but without examining the process, members do not convert that experience into interpersonal learning.

22. B Stage 1, cycle de-escalation

Stage 1 of EFT involves tracking the negative interaction cycle and framing it, rather than either partner, as the problem, which reduces blame and de-escalates conflict. Blamer softening and withdrawer re-engagement are deeper Stage 2 change events that depend on this framing, and Stage 3 consolidates new patterns after restructuring.

23. B Raise his concerns directly with the colleague to try to resolve the issue informally

ACA Code of Ethics I.2.a directs counselors who believe a colleague is acting unethically to first attempt informal resolution with that colleague when feasible and appropriate. Escalating to the director or the licensing board is reserved for when informal resolution fails or is inappropriate. Advising clients to switch counselors leaves the bias unaddressed and draws clients into a staff conflict.

24. A Habit reversal training with awareness training and a competing response

Trichotillomania is a body-focused repetitive behavior, and habit reversal training (awareness training, competing response training, and social support), often within a comprehensive behavioral model, has the strongest evidence. ERP is less suited because hair pulling is usually not driven by obsessions, and aversive conditioning is not an accepted treatment.

25. D Normalize these behaviors as continuing bonds that can support adaptation, while monitoring functioning

Klass, Silverman, and Nickman showed that maintaining an inner connection with the deceased is common and often adaptive, especially when functioning is intact, as it is for Carlos. Prolonged grief disorder requires intense yearning or preoccupation nearly every day plus at least three additional symptoms, causing clinically significant distress or impairment, not simply the passage of time.

26. C Possible serotonin syndrome; she needs immediate medical evaluation

Combining an SSRI with another serotonergic agent such as St. John's wort can cause serotonin syndrome, marked by agitation, sweating, diarrhea, myoclonus, and tachycardia, which can be life-threatening and requires immediate medical care. Neuroleptic malignant syndrome is associated with antipsychotics and presents with severe rigidity and high fever, and Gloria is still taking her SSRI, so discontinuation syndrome does not fit.

27. C Theraplay

Theraplay is a directive, attachment-based approach in which the adult leads playful activities built on structure, engagement, nurture, and challenge, usually with the caregiver present. Child-centered play therapy is explicitly nondirective, and Gestalt play therapy (Oaklander) emphasizes sensory awareness and contact rather than these four dimensions.

28. A Support Ruth's self-determined goal while monitoring the counselor's own reactions

ACA Code A.1.c calls for counselors and clients to work jointly on counseling plans consistent with the client's abilities, developmental level, and circumstances, and Ruth's goal is reasoned and self-determined. The counselor's sense that she is 'giving up' may reflect ageist assumptions that call for self-examination and avoiding value imposition (A.4.b). With good mood, sleep, and engagement, a depression screen driven by the counselor's disagreement is not clinically indicated, and presenting alternatives first steers her away from her own choice.

29. B Shaping

Shaping reinforces successive approximations of a target behavior, raising the criterion step by step until the full behavior appears. Prompt fading gradually withdraws assistance such as modeling or physical guidance, but here the counselor is changing which response earns reinforcement, not removing prompts.

30. B Emotional concentration on the child, leading toward person-oriented occupations

Roe proposed that overprotective or overdemanding parenting (emotional concentration on the child) fosters strong needs for approval and contact with others, orienting the person toward people and toward fields such as service and business contact. Rejecting or neglecting parenting (avoidance) was hypothesized to lead toward non-person-oriented fields such as technology, science, and outdoor work. Pairing emotional concentration with a non-person orientation reverses Roe's proposed relationship.

31. A A collecting summary of the change talk he has voiced

A collecting summary gathers several change-talk statements the client has made, letting him hear his own reasons for change together and inviting him to continue. A linking summary ties what the client just said to something he said earlier in order to highlight a connection, and a transitional summary wraps up a session or shifts the focus to a new task.

32. A a re-membering conversation

Re-membering conversations (White, drawing on Myerhoff) invite clients to revise the membership of their "club of life," keeping valued figures, including those who have died, as active members of their identity. The empty-chair technique is a Gestalt experiment in which the client speaks directly to the absent person. Outsider-witness retellings involve a live audience.

33. D The counselor may choose to maintain confidentiality, depending on the law and circumstances, after consultation

ACA Code of Ethics A.9.c states that counselors serving terminally ill clients who are considering hastening their own death have the option to maintain confidentiality, depending on applicable laws and specific circumstances, after seeking consultation or supervision. Treating the situation automatically as imminent suicide risk is tempting, but the Code makes a specific end-of-life exception; A.9.b lets counselors decline such work with appropriate referral, but the Code does not bar it.

34. A Systems advocacy

Systems advocacy involves the counselor acting on behalf of clients to change policies within a school or community system, often using data to identify and address barriers, which describes this intervention. Community collaboration also occurs at the school/community level but involves acting with community groups that are already working on an issue. Client/student advocacy focuses on obtaining resources for individual students, and social/political advocacy targets the public arena such as legislation.

35. A Face the client squarely with an open, slightly forward-leaning posture

Egan's SOLER stands for facing the client squarely, an open posture, leaning slightly forward, appropriate eye contact, and remaining relaxed. Egan calls for good eye contact, not continuous staring, and cultural norms about eye contact vary, so the guidelines should be applied flexibly.

36. D Seek supervision or consultation to examine her reactions and their effect on treatment

Countertransference that is already changing the counselor's behavior, such as extending sessions and giving unusual advice, should first be examined in supervision or consultation so it can be understood and managed (ACA Code of Ethics C.2.g on monitoring for impairment and C.2.e on consultation). Immediate referral is premature, because countertransference can often be worked through, and an abrupt referral could feel like abandonment.

37. B She is likely not a HIPAA covered entity, but she remains bound by ethical and state-law confidentiality duties

A health care provider is a HIPAA covered entity only if it transmits health information electronically in connection with a standard transaction, such as electronic claims. Using a computer to store records does not trigger coverage, but the ACA Code of Ethics and state confidentiality and privilege laws still apply fully.

38. A Variable ratio

Variable-ratio schedules (Skinner) reinforce after an unpredictable number of responses, producing high, steady rates and strong resistance to extinction, which is why slot machines are so persistent. Continuous reinforcement speeds acquisition but extinguishes fastest because the absence of reinforcement is quickly noticed.

39. B staying with the feeling

Staying with the feeling encourages clients to remain with an uncomfortable emotion they wish to avoid, deepening awareness rather than fleeing it. An empty-chair dialogue with his brother might come later, but the counselor's immediate request is simply to stay with the present feeling.

40. C Acceptance

In Miller and Rollnick's model, acceptance includes absolute worth, accurate empathy, affirmation, and autonomy support. Partnership refers to the collaborative, non-expert stance, and compassion refers to actively promoting the client's welfare; both are part of MI spirit but do not specifically comprise these four components.

41. D Test-retest reliability, which shows the scores are stable over time

Giving the same instrument to the same people on two occasions and correlating the scores yields a test-retest (stability) coefficient. Alternate-forms reliability would need two different but parallel versions of the test, and Maria used one version both times.

42. D Social (pragmatic) communication disorder

Social (pragmatic) communication disorder involves persistent difficulties in the social use of verbal and nonverbal communication without the restricted, repetitive behaviors required for autism spectrum disorder (DSM-5-TR). Autism spectrum disorder is the tempting choice, but it cannot be diagnosed without a current or past history of restricted, repetitive patterns. Language disorder involves deficits in vocabulary or grammar, which Noah does not have.

