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NCE

Full-Length Practice Exam

Exam 8

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 8: 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. B Fidelity

Fidelity involves keeping promises, honoring commitments, and being trustworthy in the counseling relationship. Veracity (truthfulness) is the tempting choice, but Ari's action centers on honoring a specific commitment made to Jordan rather than on telling the truth about a fact.

2. A Wechsler Individual Achievement Test, Fourth Edition (WIAT-4)

The WIAT-4 is an individually administered achievement test with norm-referenced reading subtests covering decoding, fluency, and comprehension. The WISC-V is tempting because it is often part of the same evaluation, but it measures cognitive ability rather than attained academic skills; the Bender-Gestalt assesses visual-motor integration, and the Conners 4 rates ADHD symptoms.

3. A Cyclothymic disorder

Cyclothymic disorder requires at least 2 years (1 year in youth) of numerous periods with hypomanic and depressive symptoms that never meet full episode criteria, present at least half the time, with no symptom-free interval longer than 2 months (DSM-5-TR). Bipolar II requires full hypomanic and major depressive episodes. Persistent depressive disorder does not account for the recurrent periods of elevated mood.

4. D Losing the "as if" quality of empathy and becoming overidentified

Rogers defined empathy as sensing the client's private world as if it were one's own without ever losing the "as if" quality. Nina is responding to her own grief rather than Ruth's experience, which is overidentification. Her tears may be genuine, but congruence does not make a reaction therapeutic when it pulls focus from the client.

5. C Assess the function of the self-injury and conduct a suicide risk assessment

Nonsuicidal self-injury differs from a suicide attempt in intent, but it is a strong risk factor for later suicidal behavior, so counselors should assess both its function and current suicide risk. Calling it attention-seeking dismisses a real coping problem, and self-injury alone does not establish borderline personality disorder, especially in an adolescent.

6. B Complementary countertransference

In complementary countertransference, the counselor identifies with a significant figure in the client's internal world, here the critical father, and starts to feel and act like that person. Concordant countertransference would mean the counselor feels what Ben feels, such as hurt or inadequacy, rather than what his father felt.

7. A externalizing the problem

Externalizing conversations (White and Epston) separate the person from the problem by treating it as an outside entity, often named and capitalized, so the client can examine and resist its influence. Reframing gives a situation a new meaning, confronting points out inconsistencies, and normalizing presents an experience as common, none of which turns the problem into a separate entity.

8. D Reschedule or arrange coverage until he can attend fully

ACA Code C.2.g covers impairment from physical as well as mental or emotional problems, and it directs counselors not to provide services when impaired. Rescheduling or arranging coverage for a short period protects clients without abandoning them. Letting clients decide puts the counselor's ethical responsibility on them, and shorter sessions do not fix impaired attention.

9. C Low differentiation, suggesting her interests are not yet well defined

Differentiation refers to how clearly one or two types stand out above the others; a flat profile with nearly equal scores is undifferentiated and often accompanies indecision or limited exposure. Consistency concerns the hexagonal relationship between the top types, which cannot be judged meaningfully when no types stand out. Congruence requires comparing her type to a specific environment, which the vignette does not provide.

10. B Administer the MoCA, which is more sensitive to mild cognitive impairment

The Montreal Cognitive Assessment includes more executive-function and complex attention tasks and is more sensitive than the MMSE to mild cognitive impairment, which can produce ceiling effects on the MMSE. Screening for depression is reasonable as part of a broader evaluation, but attributing her complaints to depression without assessing cognition further would be premature.

11. D Seeking Safety

Seeking Safety (Najavits) is an integrated, present-focused, coping-skills treatment designed for co-occurring trauma and substance use, and it does not require trauma processing. Prolonged exposure and EMDR are effective PTSD treatments, but both center on processing traumatic memories and are not designed to treat substance use. The Matrix Model is an intensive outpatient approach for stimulant use disorders.

12. A Introduce herself, explain her role, and ask whether Elena needs anything

The first core action of Psychological First Aid is contact and engagement: responding to or initiating contact in a nonintrusive, compassionate way by introducing oneself, describing one's role, and asking about immediate needs. Screening and referral come later, as part of information gathering and linkage with services. Asking for a narrative of the event is not part of PFA and can increase distress.

13. A Explore the injury history further and consider referral for neuropsychological evaluation

Loss of consciousness followed by lasting irritability and memory problems raises the question of traumatic brain injury, which calls for a fuller history and possibly a neuropsychological or medical evaluation. Treating the changes as only an adjustment or trauma reaction could miss a neurocognitive cause, and personality change due to a medical condition is not a personality disorder.

14. A Students who exercise more tend to report lower depression

A negative correlation means higher scores on one variable go with lower scores on the other, and r = -.45 is a moderate association; correlation alone cannot establish causation. The variance shared is r squared, about 20%, not 45%, and the sign indicates direction, not strength.

15. A To discover what the symptom may help Ray avoid, revealing its purposive function

Adlerians use 'The Question' to clarify a symptom's purpose: the answer often names the task or responsibility the symptom lets the client avoid. It looks like the solution-focused miracle question, but its goal is to reveal the symptom's purpose, not to find exceptions or build solutions.

16. B Accepting the reality of the loss

Worden's first task is to accept the reality of the loss, intellectually and emotionally. Behaving as though the spouse will return suggests difficulty with that task. Adjusting to a world without the deceased (the third task) concerns new roles and skills, which assumes the reality of the death has already been accepted.

17. D Logistic regression

When the outcome is dichotomous and there are several predictors, logistic regression is the appropriate model because it estimates the odds of group membership. Multiple linear regression assumes a continuous criterion and can produce impossible predicted values for a yes/no outcome.

18. C Integrated treatment that addresses both disorders by the same team at the same time

For co-occurring disorders, SAMHSA and the research literature support integrated treatment, in which one team addresses both conditions concurrently, which improves engagement and outcomes compared with sequential or parallel care. Requiring prolonged sobriety before treating depression leaves a disorder that fuels relapse untreated.

19. C Oneself, other people, and life conditions

Ellis described three core demands: I must do well, others must treat me well, and life must be easy or fair. Thoughts, feelings, and behaviors is a tempting choice because it describes the CBT triangle, but it is not how Ellis grouped the musts.

20. C Campbell and Fiske

Campbell and Fiske (1959) introduced the multitrait-multimethod matrix, which examines correlations among several traits measured by several methods. Cronbach and Meehl (1955) wrote the foundational paper on construct validity in general, which makes them the most tempting wrong answer, but they did not create the matrix.

21. C Eigenwelt

The Eigenwelt is the 'own world,' the person's relationship with self. The Umwelt is the natural and physical world, the Mitwelt is the world of relationships with others, and the Uberwelt is the spiritual or ideal dimension that van Deurzen added later.

22. C Consult a colleague and consider temporarily reducing her caseload with referrals

Aisha's functioning in sessions is slipping, so ACA Code C.2.g calls for seeking help and limiting services as needed. Consultation plus a temporary caseload reduction with planned referrals or coverage protects clients while avoiding abandonment (A.12). Closing the practice abruptly risks abandonment, and making her loss a focus of sessions shifts attention onto the counselor.