43. A Decatastrophizing

Decatastrophizing (the "what if" technique) examines the worst, best, and most likely outcomes and the client's ability to cope, lowering exaggerated fear (Beck). The downward arrow is the tempting choice, but it asks what an outcome would mean about the self in order to reach core beliefs.

44. D Insomnia disorder, persistent

Insomnia disorder requires dissatisfaction with sleep quantity or quality (difficulty initiating or maintaining sleep or early-morning awakening) at least 3 nights per week for at least 3 months, causing distress or impairment despite adequate opportunity to sleep; 'persistent' applies when symptoms last 3 months or longer (DSM-5-TR). Advanced sleep phase type is tempting because of the early waking, but those individuals fall asleep early without difficulty and sleep normally on their shifted schedule. Hypersomnolence involves excessive sleepiness despite sufficient sleep.

45. C Attention and concentration

Serial sevens is a standard MSE task for attention and concentration (it also draws on working memory and calculation). Abstract reasoning is usually tested with proverb interpretation or similarities, and remote memory is tested by asking about long-past personal or historical events.

46. D Disenfranchised grief

Disenfranchised grief (Doka) is grief that is not openly acknowledged, socially sanctioned, or publicly mourned, as often happens with ex-spouses. Ambiguous loss (Boss) involves a loss that is unclear, such as a missing person, and prolonged grief disorder requires at least 12 months since the death in adults.

47. D Make his own report, since each mandated reporter's duty is individual and personal

In most states, the duty to report belongs to each mandated reporter and is not met because a colleague has reported. Mr. Ito also has firsthand disclosures that may add important information. Some states allow one joint report under specific conditions, but relying on another person's report without confirming it, or noting it in a file, generally does not satisfy the statute.

48. B "You say you're fine with the divorce, and your voice and hands seem to be saying something different."

Effective confrontation nonjudgmentally places two discrepant messages side by side (here, verbal versus nonverbal) and leaves the client free to examine them. Saying he is angry at his ex-wife goes beyond the data and assumes the meaning of his nonverbal behavior, and accusing him of dishonesty is judgmental and likely to increase defensiveness.

49. D review her progress with her and discuss planning for termination

Ines has shown substantial improvement into the mild range along with restored functioning, so the next step is to review the data with her and collaboratively plan an ending, including relapse prevention. An immediate discharge skips the termination process, and adding unrelated goals or open-ended maintenance would prolong services she may not need.

50. B "With all that has happened, how have you managed to keep going each day?"

Coping questions are used when clients are overwhelmed or hopeless; they highlight the resources and strengths the client is already using simply to survive. The miracle question and scaling questions may feel dismissive or out of reach to someone this discouraged, and asking about a happy time asks for an exception Gloria has just said she cannot find.

51. D External locus of control, external locus of responsibility

Sue's model crosses locus of control with locus of responsibility. People with an external control and external responsibility (EC-ER) worldview see systemic forces as both limiting their options and causing their problems, often an accurate reading of discrimination. The counselor's internal control and internal responsibility (IC-IR) view, typical of the dominant U.S. culture, can lead her to misread this as low motivation.

52. C Report it to the state agency for vulnerable adults, such as adult protective services

Most states require reporting abuse of dependent or vulnerable adults, including adults with intellectual developmental disorder, to adult protective services or a designated agency. Telling only the facility leaves the investigation in the hands of the organization that may be responsible. Reporting does not require a guardian's permission. Child protective services serves people who are chronologically minors, regardless of an adult's functioning level.

53. B Accepting a multitude of exits from and entries into the family system

Carter and McGoldrick identify accepting a multitude of exits and entries (children leaving, in-laws and grandchildren arriving, parents' illness and death) as the key process of the launching stage. Increasing boundary flexibility for children's independence belongs to the stage of families with adolescents, and accepting shifting generational roles belongs to families in later life.

54. D Delirium

Delirium features an acute onset over hours to days, disturbed attention and awareness, symptoms that fluctuate during the day, and often a medical cause such as infection. Alzheimer's-related neurocognitive disorder develops gradually over months to years and does not usually cause sudden, fluctuating attention problems.

55. C In the first several weeks to month after discharge

Research consistently shows a sharp rise in suicide risk in the first weeks to month after psychiatric discharge, which is why prompt follow-up, ideally within days, is recommended. Risk stays elevated for longer, but it peaks soon after discharge rather than months later.

56. A Sublimation

Freud viewed sublimation as the healthiest defense because it turns an unacceptable drive into a socially valued outlet. Displacement also redirects an impulse, but onto a substitute target such as another person, not into a constructive activity.

57. C Decline, because such relationships are prohibited for 5 years after last contact

ACA Code of Ethics A.5.c prohibits sexual and/or romantic relationships with former clients for 5 years after the last professional contact, in person or electronic. Documenting non-exploitation is required only after that 5-year period has passed, so it cannot make a relationship at 3 years acceptable. The ban is not permanent under the ACA Code, which is why the 'permanent prohibition' answer is wrong.

58. B Discuss the concern with Rachel and refer her for medical evaluation and specialized treatment

Frequent purging carries medical risks such as electrolyte imbalance, and the counselor lacks competence to treat it, so ACA Code A.11.a and C.2.a call for a referral to appropriately trained providers along with medical evaluation. Using a manual without training is still practicing outside competence, and abruptly ending services without a referral risks abandonment.

59. B Median

The median is resistant to extreme scores and therefore best represents the center of a skewed distribution. The mean is pulled toward the extreme high incomes and would overstate what a typical client earns; the range is a measure of variability, not central tendency.

60. B Disintegration

Helms's disintegration status involves conflict, guilt, and confusion as a White person becomes aware of racism and privilege and feels caught between competing moral and social loyalties. Contact is characterized by obliviousness to race and racism. Reintegration involves retreating into idealization of Whites and blaming people of color, and pseudo-independence involves an intellectualized acceptance of one's Whiteness and a sometimes paternalistic interest in helping people of color.

61. B Fixed ratio

Pay for a set number of completed units (piecework) is a fixed-ratio schedule, because reinforcement depends on a constant number of responses. An interval schedule would pay for the passage of time, such as an hourly wage, regardless of how many brochures he folded.

62. A define who the client is and discuss the limits of confidentiality, documenting each member's agreement

ACA Code of Ethics B.4.b requires counselors in couples and family counseling to clearly define who is considered the client and to discuss expectations and limitations of confidentiality, obtaining and documenting agreement among all parties. Blanket promises to keep secrets, or postponing the discussion, set up conflicts the code is meant to prevent.

63. B Reframing

Reframing (relabeling) offers a different, often more positive, meaning for the same behavior so the client can respond to it differently. Interpretation explains behavior in terms of underlying dynamics or motives, confrontation points out discrepancies, and a paradoxical directive tells the client to do more of the problem behavior.

64. D Encourage Tom to disclose the affair himself, consistent with the policy

ACA Code of Ethics B.4.b requires counselors to clarify confidentiality expectations in couples work and document the agreement. Under the agreed no-secrets policy the counselor cannot hold the secret, but the first step is to give Tom the chance to disclose it himself; announcing it to Priya immediately skips that step, and treating it as confidential contradicts the policy.

65. C the life roles a person plays and how they change across the life span

The Life-Career Rainbow shows Super's life-span stages along the outer arc and life roles (child, student, leisurite, citizen, worker, homemaker, and others) as bands that grow and shrink over time. Person-environment types are Holland's model. Combining Maslow's needs with occupational groupings is associated with Anne Roe, and circumscription and compromise is Gottfredson's theory.

66. C Decline, because counselors may not receive payment for referring clients

ACA A.10.b states that counselors do not give or receive commissions, rebates, or any other form of remuneration when referring clients. Disclosure or charitable use of the money does not change the conflict of interest. Referrals should be based solely on client need and provider qualifications.

67. A Explore her expectation that the counselor will judge her as her father did and how it shows up now

Lena is expressing a transference expectation in the here and now, which psychodynamic counselors view as a valuable opportunity to explore how old relational patterns shape current relationships. Reassurance is tempting, but it shuts down exploration and gratifies rather than understands the expectation. Redirecting away from the relationship misses the most immediate, emotionally live material.

68. C Refining his quit plan and anticipating high-risk situations

Jorge is in preparation: he intends to act within the next month and has taken concrete steps. Stage-matched work at this point strengthens the plan and anticipates obstacles. Exploring pros and cons fits contemplation, consciousness raising fits precontemplation, and sustaining long-term gains fits maintenance.

69. A A dysfunctional thought record

The dysfunctional thought record (Beck) captures situations, emotions, automatic thoughts, and balanced alternatives. An activity monitoring schedule is tempting because it is also a CBT homework form, but it tracks activities and mood or mastery ratings, not the content of thoughts.

70. C My Vocational Situation

My Vocational Situation (Holland, Daiger, and Power) includes a Vocational Identity scale along with items on occupational information needs and barriers. The Career Beliefs Inventory was developed by Krumboltz to identify faulty beliefs, the Career Maturity Inventory was developed by Crites to assess developmental readiness, and the Career Thoughts Inventory comes from the cognitive information processing approach of Sampson, Peterson, and colleagues.

71. A Trustworthiness and transparency

SAMHSA's six trauma-informed principles are safety; trustworthiness and transparency; peer support; collaboration and mutuality; empowerment, voice, and choice; and cultural, historical, and gender issues. Explaining what will happen and why, and being open about how information is used, is the core of trustworthiness and transparency. Collaboration and mutuality concern leveling power differences through shared decision making, which is not the focus of this change.

72. A Cognitive defusion

Cognitive defusion techniques change a person's relationship to thoughts so they are seen as words and mental events rather than literal truths, without disputing their content. Cognitive restructuring, from cognitive therapy, tries to evaluate and change the content of the thought, which ACT deliberately avoids.

73. A Help her assess each employer's climate and support her own disclosure choices

Affirming career counseling helps LGBTQ+ clients assess workplace climate (nondiscrimination policies, inclusive benefits, employee resource groups) and treats disclosure as the client's own decision. Telling her not to disclose is directive and takes the decision from her. Under Bostock v. Clayton County (2020), Title VII's ban on sex discrimination covers gender identity and sexual orientation, so the statement about federal law is false.

74. C Bernard's discrimination model

Bernard's discrimination model is a social role model built on a 3 x 3 grid of supervisor roles (teacher, counselor, consultant) and supervision foci (intervention, conceptualization, personalization). The Integrated Developmental Model focuses instead on supervisee levels and structures such as self-other awareness, motivation, and autonomy. Holloway's SAS emphasizes the supervisory relationship and contextual factors.

75. A a two-person relationship under stress tends to draw in a third person to absorb anxiety

Bowen held that a dyad is unstable under anxiety, so it pulls in a third party (a child, in-law, affair, or even a therapist) to diffuse tension, making the triangle the smallest stable relationship unit. Hierarchy is a structural and strategic concept (Minuchin, Haley), not the reason Bowen gave for triangles.

76. A Parallel process

Parallel process happens when dynamics from the counseling relationship show up in the supervisory relationship, often without the supervisee realizing it. The supervisor can use this to help the supervisee understand the client. Countertransference refers to the counselor's reactions to the client, not to the reenactment of those dynamics in supervision.

77. C Standard error of the difference

The standard error of the difference combines the measurement error of both scores and shows how large a gap must be to count as meaningful. The SEM applies to a single score. The standard error of estimate concerns the accuracy of predicting a criterion from a predictor.

78. C Developing discrepancy

Developing discrepancy helps clients notice the gap between their deeply held values or goals and their current behavior, which builds motivation from within. Agreement with a twist is a response to sustain talk or discord that agrees with the client and then adds a reframe, and supporting self-efficacy focuses on the client's confidence in her ability to change.

79. D Memory and practice effects across so short an interval may have inflated it

With only two days between sessions, students may remember specific items and their answers, which pushes the correlation up artificially. Very long intervals create the opposite problem, because real change in the trait lowers the coefficient. That makes a two-day gap the wrong worry to have about learning.

80. C a limited number of sessions, often about ten, were spaced roughly a month apart

The Milan team typically saw families for about ten sessions spaced about a month apart, allowing time for their interventions to work through the system. The approach was brief in session count but long in calendar time, not long in session length or followed by open-ended individual therapy.

81. B Develop a concrete quit plan with a start date and coping strategies for urges

Carl is in the preparation stage: he intends to act soon and has taken small steps. Goals at this stage focus on building a specific action plan. Raising awareness and weighing pros and cons fit precontemplation and contemplation, and relapse prevention fits maintenance.

82. A Cognitive behavioral therapy with graduated exposure, such as the Coping Cat program

CBT with graduated exposure (e.g., Kendall's Coping Cat) is the best-supported psychotherapy for childhood anxiety disorders, and the CAMS trial found CBT, sertraline, and their combination all effective. Letting him stay home and providing repeated reassurance are accommodations that reinforce avoidance and maintain anxiety.

83. A Emotionally focused couple therapy

Emotionally focused couple therapy (Johnson) is an evidence-based approach that conceptualizes distress as a negative pursue-withdraw interaction cycle driven by unmet attachment needs and works to restructure emotional bonds. Bowen therapy and strategic therapy are established family approaches, but they do not target the attachment cycle directly and have a weaker outcome evidence base for couple distress.

84. A Disinhibited social engagement disorder

Disinhibited social engagement disorder involves overly familiar behavior with unfamiliar adults and failure to check back with caregivers, following extremes of insufficient care. Reactive attachment disorder is marked by inhibited, emotionally withdrawn behavior and rarely seeking comfort when distressed, the opposite of Lily's presentation. Her social disinhibition stems from early neglect rather than impulsivity alone.

85. C Minnesota Importance Questionnaire

The Minnesota Importance Questionnaire, based on the Theory of Work Adjustment, measures work needs and values (such as autonomy, recognition, and achievement) and matches them to occupational reinforcer patterns. The Strong and Kuder measure interests rather than the work needs Omar describes. The Career Maturity Inventory measures readiness to make career decisions, mainly in adolescents.

86. A As resistance that carries meaning and should be gently explored and interpreted

In psychodynamic work, resistance such as lateness and changing the subject signals anxiety-laden material and is explored as part of the therapy, not managed away. A behavioral contract deals with the surface behavior and ignores what the avoidance means.

87. B Preparation

Preparation is defined by an intention to act in the near future (usually within 30 days), often with some small behavioral step already taken. Contemplation involves serious consideration of change within roughly the next 6 months without commitment, and action involves overt behavior change already under way.

88. A Arrange an emergency evaluation for inpatient hospitalization

A specific plan, intent, available means, and refusal to engage in safety planning indicate imminent risk, which calls for the most protective level of care. Partial hospitalization and more frequent outpatient contact leave her alone with the means tonight, and no-suicide contracts have no evidence of preventing suicide.