23. A Small, benign crossings can gradually progress toward harmful violations

The slippery slope argument holds that minor boundary crossings, such as extended sessions or small personal disclosures, can incrementally erode boundaries and lead to exploitative violations, including sexual misconduct. Writers such as Lazarus and Zur have argued the opposing view that rigid boundaries can harm rapport, which is why that answer reflects the critique of the argument rather than the argument itself.

24. A reveals the client's own reasons and meanings for preferences during the sorting

Card sorts are qualitative, interactive tools; as clients group occupations and explain their choices, the counselor learns the personal meanings and reasons behind their preferences. They generally lack norms and formal reliability data, which are strengths of standardized inventories. Interpretation is a joint process, so the counselor is involved rather than removed.

25. B Recognizing her personal warning signs of an approaching crisis

The Stanley-Brown safety plan begins with identifying personal warning signs (thoughts, moods, situations) so the client knows when to use the plan. It then moves through internal coping strategies, people and social settings for distraction, people to ask for help, professionals and crisis lines, and finally making the environment safe. Lethal means counseling is essential, but it is the last step in the written plan's sequence.

26. D "Tell me more about how praying and moving on has worked for you and your family."

Inviting Dayo to describe his family's coping explores his worldview and treats it as a possible strength. Saying it's safe to talk about feelings here sounds supportive but implicitly devalues his family's way of coping. Calling the pattern avoidance pathologizes it, and generalizing about religious families risks stereotyping.

27. C As an occupational phenomenon resulting from unmanaged workplace stress

ICD-11 lists burnout (QD85) among factors influencing health status or contact with health services and calls it an occupational phenomenon, not a medical condition. It is defined as resulting from chronic workplace stress that has not been successfully managed. Neither ICD-11 nor DSM-5-TR classifies burnout as a trauma-related or adjustment disorder.

28. B 3

Carkhuff defined level 3 as the minimally facilitative, interchangeable response. Levels 1 and 2 subtract from the client's expression, while levels 4 and 5 are additive, reflecting deeper feelings and meanings the client has implied but not stated.

29. B Add a dated amendment that identifies and corrects the error while preserving the original entry

ACA A.1.b requires documentation that accurately reflects services and directs counselors to properly note amendments according to agency policy. Deleting or silently altering an entry undermines the integrity of the record and can appear to be falsification, while leaving a known error in place fails the accuracy requirement.

30. C Microinvalidation

Sue and colleagues classify the "alien in one's own land" theme, such as asking where someone is really from or praising a U.S.-born person's English, as a microinvalidation because it negates the person's identity and reality as an American. Microinsults convey rudeness or demean a person's heritage, such as ascribing lower intelligence or criminality, and are often confused with this theme. Microassaults are conscious, explicit attacks, and stereotype threat refers to performance effects of a stereotype rather than to a type of comment.

31. B Take a more directive role until he regains the ability to act

James and Gilliland link the counselor's degree of directiveness to the client's mobility: an immobile client who cannot make decisions needs a directive approach, a partially mobile client a collaborative one, and a fully mobile client a nondirective one. Paul is currently immobile, so the counselor should offer clear, concrete guidance and shift toward collaboration as he stabilizes. Delaying intervention leaves him without support at the point of greatest need.

32. B the employer's view of how well the worker's abilities meet the job's requirements

The Theory of Work Adjustment (Dawis and Lofquist) separates satisfaction (the worker's fulfillment by the job's reinforcers) from satisfactoriness (the employer's judgment that the worker's abilities meet job demands); tenure depends on both. The worker's view of reinforcers is satisfaction, the more tempting confusion. Tolerance for mismatch before acting is the adjustment-style variable called flexibility.

33. B Notify her parents or guardians, because risk assessments should not be used to avoid notification

The ASCA Ethical Standards direct school counselors to inform parents or guardians when a student poses a risk of harm to self, and they caution that risk assessments, which are hard to predict, should not be used to negate risk and justify not notifying. Keeping the disclosure confidential because risk seems low is the tempting but wrong choice, and CPS is involved only when there is reason to suspect abuse or neglect.

34. B Orientation to sex roles

Gottfredson proposed that children roughly ages 6 to 8 become aware of sex roles and begin eliminating occupations they see as inappropriate for their gender, which is exactly what Ethan is doing. Orientation to size and power (about ages 3 to 5) involves recognizing adult roles in simple concrete terms. Orientation to social valuation (about ages 9 to 13) adds awareness of prestige and social class.

35. B Activity monitoring and scheduling to increase rewarding activity

Beck recommended starting with behavioral methods such as activity scheduling with severely depressed clients, because low energy and poor concentration limit their ability to do heavy cognitive work. Uncovering core beliefs is a valid CBT method, but it is usually done later, once the client can engage more fully.

36. A explore with the supervisee what the client's SRS ratings and feedback suggest about the alliance

Feedback-informed supervision uses outcome and alliance data together; when outcomes stall, the first step is to examine the alliance and the client's feedback, because alliance problems are a common and fixable reason for poor progress. Reassignment may later be appropriate, but it skips the learning and problem-solving step.

37. B Efficacy and effectiveness

Efficacy refers to how well a treatment works under controlled research conditions with high internal validity, whereas effectiveness refers to how well it works in real-world settings with diverse, comorbid clients. Statistical versus clinical significance concerns whether a result is real versus meaningful in magnitude, not the setting in which it was obtained.

38. B Relational frame theory

ACT grows out of relational frame theory, a behavior-analytic account (Hayes and colleagues) of how humans learn to relate stimuli arbitrarily through language, which explains why thoughts can carry the power of real events. Social learning theory is Bandura's account of observational learning and is not the theoretical basis of ACT.

39. D Major depressive disorder, with anxious distress

The anxious distress specifier requires at least two of five symptoms (keyed up or tense, unusually restless, trouble concentrating because of worry, fear that something awful may happen, fear of losing control) during most days of the mood episode (DSM-5-TR). Generalized anxiety disorder requires at least 6 months of worry and is not diagnosed when the anxiety occurs only during a mood disorder. Mixed features refers to manic symptoms, not anxiety.

40. B A closed group, because the skills build on one another in sequence

Closed groups suit time-limited, sequential psychoeducational curricula because every member receives each module in order and cohesion can build steadily. Open groups can teach skills, but rolling entry in a sequential program means newcomers miss foundation material, and relying on peers to reteach it is unreliable.

41. D offers a new frame of reference that goes beyond what the client has said

Interpretation adds meaning: it offers a new perspective, explanation, or frame of reference that goes beyond the client's explicit message. Restating a feeling is a reflection, condensing statements is a summary, and asking for elaboration of something vague is a clarification.

42. D At the initiation of counseling and throughout the process

ACA Code of Ethics B.1.d requires counselors to inform clients of confidentiality's limits at the initiation of counseling and throughout the process, and to identify situations in which confidentiality must be breached. Waiting until a disclosure is needed leaves the client without informed consent to what they share.