89. B Maintain confidentiality, since there is no current danger

Confidentiality exceptions are aimed at preventing serious and foreseeable future harm (ACA Code of Ethics B.2.a). In general, counselors have no duty to report a client's past crimes, apart from specific mandated-reporting categories such as child abuse. Reporting the theft would be an unjustified breach.

90. D Furious. You're really angry about how that meeting was handled.

When a client corrects a reflection, the counselor should accept the correction and reflect the client's own label; the check-out has done its job. Suggesting that anger masks sadness is an interpretation that disputes the client's self-report immediately after being corrected, and jumping to action skips acknowledging the feeling.

91. D Action

The MSJCC lists attitudes and beliefs, knowledge, skills, and action (AKSA) as aspirational competencies within each developmental domain. Advocacy is tempting because "counseling and advocacy interventions" is one of the four developmental domains, but it is not the competency that was added.

92. B Explain that the scale reflects similarity to satisfied physicians' interests, not likely success

Strong Occupational Scales compare a person's pattern of likes and dislikes with those of satisfied workers in an occupation; they measure interest similarity, not ability or likelihood of success. Calling the result invalid because of grades is wrong, since an interest score can be valid even when ability is not yet shown; the counselor should help her look at interests and abilities as separate pieces of evidence.

93. C Corrective recapitulation of the primary family group

Yalom describes the group as resembling a family in which members relive early family conflicts with leaders and peers, and then work through them correctively rather than repeating old roles. Development of socializing techniques involves acquiring basic social skills, which is not the issue here; Luis is re-enacting and revising family-based relational patterns.

94. B genuineness and realistic perceptions of each other, apart from transference

Gelso describes the relationship as having three parts: the working alliance, the transference-countertransference configuration, and the real relationship, defined by genuineness and realistic perceptions of one another. Agreement on goals and tasks describes the working alliance, and displacement of feelings from past figures is transference.

95. C Explore Corey's intent, any plan, access to weapons, and history of violence

A vague threat calls for a focused violence risk assessment covering intent, plan, means, target, and past violence before any duty-to-warn or duty-to-protect decision is made. Warning the supervisor or calling police based on an unclear statement may breach confidentiality without justification, while simply reflecting feelings leaves the risk unassessed.

96. B With atypical features

The atypical features specifier requires mood reactivity plus at least two of the following: weight gain or increased appetite, hypersomnia, leaden paralysis, and a long-standing pattern of interpersonal rejection sensitivity (DSM-5-TR). Laura has all of these. Melancholic features is close to the opposite picture, with lack of mood reactivity, early morning awakening, and weight loss.

97. B Awfulizing

Awfulizing is rating a bad event as more than 100% bad, as if it were the worst thing possible (Ellis). Low frustration tolerance is related, but it centers on "I can't stand it" about discomfort or hassle. Personalization is a term from Beck's distortions, not one of Ellis's core irrational belief processes.

98. A a divorce

In McGoldrick's conventions a single slash on the partner line marks separation and a double slash marks divorce. Cohabitation is shown with a dashed partner line, and conflict is shown with a zigzag relationship line rather than slashes.

99. C egocentrism

Children who choose their own view rather than the doll's demonstrate preoperational egocentrism, the difficulty taking another's visual perspective. Class inclusion is assessed with tasks such as asking whether there are more roses or more flowers, not with perspective-taking.

100. A asking Leah to restate it using "I" and notice how that feels

Gestalt counselors attend to language that disowns experience, such as using "you" or "it" instead of "I," and invite clients to own their statements to increase awareness and responsibility. Agreeing that most people would feel this way reinforces the generalizing language rather than helping Leah own her own feeling.

101. C Covert sensitization

Covert sensitization (Cautela) pairs an imagined unwanted behavior with an imagined aversive consequence to reduce the behavior's appeal. Aversion therapy uses an actual aversive stimulus, such as a nausea-inducing drug, rather than an imagined one.

102. C Type I error

Rejecting a null hypothesis that is actually true (claiming an effect that does not exist) is a Type I error, a false positive. A Type II error is the reverse: failing to detect an effect that really exists.

103. D Stage 3, good interpersonal relationships

Stage 3 (the 'good boy/good girl' orientation) bases moral judgments on living up to role expectations and gaining others' approval. Stage 2 reasoning would focus on what Heinz gets in return, not on what a good husband is expected to do.

104. A T-ACE

The T-ACE (Tolerance, Annoyed, Cut down, Eye-opener) adapted the CAGE for prenatal settings, replacing the guilt item with a tolerance question that is more sensitive among pregnant women. The original CAGE was developed with general adult populations and is less sensitive to risky drinking in pregnancy. The DAST-10 screens for drug use, and the CRAFFT targets adolescents.

105. D Recognizing the personal warning signs that a suicidal crisis may be developing

The Safety Planning Intervention begins with identifying warning signs (thoughts, moods, situations) that signal an approaching crisis. It then moves through internal coping strategies, social contacts and settings for distraction, people to ask for help, professional contacts, and finally making the environment safe. Means restriction is essential but is usually addressed as the final step.

106. D Binds tightly as a partial agonist and can displace full agonists

Buprenorphine binds mu-opioid receptors more tightly than full agonists such as heroin or fentanyl but activates them only partially. Given while full agonists still occupy receptors, it displaces them and can trigger precipitated withdrawal. Its partial agonism also creates a ceiling effect on respiratory depression, which is why it is not a full agonist like methadone.

107. D Fearful

Bartholomew's fearful style combines a negative model of self with a negative model of others, producing a desire for intimacy alongside avoidance from fear of rejection. Preoccupied adults also see themselves negatively, but they view others positively and pursue closeness anxiously rather than withdrawing.

108. D Several symptoms must appear in two or more settings

DSM-5-TR requires that several inattentive or hyperactive-impulsive symptoms be present in two or more settings, and Liam's symptoms appear only at school. The age-of-onset criterion is before 12 (age 7 was the DSM-IV threshold), the duration requirement is 6 months, and academic impairment is clearly present here, so it is not the criterion in doubt.

109. A "You're frustrated being here. Tell me more about what feels like a waste to you."

Corey describes early challenges to the leader as a normal transition-stage test of whether the group is safe; a nondefensive, open response models how to handle conflict. Citing credentials is defensive, and invoking the court shifts the leader into a punitive role that increases resistance.

110. B Adjustment disorder can still apply, with the persistent (chronic) specifier, because the stressor's consequences are ongoing

DSM-5-TR requires that adjustment disorder symptoms begin within 3 months of the stressor and not persist more than 6 months after the stressor or its consequences have ended. Because Ahmed's unemployment and financial consequences are ongoing, the diagnosis remains valid, and the persistent (chronic) specifier applies when symptoms last 6 months or longer. Persistent depressive disorder requires 2 years of depressed mood.

111. A Arrangements for continuation of services if the counselor becomes incapacitated or dies

ACA A.2.b lists continuation of services upon the counselor's incapacitation or death among required informed consent topics, along with purposes, risks, benefits, fees, credentials, and limits of confidentiality. The counselor's credentials and approach must be disclosed, but personal therapy history and private affiliations are not required elements.

112. D Relevant early experiences, core beliefs, intermediate beliefs, and automatic thoughts

J. Beck's cognitive conceptualization diagram links relevant childhood data to core beliefs, intermediate beliefs, and coping strategies, and then to the automatic thoughts, emotions, and behaviors in specific situations. An A-B-C behavioral analysis is useful but leaves out the belief levels at the center of a cognitive conceptualization.