43. C Help her secure housing and basic needs while building stabilization skills

Basic needs and safety come before insight- or trauma-focused work, consistent with Maslow's hierarchy and with phase-oriented trauma treatment that starts with stabilization. Trauma processing without a stable living situation risks destabilizing her; her wish can be honored by planning that work for later.

44. D Only if agency policy allows self-referral and the client is told of other options

ACA A.10.a states that counselors in organizations do not refer clients to their private practice unless the organization's policies explicitly provide for self-referrals, and in such cases clients must be informed of other options. The prohibition is therefore not absolute. The Code does not impose a waiting period, and a client request alone does not satisfy the policy requirement.

45. D Countertransference

Countertransference is the counselor's reaction to the client that is shaped by the counselor's own history and unresolved issues. Transference is the reverse: the client displaces feelings from past relationships onto the counselor.

46. C National Board for Certified Counselors (NBCC)

NBCC, founded in 1982, develops the NCE and NCMHCE and awards the NCC credential. ACA is the professional membership association, CACREP accredits programs, and AASCB is an association of state licensing boards that works on issues such as license portability.

47. C Self

In Schlossberg's model, Self includes personal and demographic characteristics and psychological resources such as optimism, resilience, values, and spirituality. Strategies is tempting, but it refers to the coping responses a person uses, such as modifying the situation or managing stress, rather than enduring personal qualities.

48. C Conduct a thorough suicide risk assessment during the current session

Any endorsement of PHQ-9 item 9 requires immediate follow-up with a direct suicide risk assessment (for example, ideation, plan, intent, means, and protective factors) before other steps. Documenting the moderately severe score (15 to 19) and rescreening later is tempting because it reflects the total score correctly, but it leaves possible acute risk unassessed.

49. D The index is about 2.02, so the change exceeds chance at the .05 level

The standard error of measurement is 7 times the square root of (1 - .84), or 2.8; the standard error of the difference is 2.8 times the square root of 2, or about 3.96; and 8 divided by 3.96 is about 2.02, which exceeds the 1.96 cutoff. Dividing by the standard deviation (1.14) or by the standard error of measurement alone (2.86) are common errors that omit the step accounting for error in both scores.

50. A an efficacy study

Efficacy studies test whether an intervention works under ideal, tightly controlled conditions, emphasizing internal validity. Effectiveness studies test whether it works in real-world settings with typical clinicians and clients, emphasizing external validity.

51. D About 85% of observed-score variance is true-score variance

Unlike a validity coefficient, a reliability coefficient is read directly, without squaring, as the proportion of observed-score variance that is true-score variance. Here that is 85% true variance and 15% error variance. Squaring it to get 72% applies the coefficient-of-determination logic used for validity coefficients.

52. B Maria will log 10 minutes of daily diaphragmatic breathing for 4 weeks

A SMART objective is specific, measurable, achievable, relevant, and time-bound; the breathing objective names a behavior, frequency, tracking method, and time frame. Feeling calmer or understanding thought-tension links are vague internal states that cannot be counted, and session attendance measures participation in treatment, not change in the client.

53. D Withdrawer re-engagement and blamer softening

Johnson's EFT moves through cycle de-escalation (Stage 1), restructuring interactions (Stage 2), and consolidation (Stage 3); the key change events of Stage 2 are withdrawer re-engagement followed by blamer (pursuer) softening. Identifying and reframing the cycle belongs to Stage 1, and replacing the Four Horsemen is a Gottman intervention, not part of EFT.

54. B 84th percentile

With a mean of 100 and a standard deviation of 15, a score of 115 is one standard deviation above the mean (z = +1.0), which falls at about the 84th percentile (50% below the mean plus about 34% between the mean and +1 SD). The 98th percentile corresponds to two standard deviations above the mean (130).

55. B Boiling down the problem

Kanel's ABC model consists of A, achieving contact (rapport and attending skills); B, boiling down or identifying the problem (precipitating event, cognitions, emotional distress, and functioning); and C, coping (exploring past and new coping and developing a plan). Rapport has already been established, so the counselor has moved past achieving contact, and coping work comes after the problem is clarified.

56. D Coping with the feeling of being overwhelmed

Meichenbaum grouped coping self-statements by stage: preparing for the stressor, confronting it, coping with feeling overwhelmed, and reinforcing success afterward. Sofia is in the middle of the stressor with panic building, so the statement fits coping with being overwhelmed. Reinforcing statements ("I did it") come after the event, and conceptualization is a phase of SIT, not a type of self-statement.

57. D Including information about warning signs and where to get help

Recommendations for reporting on suicide advise including warning signs, treatment options, and crisis resources such as the 988 Suicide and Crisis Lifeline, because such coverage can have a protective effect. Detailing the method, oversimplifying the cause, and sensational imagery are linked to imitation and contagion (the Werther effect).

58. D Low power raising the risk of a Type II error

Small samples reduce statistical power, increasing the likelihood of a Type II error, failing to detect a true effect. A Type I error is a false positive, which cannot occur when no significant result was found.

59. C disclose only attendance and completion, consistent with the release

Even in mandated counseling, disclosure is governed by the client's written authorization: ACA Code of Ethics B.6.g requires written permission to disclose records to third parties, and B.2.d directs counselors to reveal only essential information. The release already permits attendance and completion information, so refusing everything is unnecessary, and sending full notes exceeds her consent.

60. C The Consolidated Appropriations Act, 2023

Provisions in the Consolidated Appropriations Act, 2023, signed in December 2022, added mental health counselors and marriage and family therapists as Medicare providers effective January 1, 2024, the culmination of long-running social/political advocacy. The Mental Health Parity and Addiction Equity Act is tempting, but it addressed parity in coverage for mental health benefits rather than which professions Medicare recognizes.

61. A Anorexia nervosa, restricting type, severe

DSM-5-TR severity for adult anorexia nervosa is based on BMI: mild 17 or higher, moderate 16-16.99, severe 15-15.99, extreme below 15, so a BMI of 15.5 is severe. Amenorrhea was removed as a criterion in DSM-5, and atypical anorexia applies only when weight remains in or above the normal range.

62. A PTSD Checklist for DSM-5 (PCL-5)

The PCL-5 has 20 items mapped onto the DSM-5 PTSD symptom clusters (intrusion, avoidance, negative alterations in cognition and mood, and arousal and reactivity). The Beck Anxiety Inventory is tempting because PTSD involves anxiety, but it focuses on general and somatic anxiety symptoms rather than trauma-specific criteria.

63. D Amplified reflection

An amplified reflection restates the client's sustain talk in a slightly exaggerated form, delivered without sarcasm, which often prompts the client to back away from the extreme and voice the other side of the ambivalence. Coming alongside is close, but it explicitly sides with the status quo (for example, "maybe now isn't the time to change") rather than exaggerating the client's statement. Paradoxical intention instructs a client to deliberately produce a symptom.