113. B Acknowledge her courage, slow the pace, and check in on how she feels

Leaders help members pace self-disclosure so that they are not overwhelmed or left feeling exposed afterward (Corey; Yalom on vulnerability to shame after rapid disclosure). Abruptly moving on or criticizing her can feel like rejection, while pushing for full detail risks retraumatization.

114. A Exposure and response prevention

Exposure and response prevention, in which the client confronts contamination cues while refraining from washing, is the first-line psychological treatment for OCD. Habit reversal training is the evidence-based approach for body-focused repetitive behaviors and tics, not compulsions driven by obsessional fear.

115. D You've applied to many places and are still waiting to hear back.

A paraphrase feeds back the essence of the client's content in condensed form, often using some of the client's key words. The statement about feeling anxious and discouraged is a reflection of feeling, because it names emotions Carlos did not state directly. Repeating "twelve companies" and his checking is closer to restatement than to a condensed paraphrase.

116. B It is a recognized diagnosis with irritability, poor sleep, and low appetite

Cannabis withdrawal became an official diagnosis in DSM-5 and remains in DSM-5-TR. Symptoms include irritability, anxiety, sleep disturbance, decreased appetite or weight loss, restlessness, and depressed mood after cessation of heavy, prolonged use. The belief that cannabis cannot produce dependence is outdated, and Section III conditions are things like caffeine use disorder and internet gaming disorder.

117. D Reflection of meaning draws on the client's own frame of reference, while interpretation offers the counselor's.

In reflection of meaning, the counselor helps the client articulate their own values and sense of purpose; the meaning comes from the client. Interpretation or reframing provides a new perspective drawn from the counselor's frame of reference or a theory. Interpretation is an influencing skill, so describing it as a listening skill reverses Ivey's classification.

118. D CBT addressing distorted beliefs about chance and his triggers for gambling

CBT has the strongest evidence for gambling disorder, targeting cognitive distortions such as the gambler's fallacy and illusion of control, along with trigger management and relapse prevention; Gamblers Anonymous can be a useful adjunct. Controlled gambling is not an appropriate first goal for someone with significant harm who wants to stop.

119. A Provisionally consider alcohol-induced depressive disorder and reassess mood after a period of sustained abstinence

Depressive symptoms that develop during heavy alcohol use and began after it are often substance-induced, and DSM-5-TR suggests that persistence for a substantial period (about 1 month) after acute withdrawal or intoxication supports an independent depressive disorder. Diagnosing MDD now ignores the likely role of alcohol, and persistent depressive disorder requires 2 years. Waiting a full year to assign any diagnosis is unnecessary; reassessment after about a month of abstinence is the usual guide.

120. D retroflection

Retroflection is turning back onto oneself what one would like to do to someone else, such as directing anger inward through self-criticism or self-harm. Projection would involve disowning her anger and attributing it to her partner, which is not what Keisha is doing.

121. D Conduct a biopsychosocial and lethality assessment

Stage 1 of Roberts's seven-stage model is planning and conducting a thorough psychosocial and lethality (imminent danger) assessment. Establishing rapport is stage 2; in practice the two overlap, but the model places assessment of danger first so that safety drives everything that follows. Identifying major problems and exploring feelings are stages 3 and 4.

122. A Described normal acute grief and showed that brief help could aid recovery

Lindemann described the symptoms and course of normal acute grief and showed that timely, brief intervention could help prevent pathological grief, work that Caplan built on in developing crisis theory. PTSD did not enter the DSM until 1980. The five stages of grief were proposed by Kubler-Ross for dying patients, and structured debriefing was developed by Mitchell decades later.

123. A has a medium-sized relationship with outcome across orientations

Elliott and colleagues found empathy to be a robust, medium-sized predictor of outcome (around r = .28) across theoretical orientations, including cognitive-behavioral treatments. Counselor self-ratings of empathy were actually weaker predictors than client or observer ratings, which echoes Rogers' emphasis on the client's perception.

124. C To build the client's self-efficacy in managing suicidal urges independently

Stanley and Brown sequence the plan so clients first try strategies they can use alone, which strengthens their confidence that they can tolerate urges and makes the plan usable at any hour. The plan then escalates to social contacts, trusted helpers, and professionals if internal coping is not enough. Social support is not considered inferior; it is the next line of defense.

125. B reduce the power differential and support informed, collaborative choice

Feminist therapists aim for an egalitarian relationship, demystifying counseling and disclosing their values so clients can make informed choices and share power (consistent with ACA Code of Ethics A.2 on informed consent). Establishing expert authority runs counter to this aim, and feminist counselors explicitly avoid imposing their values. A release of information is a separate document.

126. C Refrain from viewing it unless Chris consents, and explore his weekends directly in session

ACA H.6.c states that counselors respect the privacy of clients' presence on social media unless given consent to view such information. Public availability does not change the ethical standard, and viewing covertly or through a colleague would undermine trust and the informed consent process.

127. A Robert Wubbolding

Robert Wubbolding, a close colleague of Glasser, formulated the WDEP system (wants, doing/direction, evaluation, planning) to make reality therapy procedures teachable. Glasser founded reality therapy and choice theory but did not create the WDEP acronym. Insoo Kim Berg co-developed solution-focused brief therapy, and Michael White co-developed narrative therapy.

128. A The emotional and behavioral consequences that follow

In REBT, A is the activating event, B is the belief about it, and C is the emotional and behavioral consequence (Ellis). Beliefs are tempting because they sit at the center of the model, but they are B. The counselor's challenge is D, disputing.

129. B Cognitive processing therapy, which challenges stuck points about the trauma

Cognitive processing therapy (Resick) is a first-line PTSD treatment that specifically identifies and challenges "stuck points" such as self-blame and distorted beliefs about safety and responsibility. Psychological first aid is an early post-disaster intervention, not a treatment for chronic PTSD, and single-session debriefing is not recommended and may worsen outcomes.

130. C Autonomy

Autonomy (Kitchener) is respect for a competent client's right to make independent choices about his or her own life. Beneficence, doing good for the client, is the tempting alternative because the children believe the move is in Harold's best interest, but the counselor is prioritizing Harold's self-determination rather than imposing a judgment about what is best.

131. C What Marcus is currently doing to get what he wants

In WDEP, W (wants) is followed by D (doing and direction), then E (self-evaluation), then P (planning). Asking Marcus to evaluate whether his behavior is working is the tempting answer, but evaluation requires first getting a clear, specific description of what he is actually doing. Reality therapy does not dwell on childhood history (Wubbolding).

132. C Time-out is negatively reinforcing the behavior by letting Aiden escape math

Because the behavior occurs during a specific demand and the consequence removes Aiden from that demand, time-out functions as escape, which negatively reinforces disruption. Teacher attention is an unlikely maintaining consequence here because he sits alone, and an extinction burst would not apply since the behavior is being consistently followed by a consequence rather than having reinforcement withheld.

133. B Objective

Counselor observations of appearance, affect, and speech, along with standardized test results, are Objective data. The Assessment section is where the counselor interprets those data, for example by noting that the score falls in the moderately severe range and what that means for progress toward treatment goals.

134. C Self-instructional training

Meichenbaum and Goodman's self-instructional training moves from adult modeling with spoken self-talk to the child's own covert self-instruction. Stress inoculation training is tempting because Meichenbaum also developed it and it uses self-statements, but it targets coping with stress through three phases, not this fading of spoken self-guidance for impulsive children.

135. C Conjoint therapy

Yalom uses conjoint therapy for individual and group treatment provided by different therapists, and combined therapy when the same therapist provides both. Co-therapy refers to two leaders sharing one group.

136. A Somatic symptom disorder

Somatic symptom disorder involves distressing somatic symptoms plus excessive thoughts, feelings, or behaviors about them for more than 6 months; the symptoms need not be medically unexplained. Illness anxiety disorder is the tempting choice, but it applies when somatic symptoms are absent or only mild, whereas Gerald has prominent, distressing chest symptoms.

137. D proportionate to the threat, not repressed, and usable for growth

May described normal anxiety as appropriate to the situation, not requiring repression, and something that can be faced constructively as a stimulus for growth. Anxiety that is disproportionate and repressed is his definition of neurotic anxiety, while conflict among id, ego, and superego is Freud's model.

138. C It upheld the program's right to require remediation under the ACA Code

The Eleventh Circuit affirmed the denial of the student's request for a preliminary injunction, finding the remediation plan a viewpoint-neutral, reasonable way to enforce the program's curricular requirements, including adherence to the ACA Code of Ethics. Along with Ward v. Wilbanks, the case is often cited to show that programs may require students to counsel without imposing their personal values (see the 2014 Code's A.4.b and F.5.a).

139. A Refer Kyle to individual care and revisit group once he is stable

ACA Code of Ethics A.9.a directs counselors to select members whose well-being will not be jeopardized and who will not impede the group; Yalom lists active psychosis and paranoia among poor fits for interactional outpatient groups. Adding individual check-ins sounds protective but still places an acutely symptomatic client in an intensive interpersonal setting he is unlikely to tolerate.

140. B Self-Directed Search

Holland's Self-Directed Search (SDS) was intentionally designed so that clients can take, score, and begin interpreting it on their own, yielding a summary code from the RIASEC types. The Strong Interest Inventory also reports Holland themes, but it requires computer scoring and professional interpretation.

141. D Concordant countertransference

Racker described concordant countertransference as the counselor identifying with the client's own self and feelings, empathically sharing the client's inner experience. Complementary countertransference is identification with one of the client's internal objects, such as a critical parent, so the counselor feels like that figure rather than like the client.

142. C Culturally adapting the delivery, framing, and goals while retaining core components

Culturally adapted evidence-based treatments that modify language, framing, goals, and delivery while preserving core mechanisms have shown benefit for ethnic and cultural minority clients (e.g., Bernal; Hall meta-analyses). Requiring direct emotional expression would impose the counselor's cultural values, and abandoning the evidence base is unnecessary.

143. D Research on continuing bonds showing that ongoing connection with the deceased can be adaptive

Worden updated Task IV after continuing bonds research (Klass, Silverman, and Nickman) challenged the Freudian idea that healthy mourning requires detaching from the deceased. The revision predates the DSM-5-TR (2022), and Worden explicitly rejects fixed-stage models.

144. D Community collaboration

In the ACA Advocacy Competencies, community collaboration involves acting with community groups at the community level, contributing the counselor's skills as allies while the groups lead the change effort, as in this coalition. Systems advocacy involves the counselor acting on behalf of clients to change an institution or system directly. Social/political advocacy operates in the public arena, such as lobbying legislators, and client/student empowerment focuses on helping individual clients build self-advocacy skills.

145. D Paranoid personality disorder

Paranoid personality disorder is a pervasive distrust and suspiciousness of others beginning by early adulthood, without persistent psychotic symptoms (DSM-5-TR). Delusional disorder, persecutory type, is tempting, but it requires a fixed false belief held despite contrary evidence, whereas Victor can consider that he may be wrong. Schizotypal personality disorder would also include eccentric behavior and odd beliefs or perceptual experiences.

146. D Quick, situation-specific thoughts that often go unexamined

Automatic thoughts are brief, spontaneous thoughts tied to specific situations, and clients usually accept them without question (Beck). Global beliefs formed in childhood are core beliefs, and conditional rules are intermediate beliefs, which are deeper levels in Beck's model.

147. B Secondary traumatic stress

Secondary traumatic stress involves PTSD-like symptoms such as intrusion, avoidance, and arousal that come from indirect exposure to another person's trauma, and it can start suddenly after a single exposure. Vicarious trauma is the gradual, cumulative change in core beliefs over many trauma cases. Burnout builds gradually from work conditions and does not involve trauma-specific intrusive symptoms.

148. B The difference is statistically significant but of little practical importance

With very large samples, even trivial differences reach statistical significance; effect size indicates practical or clinical importance, and $d = 0.08$ is well below Cohen's small benchmark. A small p value reflects confidence that some difference exists, not the size of that difference.

149. A Determine and follow the licensure laws that apply in Kentucky, where the client will be located

ACA Code of Ethics H.1.b notes that counselors providing distance services may be subject to the laws and regulations of both the counselor's practicing location and the client's place of residence, and licensure jurisdiction generally follows where the client is physically located during sessions. A client cannot waive state licensure laws. Termination is unnecessary if Kentucky permits temporary practice or Lucia obtains authorization, such as a Counseling Compact privilege where available, and abrupt termination would risk abandonment.

150. A Taper sessions to every two to three weeks and schedule a later booster session

Gradually spacing sessions lets Gloria practice skills independently while support remains available, and booster sessions help maintain gains in anxiety treatment. Waiting until she has no anxiety about ending fosters dependence, while an abrupt ending ignores her legitimate concern.

151. B It describes interrelated, context-shaped processes rather than fixed stages

D'Augelli (1994) proposed six interrelated identity processes (such as exiting heterosexual identity and entering an LGB community) that can occur in varying order across the lifespan and are shaped by personal, interactive, and sociohistorical factors. Cass's model, by contrast, describes six sequential stages. D'Augelli's model is explicitly lifespan-oriented rather than limited to adolescence, addresses sexual orientation rather than gender identity, and does not treat parental disclosure as a mandatory endpoint.

152. D Dopamine

Despite different primary mechanisms, alcohol, opioids, stimulants, nicotine, and cannabis all increase dopamine release in the mesolimbic pathway, which reinforces drug-taking. GABA is tempting because alcohol and benzodiazepines enhance GABA activity, but their rewarding effects still involve downstream dopamine release. Serotonin and acetylcholine are not the common reward signal.

153. D The cognitive triad of negative views of self, world, and future

Beck's cognitive triad describes the depressed person's negative view of self ("I'm a failure"), the world ("nobody cares"), and the future ("never going to get better"). The internal-stable-global attributional style comes from the reformulated learned helplessness model and concerns how people explain specific events, not Beck's model.

154. A Frank Parsons

Frank Parsons founded the Vocation Bureau in 1908, and his posthumous book Choosing a Vocation (1909) outlined matching personal traits with job requirements. Jesse B. Davis is tempting because he also worked in early guidance, but he is known for implementing school-based guidance in Michigan.

155. A It does not meet Criterion A, because exposure through electronic media counts only if it is work-related

DSM-5-TR Criterion A excludes exposure through electronic media, television, movies, or pictures unless it is work-related. "Learning about" a traumatic event qualifies only when it happened to a close family member or friend. Nina's symptoms are clinically important and deserve attention, but they cannot satisfy Criterion A, and symptom severity never establishes whether exposure qualifies.