64. C Explore how she uses it and discuss its benefits, limits, privacy risks, and crisis resources

ACA guidance on AI encourages counselors to understand clients' use of AI tools and to help them weigh benefits against limitations such as privacy concerns, inaccurate information, and inability to manage crises. Prohibiting use dismisses the client's coping effort, while demanding transcripts or cutting sessions is not clinically justified.

65. A Low frustration tolerance

Low frustration tolerance, which Ellis also called discomfort disturbance or "I-can't-stand-it-itis," is the demand that life be easy and comfortable. Self-downing is tempting, but it involves rating one's whole self as worthless, which Kevin does not do. Learned helplessness is Seligman's concept, not an REBT belief.

66. C work with Dana individually, coaching her to define a self within her family of origin

Bowen believed the system can change when one motivated member raises their own differentiation, so coaching one person to relate differently to the family of origin is standard Bowenian practice. Bowen therapy does not require everyone to attend, and empty-chair work belongs to Gestalt and experiential methods.

67. C Conformity

In the R/CID model of Atkinson, Morten, and Sue, Conformity involves preference for dominant-culture values, depreciation of one's own group, and often a preference for a counselor from the dominant group, all of which describe Linh. Dissonance would involve conflict between these self-depreciating views and emerging appreciation of her own culture, which she does not yet show. Resistance and Immersion is marked by rejecting the dominant culture, the opposite of her current stance.

68. B Bipolar I disorder

DSM-5-TR states that a full manic episode emerging during antidepressant treatment but persisting at a fully syndromal level beyond the physiological effect of the medication is sufficient evidence for a manic episode and therefore bipolar I disorder. A medication-induced diagnosis would fit if the symptoms resolved once the drug's effects ended. Bipolar II is ruled out because this was a full manic episode with marked impairment.

69. C Assess her mood further, since a low, flat profile can reflect depression

A low, undifferentiated interest profile combined with anhedonia and sleep disturbance after a major loss suggests depressed mood may be suppressing her responses, so mood should be assessed before interests are interpreted. Multipotentiality is usually shown by a high, flat profile in someone with many strong interests, not uniformly low scores. A card sort or another inventory may help later but would not address the likely cause.

70. C Inpatient psychiatric hospitalization for stabilization

Acute mania with psychotic features, severe sleep loss, and dangerously impaired judgment requires the 24-hour supervision and rapid medical stabilization of inpatient care, even without suicidal ideation. Day or outpatient programs leave him unsupervised for most hours while his judgment is severely impaired.

71. D Define who the client is and reach a documented agreement on how individual disclosures will be handled

ACA B.4.b requires counselors in couples and family work to clearly define who is considered the client and to discuss expectations and limits of confidentiality, seeking agreement and documenting it. Promising absolute secrecy is one possible policy, but committing to it unilaterally skips the required discussion and agreement and can trap the counselor later.

72. B Positively related to the working alliance and improvement in therapy

Hook et al. (2013) developed the client-rated Cultural Humility Scale and found that clients who perceived their counselors as more culturally humble reported stronger working alliances and greater improvement in therapy. This supports cultural humility as a relational quality experienced by the client rather than a knowledge credential.

73. D Meet privately, and seek supervision if needed, to explore and resolve their relationship issues

Corey stresses that co-leaders must meet regularly outside sessions to examine their working relationship, since unaddressed competition will be played out in the group and can harm members. Splitting the session or asking members to choose avoids the underlying problem and can foster divisions within the group.

74. C Salience Inventory

Super's Salience Inventory measures how important the roles of student, worker, homemaker, leisurite, and citizen are to a person, which fits Priya's question about competing roles. The Adult Career Concerns Inventory measures concerns tied to Super's career stages, not the importance of roles. The Minnesota Importance Questionnaire measures work needs and values within the worker role only.

75. D Obtain Mr. Delgado's consent before advocating for him as an identifiable client

ACA Code of Ethics A.7.b states that counselors obtain client consent prior to engaging in advocacy efforts on behalf of an identifiable client. Simply omitting his name is tempting, but details of a specific eviction could still identify him in a local setting, and the Code ties the consent requirement to advocacy for an identifiable client.

76. A Insecure-resistant (ambivalent)

Ainsworth's resistant (ambivalent) pattern combines contact-seeking with angry resistance to contact and difficulty being soothed on reunion. A disorganized pattern is tempting because the behavior seems contradictory, but disorganization is marked by freezing, dazed expressions, or fear of the caregiver rather than an organized mix of clinging and anger.

77. A Work, friendship, and love

Adler named work (occupation), friendship (community), and love (intimacy) as the three life tasks everyone must meet. Later Adlerians such as Dreikurs and Mosak added tasks like getting along with oneself and spirituality, and safety, belonging, and esteem come from Maslow's hierarchy.

78. A Raise awareness through nonjudgmental feedback and exploration

Paul is in precontemplation, where experiential processes such as consciousness raising are most useful, delivered in a way that avoids confrontation. Relapse prevention, stimulus control, and setting a quit date are behavioral processes suited to the preparation, action, and maintenance stages and are likely to produce resistance at this point.

79. B In vivo mastery of trauma reminders

In vivo mastery is a gradual exposure component used when a child avoids innocuous reminders that are not actually dangerous, such as a repaired bedroom. Enhancing safety focuses on safety skills for real future risks, and in vivo exposure is not used for situations that remain genuinely unsafe.

80. D Cost-effectiveness analysis

Cost-effectiveness analysis compares costs with outcomes expressed in nonmonetary units, such as cost per abstinent client. Cost-benefit analysis requires converting outcomes into dollar values so that costs and benefits share the same metric.

81. A Strong Interest Inventory

The Strong Interest Inventory's Occupational Scales were empirically built by comparing the responses of satisfied workers in specific occupations with those of a general reference sample. The Self-Directed Search is tempting because it also links to occupations, but it does so through a self-scored Holland code rather than comparison with satisfied incumbents; the ASVAB measures aptitudes, not interests.

82. A It is not mandated, but she must seek help if problems reach impairment

The ACA Code does not require practicing counselors to be in personal counseling. It does require them to monitor for impairment and seek help when problems reach that level (C.2.g), and the Section C introduction encourages self-care. Some training programs require or recommend personal counseling (F.8.c, F.8.d), but that is not a universal licensure rule.

83. D Offer a recapitulation summary of her change talk, then ask a key question about next steps

MI recommends a recapitulation summary that gathers the client's change talk (with brief acknowledgment of her reservations), followed by a key question such as "So what do you think you'll do?" to test readiness for planning. A confidence ruler can be useful, but it does not consolidate what she has said. Prescribing options or re-reviewing consequences shifts the counselor into an expert, persuasive role.

84. D 12 months

DSM-5-TR requires at least 12 months since the death for adults and at least 6 months for children and adolescents. Six months is the general threshold used in ICD-11, which makes it a common source of confusion. Two months has no role in prolonged grief disorder criteria.