156. D circular questioning

Circular questioning, developed by the Milan team, asks one member about relationships and sequences between other members, revealing differences and connections in the system. Tracking follows content to join with the family, scaling questions come from solution-focused therapy, and externalizing questions come from narrative therapy.

157. B Before age 6 or after age 18

DSM-5-TR states that DMDD should not be diagnosed for the first time before age 6 or after age 18, and that onset of the symptoms must occur before age 10. Students often confuse the age-of-onset requirement (before 10) with the age range for first diagnosis (6 to 18).

158. C Gambler's fallacy

The gambler's fallacy is the belief that past independent random outcomes change the probability of future ones, so a machine is 'due' to pay. The illusion of control is tempting but refers to believing that skill, rituals, or choices can influence chance outcomes. Chasing is a behavioral criterion of gambling disorder rather than a cognitive distortion.

159. B It is designed to be self-administered, self-scored, and self-interpreted, yielding a three-letter summary code

Holland designed the SDS so clients could administer, score, and interpret it themselves, producing a RIASEC summary code to use with the Occupations Finder. Comparing responses with satisfied workers describes the Strong Occupational Scales. Forced-choice triads describe traditional Kuder instruments, and measuring work needs describes the Minnesota Importance Questionnaire.

160. C Inform the parents, ideally involving Mateo in how it is shared

Repeated drunk driving is a serious and foreseeable risk to Mateo and others, which meets both the intake agreement's exception and ACA Code of Ethics B.2.a. Standard B.2.e encourages involving the client in the disclosure when possible. Reporting to police is not required and goes beyond the minimum disclosure needed.

161. B Delirium

Delirium is a disturbance in attention and awareness that develops over hours to days, fluctuates during the day, and is caused by a medical condition, substance, or medication, such as an infection (DSM-5-TR). Major neurocognitive disorder due to Alzheimer's disease is tempting given her age, but it has an insidious onset and gradual progression rather than an abrupt, fluctuating change. Delirium is a medical emergency requiring treatment of the underlying cause.

162. C Reaction formation

Reaction formation manages an unacceptable impulse by expressing its exaggerated opposite, so hidden resentment shows up as excessive affection and praise. Undoing involves acting to symbolically cancel a specific prior act or thought, and no such earlier act is described here.

163. A "I keep wondering whether God has abandoned me."

Pargament describes negative religious coping as including spiritual discontent, punishing God reappraisals, and feeling abandoned by God; it is consistently linked with greater distress. Seeking support from clergy and congregation, benevolent religious reappraisal, and seeking a closer connection with God are forms of positive religious coping associated with better outcomes.

164. B He must respond, but may assert privilege for the client until she waives it or a court orders disclosure

A subpoena is a legal command to respond, and ignoring it can lead to contempt. Responding is different from disclosing. When the client has not waived privilege and no judge has ordered disclosure, the counselor (usually with legal advice) asserts privilege for the client. Payment of fees has nothing to do with whether privileged material can be disclosed.

165. B Diffusion of treatment

Diffusion (or imitation) of treatment occurs when the control group is exposed to elements of the intervention, shrinking observed group differences. Compensatory rivalry differs because the control group simply works harder to compete, rather than actually adopting the treatment.

166. C Interpret any results cautiously, noting norm limitations, or select a better-normed instrument

ACA Code of Ethics E.8 requires caution when using instruments normed on populations other than the client's, and E.6.a calls for selecting instruments with appropriate psychometric properties. Standardized administration does not make results valid for a group absent from the norms. An informal translation changes the instrument and undermines its validity, and arbitrary score adjustments have no psychometric basis.

167. C Results at least this extreme would occur 3% of the time if the null were true

A p value is the probability of obtaining results as extreme as those observed, assuming the null hypothesis is true. It is a common misconception that p gives the probability that the null itself is true; p is conditional on the null, so it cannot assign a probability to the null.

168. A Decline to endorse him until the impairment has been adequately addressed

ACA F.6.d states that supervisors endorse supervisees only when they believe they are qualified, and regardless of qualifications do not endorse supervisees they believe are impaired in any way that would interfere with their duties. Meeting hour requirements does not override this. Endorsing while privately noting concerns or recommending treatment still certifies an impaired practitioner to the board.

169. B Gentle assumption

Gentle assumption, a technique described by Shea, presumes the behavior has happened and asks about its extent, such as "what other ways," which makes it easier for clients to disclose more. A behavioral incident question asks for specific facts about a particular event (for example, what exactly happened next), rather than presuming more of the behavior exists.

170. B The abstinence violation effect

The abstinence violation effect occurs when a lapse is attributed to internal, stable, global causes ('I have no willpower'), producing guilt and loss of control that turns a lapse into a full relapse. Relapse prevention reframes lapses as learning opportunities. A seemingly irrelevant decision is a choice that sets up a high-risk situation before use, and kindling refers to worsening withdrawal after repeated withdrawals.

171. A Explain the results may be outdated and give a current inventory

ACA Code of Ethics E.11 directs counselors not to rely on outdated results for current purposes, and interests measured in mid-adolescence are considerably less stable than adult interests, so re-assessment with a current instrument is appropriate. Simply adding a caveat still bases a major decision on data that may no longer reflect who Priya is.

172. A The anxiety must occur in peer settings and not only during interactions with adults

DSM-5-TR specifies that in children the social anxiety must occur in peer settings and not just with adults, to distinguish it from typical shyness with grown-ups. The 6-month duration applies at all ages, and children are not required to recognize that their fear is excessive. Refusing to speak in specific settings describes selective mutism.

173. B Make reasonable efforts to warn Rick and notify law enforcement

Statutes modeled on California Civil Code 43.92 discharge the duty when the clinician makes reasonable efforts to communicate the threat to the identifiable victim and to law enforcement. Consultation and documentation are sound practice, but they cannot delay protective action when the threat is specific, imminent, and the client refuses hospitalization; extra sessions and no-harm contracts do nothing to protect the victim.

174. A To continue repeated exposure that supports emotional processing of the memory

Daily listening to the recording extends imaginal exposure between sessions, promoting emotional processing and reduced fear and avoidance. Identifying distortions with worksheets is characteristic of CPT, and PE's goal is not factual accuracy or relaxation; listening is expected to bring up distress at first.

175. C He should not use 'Dr.' in counseling, since his doctorate is in an unrelated field

ACA C.4.d states that counselors clearly state their highest earned degree in counseling or a closely related field and do not use 'Dr.' in a counseling context when the doctorate is not in counseling or a related field. Accreditation of the university does not change the field of the degree. Listing the license does not cure the misleading impression created by the title (C.4.a).

176. C Carl Jung

Jung proposed the term 'Electra complex'; Freud rejected it and preferred to speak of the female Oedipus complex. Karen Horney is tempting because she criticized Freud's account of female development, especially penis envy, but she did not coin the Electra term.

177. D The Child Abuse Prevention and Treatment Act (CAPTA)

CAPTA, first passed in 1974, conditions federal grants on states having child abuse reporting and investigation systems and sets a minimum federal definition of child abuse and neglect. The specific reporting duties are found in each state's statutes. FERPA governs education records, the Elder Justice Act addresses elder abuse, and HIPAA governs health information privacy, although it does allow disclosures for abuse reporting.

178. C Arrange a medical evaluation for managed withdrawal first

A history of withdrawal seizures and heavy daily drinking signal high withdrawal risk, the first dimension considered in ASAM-style placement. Withdrawal must be managed medically before he can safely engage at a less intensive level. Outpatient counseling alone or a sober living home does not address the risk of seizures or delirium, and an unsupervised self-taper is unsafe for someone with his history.