85. B building her self-efficacy through mastery and vicarious learning experiences

SCCT (Lent, Brown, and Hackett) holds that self-efficacy and outcome expectations shape interests and goals, and that self-efficacy grows through mastery experiences, vicarious learning, persuasion, and managing anxiety. Seeing successful engineers who share her background gives her vicarious learning and helps counter perceived barriers. Matching her to an engineering setting by Holland code ignores the self-efficacy doubts that are actually limiting her.

86. D Working stage

The working stage is marked by cohesion, productive risk-taking, here-and-now feedback, and members sharing responsibility for the group, which lets the leader be less directive (Corey). The transition stage involves anxiety, defensiveness, and conflict rather than the open, self-directed exchange described here.

87. A His self-harm, using a chain analysis of the episode

DBT prioritizes life-threatening behaviors (suicidal and self-harm behaviors) first, therapy-interfering behaviors second, and quality-of-life issues third. Lateness is therapy-interfering and important, but it ranks below self-harm, and the job loss is a quality-of-life target.

88. B Luis's authorization to release information to the insurer

ACA Code of Ethics B.3.d states that counselors disclose information to third-party payers only when clients have authorized the disclosure. HIPAA allows disclosures for payment, but the ethical standard still calls for the client's authorization, so the idea that nothing is needed does not hold under the Code.

89. B data saturation

Saturation is reached when additional data no longer yield new information or themes, signaling that data collection can end. Theoretical sensitivity refers to the researcher's ability to recognize meaningful concepts in the data, not to the point at which new data stop adding information.

90. B Intellectualization

Intellectualization uses abstract, technical thinking to keep distressing emotions at a distance, as Dr. Lee does by focusing on statistics instead of feelings. It is not denial, because he fully acknowledges the diagnosis and its seriousness.

91. B Transferability

Thick description supports transferability, the qualitative counterpart to external validity, by giving readers enough context to judge applicability to other settings. Credibility concerns whether findings accurately represent participants' experiences, which is addressed through strategies such as member checking and prolonged engagement.

92. A freeing the client's inherent actualizing tendency to operate

Rogers believed every person has an actualizing tendency toward growth, and that empathy, congruence, and unconditional positive regard create a climate in which it can operate. Reinforcement, interpretation of unconscious conflict, and disputing beliefs describe behavioral, psychodynamic, and rational emotive approaches.

93. D confluence

Confluence is the blurring of the boundary between self and environment, so that the person cannot tell where she ends and the other begins, often to avoid conflict. Introjection is uncritically swallowing others' values and rules, which is related but describes absorbing standards rather than merging identity with another person.

94. A Inform clients promptly, address the transition in session, and help each arrange referrals

To avoid abandonment, counselors give clients adequate notice, provide pre-termination counseling, and help arrange appropriate referrals (ACA Code A.11.c and A.11.d). Waiting until the final session leaves no time to process the ending or connect clients with new providers, and records cannot be transferred without client consent.

95. D Clarify that the results reflect interests, not abilities, and explore her skills

The Strong Interest Inventory measures likes and dislikes compared with others, not ability or aptitude, so the counselor should correct the misinterpretation and explore skills and experience separately (ACA Code of Ethics E.9 on accurate interpretation). The Self-Directed Search is tempting, but it also measures interests and self-estimates rather than demonstrated talent.

96. C "What concerns, if any, do you have about your drinking?"

An open question invites elaboration and cannot be answered with a yes, no, or single fact, so asking what concerns she has evokes her own perspective. Asking how many drinks she has sounds exploratory but calls for a number, making it a closed question; the other two can be answered yes or no.

97. B Provisional tic disorder

Provisional tic disorder applies when single or multiple motor and/or vocal tics have been present for less than 1 year since first onset, with onset before age 18 (DSM-5-TR). Tourette's disorder is tempting because Sam has both motor and vocal tics, but it requires tics persisting for more than 1 year. Persistent tic disorder also requires more than 1 year and involves motor or vocal tics, not both.

98. A A counselor from his own racial or cultural group

Jamal is in the Resistance and Immersion stage, in which clients typically distrust dominant-group helpers and prefer a counselor from their own racial or cultural group. Preferring a counselor based on shared worldview and attitudes rather than race is characteristic of the later Integrative Awareness stage. Preference for a dominant-group counselor seen as more expert is typical of the Conformity stage.

99. B Begin with continuous reinforcement, then gradually thin to an intermittent schedule

Continuous reinforcement produces the fastest acquisition of a new behavior; once the behavior is established, thinning to an intermittent schedule makes it more resistant to extinction. Starting with intermittent reinforcement slows learning because the connection between the behavior and its consequence is harder to detect.

100. A identification with the same-sex parent

Freud proposed that castration anxiety leads the boy to repress his desire for his mother and identify with his father, taking on the father's values and forming the superego. Sublimation during latency follows this resolution and does not resolve the complex itself.

101. A Donald Winnicott

Winnicott described the good-enough mother, transitional objects such as a favorite blanket, and the holding environment that helps an infant develop a true self. Klein, by contrast, is known for the paranoid-schizoid and depressive positions.

102. A Premenstrual dysphoric disorder

Premenstrual dysphoric disorder, classified among depressive disorders in DSM-5-TR, requires at least five symptoms (including at least one marked affective symptom) in the final week before menses, improvement after onset of menses, and confirmation by prospective daily ratings over at least two symptomatic cycles. The tight link to the menstrual cycle rules out cyclothymic disorder, and there is no history of hypomania to support a bipolar diagnosis.

103. B Moratorium

Marcia's moratorium status combines active exploration with no commitment yet, which describes Maya. Foreclosure is commitment without exploration (often adopting parents' values), diffusion involves neither exploration nor commitment, and achievement follows exploration with firm commitments.

104. C a cross-generational coalition, such as parent and child against the other parent

Haley's perverse triangle is a cross-generational coalition that violates the family hierarchy, usually a parent allied with a child against the other parent. Parents uniting around a child's problem is Minuchin's detouring, and contradictory inescapable messages describe the double bind.

105. C family projection process

In the family projection process, parents transmit their own anxiety and immaturity to one selected child, who ends up with lower differentiation than siblings. Multigenerational transmission is the accumulation of that process across several generations, which this single-generation vignette does not describe.

106. A Three

DSM-5-TR requires three or more of the 12 catatonic features (e.g., stupor, catalepsy, waxy flexibility, mutism, negativism, posturing, mannerism, stereotypy, agitation, grimacing, echolalia, echopraxia). Two features is a common error because schizophrenia Criterion A uses a two-symptom threshold, which is a different rule. Catatonia can occur in the context of psychotic, bipolar, depressive, and medical conditions.

107. D Block the attack and help Dev share how Sara's specific behavior in group affects him

Leaders should block destructive, labeling confrontation while preserving its potential value by having the member speak about specific here-and-now behavior and his own reactions, which is how Yalom describes useful feedback. Conflict can build cohesion, but only when it is managed; letting an attack continue is unsafe. Exploring Sara's victim role validates the label, and changing the topic avoids the process.

108. C Catastrophic misreading of normal bodily sensations

Clark's cognitive model holds that panic attacks come from catastrophically misinterpreting bodily sensations (a racing heart as a heart attack), which raises anxiety and the sensations in a loop. Excessive worry across many areas describes generalized anxiety disorder, and conditioned fear of an object fits specific phobia.

109. B As sole possession records, which are excluded from the definition of education records

FERPA excludes from education records those kept in the sole possession of the maker, used only as a personal memory aid, and not accessible or revealed to anyone other than a temporary substitute. If the notes were shared with others or placed in the student's file, they would become education records the parent could inspect.

110. A No; she should report and let the agency guide when the mother is told, since alerting her could endanger Bella

Notifying a suspected perpetrator before the report can expose the child to retaliation or coaching and can interfere with the investigation. Protective services can advise on safety and on when the family will be told. Parents' general rights regarding a minor's information do not override the child-protection purpose of reporting laws, and telling another family member first carries similar risks.

111. B Verify whether she can legally practice in Texas and, if not, plan a transition to a provider there

Under ACA Code of Ethics H.1.b, counselors providing distance services understand they may be subject to the laws of both their own practice location and the client's place of residence, and licensure boards generally regulate based on where the client is located. The counselor must therefore check Texas requirements or any compact privilege and otherwise arrange a planned transition; relabeling sessions as consultation does not change the legal nature of the service, and an abrupt end with only a hotline number risks abandonment.

112. B Reminding members of the ending weeks in advance and structuring time to review learning and say goodbye

Corey and other group authors recommend preparing members for termination in advance and using the final sessions to consolidate learning, express feelings about ending, and plan how to apply skills outside the group. Withholding the end date tends to make the ending abrupt, especially for adolescents whose concerns center on loss.

113. C Eight occupational groups crossed with six levels of responsibility and skill

Roe classified occupations into eight groups (service, business contact, organization, technology, outdoor, science, general culture, and arts and entertainment) and six levels ranging from professional and managerial to unskilled. Six types on a hexagon describes Holland's model. Life stages and life roles describe Super's life-career rainbow, and periods with substages describe Ginzberg.

114. B Explain the group, his right to refuse, and the consequences of refusing

Mandated clients still receive informed consent, including what information will be reported, their right to refuse services, and the potential consequences of refusal (ACA Code of Ethics A.2.e, B.1.d). A court order does not eliminate a client's right to make an informed choice, even if that choice carries legal consequences.

115. B a common event after which people often recycle through earlier stages

Prochaska and DiClemente describe change as a spiral in which most people relapse and recycle through earlier stages, often learning from each attempt. Relapse is treated as an event rather than a formal stage in the current model, and it does not indicate that a stage-based approach has failed.

116. B Directly assess Alex's suicidal thoughts, plan, intent, and access to means

A post about "not being around much longer" combined with family rejection, a recognized risk factor for LGBTQ+ youth, calls for an immediate, direct suicide risk assessment. Parents will likely need to be involved if risk is confirmed, but contacting them before assessing, especially given the family's response, skips the critical first step.

117. A Self-esteem links a person's worth to performance and approval

Ellis argued that self-esteem is conditional: people rate their whole selves by their achievements or others' approval, which makes their worth fragile. Unconditional self-acceptance means rating behaviors, not the self. REBT does not aim to remove all negative emotion, and Ellis's objection was philosophical, not about measurement.

118. D Lower multicultural counseling competence and empathy

Studies by Neville and colleagues and by Burkard and Knox associate greater color-blind racial attitudes with lower self-reported multicultural competence and less empathy toward clients of color. Color-blindness can look like fairness, but it tends to minimize clients' real experiences of racism rather than reduce bias.

119. A Diagnostic overshadowing

Diagnostic overshadowing occurs when new symptoms, here possible signs of depression, are wrongly attributed to an existing disability, so a co-occurring mental disorder goes unassessed; the counselor should evaluate for depression and other causes. Spread involves generalizing a disability to unrelated traits, not misattributing symptoms. Secondary gain refers to benefits obtained from symptoms, and learned helplessness is a behavioral explanation for passivity, neither of which describes the staff's reasoning.

120. A Cognitive processing therapy

Cognitive processing therapy is a trauma-focused treatment strongly recommended in VA/DoD and APA PTSD guidelines. Single-session critical incident stress debriefing is not recommended and may impede recovery, and relaxation or supportive counseling alone lack the trauma focus of first-line treatment.

121. B gender-role analysis

Gender-role analysis helps clients identify gender-role messages, evaluate their positive and negative consequences, and choose which to change. Power analysis is the tempting answer because it is a related feminist technique, but it focuses on differences in access to power and resources between groups. Cognitive restructuring targets distorted thoughts without the explicit sociocultural lens.

122. D Binge-eating disorder

Binge-eating disorder involves recurrent binge episodes at least once a week for 3 months, with at least three associated features (e.g., eating rapidly, until uncomfortably full, alone because of embarrassment, feeling disgusted afterward) and marked distress, without regular compensatory behaviors (DSM-5-TR). Bulimia nervosa is tempting, but it requires recurrent compensatory behaviors such as vomiting, fasting, or excessive exercise. Night eating syndrome involves eating after awakening or excessive evening eating rather than discrete binges.

123. D Mood may be irritable rather than depressed, and the duration is at least 1 year

For children and adolescents, DSM-5-TR allows irritable mood in place of depressed mood and shortens the duration for persistent depressive disorder from 2 years to 1 year. Keeping a 2-year duration applies only to adults, and anhedonia is not required for persistent depressive disorder.

124. C briefly acknowledge her frustration and redirect to what she can do now to meet her needs

Reality therapy focuses on the present because past events cannot be changed and clients can only control their current behavior. Glasser recommended acknowledging past pain without dwelling on it, then moving to present choices and relationships. Catharsis and transference interpretations come from other models, and logging negative thoughts is a cognitive technique that would keep the focus on the complaint.

125. A Disclose the relevant information, since HIPAA permits disclosures to agencies authorized to receive abuse reports

HIPAA (45 CFR 164.512, public health disclosures) permits covered entities to disclose protected health information without authorization to a public authority authorized by law to receive reports of child abuse or neglect. The minimum necessary standard still applies, so the counselor should disclose what is relevant to the allegation, consistent with state law. Neither parental authorization nor a subpoena is required.

126. C Self-Directed Search

Holland designed the Self-Directed Search to be self-administered, self-scored, and self-interpreted, yielding a three-letter code that the client can match to occupations. The Strong Interest Inventory also reports Holland's General Occupational Themes, but it is scored by the publisher and is meant to be interpreted with a trained professional. The Kuder and Campbell instruments use their own scoring systems and are not Holland's self-guided tool.

127. D Ego

The ego follows the reality principle, delaying or redirecting gratification to fit the demands of reality and the superego. The id operates on the pleasure principle, seeking immediate gratification without regard for consequences.