179. B starting with the least intensive effective intervention and stepping up as needed

Stepped care begins with the least intensive intervention likely to be effective, monitors outcomes, and moves to more intensive treatment when the client does not respond adequately. Starting high and stepping down describes step-down care after a higher level of care, such as moving from inpatient to partial hospitalization, which is a different concept.

180. D Summarize the concerns he has raised and ask which he would like to focus on

Ivey describes summarizing as a way to organize scattered material and make a transition; ending with an invitation to choose a focus keeps Jordan in charge of the direction. A string of closed questions would shift control to the counselor, and confronting his pattern this early could feel critical before the concerns have been organized.

181. C The correlation shows association, but it cannot establish that counseling caused fewer absences

Correlation indicates the strength and direction of a relationship but cannot establish causation; motivation, family support, or other third variables could drive both attendance at counseling and school attendance. A negative r means that as one variable rises the other falls, not that counseling raises absences, and -.45 is a moderate relationship.

182. D Persistent depressive disorder

In children and adolescents, DSM-5-TR allows irritable mood and shortens the required duration of persistent depressive disorder to 1 year, with at least two additional symptoms and no symptom-free interval longer than 2 months. Disruptive mood dysregulation disorder requires frequent, severe temper outbursts beginning before age 10, which Jalen does not have. MDD is ruled out because full major depressive episode criteria were never met.

183. D Four time frames: presenting events, recent events, past events, and immediate events

The CASE Approach explores suicidal ideation and behavior through four time frames, starting with the presenting event, then the past two months, then past history, and finally immediate ideation and intent, so it builds rapport before reaching the most sensitive questions. Weighing risk and protective factors is part of overall risk formulation, but it is not how CASE structures the interview.

184. D discuss a referral for a medication evaluation with Kevin while continuing counseling

For severe depression that has not responded to an adequate trial of psychotherapy, combined treatment is supported, so a medication evaluation while counseling continues is the best next step. Ending counseling and transferring him is tempting because he has not benefited, but it disrupts a working alliance and does not address the likely need for combined treatment.

185. C Assessment

The Assessment section contains the counselor's interpretation of the session data, including progress toward goals and any changes in clinical picture. Subjective records the client's own report, Objective records observable data, and Plan lists next steps.

186. D Common humanity

Neff's self-compassion has three components: self-kindness, common humanity, and mindfulness. Seeing one's suffering or failure as part of shared human experience, not something that happens only to oneself, is common humanity. Self-esteem is a different construct based on evaluating oneself, and Neff contrasts it with self-compassion.

187. D Acknowledging the racial difference openly and inviting Jamal to share how it may affect their work

Cultural humility involves an other-oriented, open stance that acknowledges the limits of one's understanding, and broaching the racial difference directly invites Jamal's perspective. Reassuring him about training or equal treatment centers Erin's defensiveness and can feel color-blind and dismissive. An immediate referral offer is premature, since Jamal voiced doubt rather than requesting a change, and it may feel like rejection.

188. C Interventions show the most benefit when targeted to those with high distress or complicated grief

Meta-analyses have found little benefit from routinely offering intervention to all bereaved people, many of whom are resilient, and stronger effects when treatment targets those showing complicated or prolonged grief. This is consistent with Worden's distinction between grief counseling for uncomplicated grief and grief therapy for complicated grief.

189. A midlife transition

Levinson placed the midlife transition at roughly ages 40 to 45 and described it as a time of reappraising the life structure, often with a heightened sense of mortality. The entering middle adulthood period (about 45 to 50) follows this transition and involves building a new life structure, not questioning the old one.

190. D psychological reactance theory

Brehm's psychological reactance theory proposes that people are motivated to restore a threatened freedom, which helps explain why heavy persuasion or confrontation can increase resistance. Cognitive dissonance theory is about discomfort from inconsistent cognitions, a related but different idea, and learned helplessness describes passivity after uncontrollable events.

191. B Obtain clients' informed consent, confirm a business associate agreement, and review each draft note

Recording sessions requires client permission (ACA B.6.c), and ACA guidance on AI emphasizes informed consent about AI use, protection of confidentiality, and counselor responsibility for accuracy. A vendor processing PHI must have a business associate agreement, and counselors remain accountable for every note they sign.

192. A ABAB reversal design

Alternating baseline and intervention phases, including withdrawal and reinstatement of the intervention, is an ABAB reversal (withdrawal) design. A simple AB design lacks the withdrawal and return phases that let the counselor see whether behavior tracks the intervention.

193. C Inform Victor before disclosing and involve him in the process if possible

ACA Code of Ethics B.2.e states that, to the extent possible, clients are informed before confidential information is disclosed and are involved in the decision-making. Client consent is not required for a duty-to-protect disclosure, so making the warning depend on his signature would be wrong. Disclosing without telling him is appropriate only when informing him would increase risk.

194. B Covers consumption, dependence, and alcohol-related harm in 10 items

The 10-item AUDIT covers hazardous consumption, dependence symptoms, and harmful consequences, which allows detection of risky drinking before dependence develops; a score of 8 or more commonly indicates hazardous use. Four yes/no lifetime questions describe the CAGE itself. The AUDIT is alcohol-specific; drug screening uses tools such as the DAST.

195. A Acknowledge his frustration without defensiveness and ask what isn't working

Repairing a confrontation rupture begins with the counselor responding nondefensively, validating the client's complaint, and exploring it collaboratively, including the counselor's own contribution. Explaining the rationale or interpreting transference can feel defensive and deepen the rupture, and rushing to refer abandons the chance to repair.

196. C The seasonal pattern specifier should not be applied, because the episodes are tied to a seasonal psychosocial stressor

DSM-5-TR excludes episodes with an obvious seasonal psychosocial stressor, such as being regularly unemployed every winter, from the seasonal pattern specifier. Carl's episodes meet the timing requirements, which is what makes applying the specifier tempting, but the layoff better explains the pattern. Persistent depressive disorder is ruled out because he has full remissions each spring, and remission is not evidence of hypomania.

197. C Could you tell me what brings you in today?

A "could" question is the most open format and lets Linda define her concern in her own words. Asking whether she is here because of the divorce is a closed, leading question that assumes the referral reason. A "why" question can make clients feel they must justify themselves.

198. A An instrumental learning experience

Krumboltz described instrumental learning experiences as those in which a behavior is followed by consequences (here, building models followed by praise) that shape future behavior. Associative learning experiences occur when a neutral stimulus is paired with a positive or negative one, often through observation or exposure to others' messages. Task approach skills are the work habits and problem-solving skills a person brings to tasks, and worldview generalizations are beliefs about the environment.

199. B Goals are broad desired outcomes; objectives are specific, measurable steps toward them

Treatment plans typically move from problem statements to broad long-term goals, then to measurable short-term objectives, then to interventions. Reversing the time frame is the most common confusion: objectives are the short-term, measurable steps, while interventions (not objectives) describe what the counselor will do.

200. C Most may be diagnosed if traits persist 1 year, except antisocial

DSM-5-TR permits personality disorder diagnoses in individuals younger than 18 when the maladaptive traits are pervasive, persistent, and not limited to a developmental stage, and have been present for at least 1 year; antisocial personality disorder is the exception and cannot be diagnosed before 18. The belief that no personality disorder can be diagnosed in minors is a common misconception. There is no rule limiting early diagnosis to borderline personality disorder.