128. C Parent-child interaction therapy

Parent-child interaction therapy (Eyberg) moves from child-directed interaction, which uses PRIDE skills and avoids commands, to parent-directed interaction, which teaches effective commands and time-out, with live coaching from behind a mirror. Filial therapy also teaches parents play skills but does not include a discipline phase or bug-in-the-ear coaching, and multisystemic therapy is a home- and community-based treatment for serious adolescent antisocial behavior.

129. D Ask Mei how she experiences the group and what feels right to her

Silence can reflect cultural norms, attentiveness, or comfort rather than resistance, so the leader first explores its meaning with the member, consistent with ASGW multicultural and social justice principles. Requiring every member to speak or labeling the silence as resistance pressures her and risks imposing a dominant-culture norm about participation.

130. A Blind area

The blind area contains things others can see about a person that the person is unaware of, so feedback from members shrinks it and expands the open area (Luft and Ingham). The hidden area would shrink through Marcus's own self-disclosure of things he knows but has kept private.

131. C Report the suspected abuse to adult protective services

Where state law mandates reporting, reasonable suspicion of elder abuse or financial exploitation must be reported to adult protective services, and the counselor does not need proof; ACA Code of Ethics B.2.a permits disclosure when legally required. Confronting the son first could increase risk to Mabel and is not the counselor's investigative role.

132. C Note the disruption and its possible effect on validity in the report

ACA Code of Ethics E.7 and E.9.a direct counselors to note in reports any reservations about the validity or reliability of results due to the circumstances of administration. Reporting the scores as valid ignores a significant deviation from standardized conditions, and adjusting scores arbitrarily has no psychometric basis.

133. D Life review therapy

Butler's life review is an evaluative, structured process of revisiting the whole life course and reintegrating unresolved conflicts, aimed at Erikson's ego integrity. Simple reminiscence also involves recalling the past, but it focuses on sharing pleasant memories to build mood and connection rather than systematically evaluating and resolving conflicts.

134. A evaluates and integrates past experiences, including unresolved conflicts

Butler described life review as a natural, structured process of evaluating one's life and working through unresolved conflicts, supporting Erikson's ego integrity. Simple reminiscence is a more general recall of memories, often pleasant, without that evaluative and integrative focus.

135. A it was built on studies of males and undervalued care-based reasoning

Gilligan argued that Kohlberg's original all-male sample and justice-based scoring caused care- and relationship-oriented reasoning, which she associated with many women, to be scored as stage 3 and treated as less mature. Cross-cultural critiques of Kohlberg exist, but they came mainly from other researchers and were not Gilligan's central argument.

136. C Enmeshment/Denial

In Poston's model, Enmeshment/Denial follows the forced choice of one group and is marked by guilt, confusion, and self-hatred about not being able to identify with both parents' heritages, which matches Zoe's current feelings. Choice of Group Categorization is the earlier stage in which she felt pushed to choose, but the guilt that follows defines the next stage. Appreciation involves beginning to value and explore both heritages, and Personal Identity is the earliest stage, when a child's sense of self is largely independent of race.

137. A a diffuse boundary, indicating enmeshment

Minuchin described diffuse boundaries as overly permeable, with too little separation and autonomy, which produces enmeshment. Rigid boundaries create disengagement, the opposite pattern; nothing in the vignette shows parents uniting against a child's problem, as detouring would require.

138. C Hold off on conjoint sessions and address Rachel's safety individually

Ongoing physical violence combined with fear of a partner's reaction is a widely recognized contraindication for conjoint couples work, because joint sessions can increase danger. The counselor should do safety planning with Rachel and refer for appropriate services. Revealing her disclosure in a joint session could provoke retaliation, and both EFT and the Gottman Method screen out couples with this kind of violence.

139. D The counselor took the pro-change side of his ambivalence, prompting Ray to voice the other side

MI describes the righting reflex: when a counselor argues for change, an ambivalent client naturally voices the opposing side, and people tend to become more committed to what they hear themselves say. Precontemplation is the tempting answer, but Ray's ambivalence shows he is contemplating change, and his rising resistance tracks the counselor's behavior. More information would likely make it worse.

140. B object permanence

In Piaget's sensorimotor period, infants begin searching for fully hidden objects at roughly 8 to 12 months, so a 7-month-old who stops looking is developmentally typical. Conservation, reversibility, and class inclusion are concrete operational achievements that would not be expected for years and do not explain a failure to search.

141. D Provide reasonable access, limiting it only with compelling evidence of harm

ACA Code of Ethics B.6.e requires counselors to provide competent clients reasonable access to their records and to limit access only when there is compelling evidence that it would cause harm, documenting the request and the rationale. Worrying that she might be upset is not compelling evidence of harm.

142. C A urine alarm that wakes him when wetting begins

The enuresis (bell-and-pad) alarm, based on Mowrer's conditioning model, is the most effective behavioral treatment for nocturnal enuresis and has lower relapse rates than medication. Fluid restriction, reward charts, and scheduled waking can be helpful additions, but used alone they are much less effective than the alarm.

143. C "Counselor used Socratic questioning to examine the client's belief that she is 'a failure.'"

The Intervention section records what the counselor did, such as the specific technique used and its purpose. The client's identification of contrary evidence is tempting because it happened during the intervention, but it describes her reaction and belongs in Response; presentation goes in Behavior and homework in Plan.

144. B Create separate professional and personal profiles to distinguish the two

ACA H.6.a states that counselors who wish to maintain both a professional and personal presence on social media create separate professional and personal pages and profiles to clearly distinguish between the two. Privacy settings on a single profile do not achieve this separation, and the Code permits professional social media use.

145. A Recognize the reaction, refocus on Brenda's concerns, and process it in consultation

The counselor's inattention and argumentative paraphrases signal countertransference, which calls for self-awareness, refocusing on the client, and consultation (ACA Code of Ethics A.4.b, C.2.d). Sharing his views in the name of congruence would impose his values. Banning or redirecting the topic serves the counselor's discomfort and may silence something meaningful to Brenda.

146. C Moral anxiety

Moral anxiety is fear of one's own conscience (the superego), felt as guilt or shame about thoughts or actions that break internalized standards. Neurotic anxiety is the fear that id impulses will escape control, whereas Jamal's distress centers on self-condemnation.

147. C Report the suspected abuse of the younger sister to child protective services

The duty to report is triggered by reasonable suspicion, and secondhand information can meet that threshold. A report is still required when the alleged perpetrator is a minor. Interviewing the younger child is investigative work for child protective services, and alerting the parents first could delay protection or compromise the investigation.

148. D Hawthorne effect

The Hawthorne effect describes changes in behavior that result from participants' awareness of being studied and receiving attention. The Rosenthal effect, by contrast, stems from the researcher's expectations influencing participants or ratings, not from participants' awareness of being observed.

149. D Orientation to social valuation

In Gottfredson's third stage, roughly ages 9 to 13, children become aware of social class and prestige and rule out occupations seen as too low in status (or too difficult to attain). Rejecting jobs because they are gender-inappropriate would reflect the earlier sex-role stage. Orientation to the internal, unique self, beginning around age 14, involves exploring personal interests and values within the remaining acceptable options.

150. B Occupational choice is a process of developing and implementing a self-concept

Super viewed career development as the lifelong process of developing a self-concept and implementing it through work and other roles. Matching traits to job requirements describes the trait-factor approach of Parsons and Williamson. Needs shaped by early parent-child relations reflect Roe, and learned beliefs and task approach skills come from Krumboltz's social learning theory.

151. A Trauma-focused cognitive behavioral therapy

TF-CBT (Cohen, Mannarino, and Deblinger) is a well-supported treatment for traumatized children and adolescents. It includes caregiver involvement, coping skills, a trauma narrative, and conjoint parent-child sessions. Prolonged exposure and cognitive processing therapy were developed mainly for adults, and child-centered play therapy does not include a structured trauma narrative or parallel caregiver component.

152. B Taijin kyofusho

DSM-5-TR describes taijin kyofusho, a Japanese cultural syndrome, as anxiety about and avoidance of interpersonal situations because one believes one's appearance, gaze, facial expression, or body odor is inadequate or offensive to others. Its focus on offending others, rather than on being embarrassed oneself, differentiates it from the typical Western presentation of social anxiety. Shenjing shuairuo is a Chinese concept of weakness of the nervous system, kufungisisa is a Shona idiom of "thinking too much," and dhat syndrome is a South Asian concern about loss of semen.

153. B mimesis

Minuchin described three joining operations: maintenance (supporting the existing structure), tracking (following the content of communication), and mimesis (imitating the family's style and affect). Mirroring is a general counseling term but not one of Minuchin's named joining techniques; tracking concerns content, not tempo and affect.

154. C a double bind

Bateson and colleagues described the double bind as contradictory messages at different levels in an important relationship, where the receiver can neither comment on the contradiction nor escape it. Pseudomutuality (Wynne) is a facade of family harmony that hides conflict, and marital schism (Lidz) is open chronic conflict between parents.

155. C You feel worn down and resentful at times, and then guilty for feeling that way.

A good reflection of feeling names the client's emotions, including mixed feelings, and links them to their context. Teresa expresses both exhaustion or resentment and guilt about it. Normalizing caregiver strain may be supportive but does not reflect her feelings, and suggesting respite care is premature advice before her feelings have been acknowledged.

156. D autonomy

Toddlers face autonomy versus shame and doubt; overcontrol and harsh criticism of attempts at self-control and self-care foster shame and doubt instead of autonomy. Initiative is the preschool strength involving planning and purposeful activity, which follows the autonomy stage.

157. D The interpretation was likely premature, so the counselor should explore her reaction without defensiveness

An interpretation offered in the second session, before a strong alliance and before the client is near the insight, is premature and commonly met with rejection. The counselor should respond nondefensively and return to Ellen's experience. Treating rejection as proof and repeating the interpretation is the tempting error; it is an unfalsifiable stance that damages the alliance. The topic need not be abandoned permanently.

158. D Seek the client's consent or work to limit the disclosure as narrowly as possible

Standard B.2.d directs counselors facing a court order without client permission to seek written informed consent or take steps to prohibit the disclosure or limit it as narrowly as possible. Refusing a court order risks contempt. Releasing everything without trying to narrow it ignores B.2.d, and quietly removing records that fall under the order could be obstruction.

159. D share her persistent reaction, owning it as her own, when it seems relevant to the relationship

Rogers held that when a counselor's feeling is persistent and relevant to the relationship, congruence calls for expressing it in an owned, nonblaming way, which can deepen contact. Hiding the reaction creates a facade that undermines genuineness, and interpreting defenses is a psychodynamic move that places the counselor in an expert role.

160. C Anorexia nervosa, binge-eating/purging type

Because Sofia is significantly underweight with fear of weight gain and body image disturbance, she meets criteria for anorexia nervosa, and recurrent binge eating and purging in the last 3 months indicates the binge-eating/purging type (DSM-5-TR). Bulimia nervosa is tempting, but it cannot be diagnosed when the disturbance occurs exclusively during episodes of anorexia nervosa. Binge-eating disorder excludes regular compensatory behaviors.

161. C Tornstam's gerotranscendence

Tornstam's gerotranscendence describes a late-life shift from a materialistic, rational outlook to a more cosmic and transcendent one, including connection across generations, reduced fear of death, and a greater need for solitude. Disengagement theory also predicts withdrawal, but it describes a mutual pulling away between the person and society and does not address the cosmic and spiritual dimensions in Ida's report.

162. B stay with the client's topic without abruptly changing the subject

Verbal tracking means staying with the topic the client initiates (or the topic established together) rather than jumping to the counselor's own interests. Repeating key words describes the encourager, and noticing tone and rate is part of observing vocal qualities, not tracking content.

163. B Attachment results primarily from the caregiver's role in reducing hunger

Harlow showed that contact comfort, not feeding, drove the monkeys' attachment, undermining drive-reduction ('cupboard love') explanations. His findings were consistent with, rather than contrary to, sensitive periods, secure-base exploration, and lasting effects of deprivation.

164. D Spread effect

Spread (Wright) is the tendency to generalize a single disability to unrelated characteristics, such as assuming a person who is blind also has hearing or cognitive limitations. Diagnostic overshadowing is attributing new symptoms to an existing disability rather than assessing them, which is a related but different error. The halo effect involves a single positive trait coloring overall judgments, and the fundamental attribution error is overemphasizing dispositional over situational causes of behavior.

165. C Own the feeling and, if it persists, share it as her own experience

For Rogers, congruence means the counselor's inner experience matches what she expresses. When a feeling is persistent and relevant to the relationship, it is better to express it, owned as her own experience, than to give a false front. Unconditional positive regard is acceptance of the client as a person; it does not mean concealing every negative feeling, and interpreting defenses is psychodynamic, not person-centered.

166. D Stimulus generalization

Stimulus generalization occurs when stimuli similar to the original conditioned stimulus elicit the conditioned response. Stimulus discrimination is the opposite process, in which the person learns to respond only to the specific stimulus and not to similar ones.

167. A An outpatient appointment scheduled within 7 days of discharge and a written safety plan

Suicide risk is especially high in the days and weeks after psychiatric discharge, so a follow-up appointment scheduled before she leaves (the HEDIS benchmark is within 7 days) plus a collaborative safety plan is critical. Handing her a list of providers shifts the burden of linkage to her at her most vulnerable point, and no-suicide contracts lack evidence of effectiveness.

168. D a specific referral question describing the decision the testing should inform

A clear, specific referral question lets the psychologist select appropriate instruments and produce findings that answer the clinical question. Requesting a comprehensive battery without a focused question wastes time and money and often produces a report that does not address the decision at hand.

169. D Anorexia nervosa, restricting type, severe

For adults, DSM-5-TR rates anorexia nervosa severity by BMI: mild at 17 or above, moderate 16 to 16.99, severe 15 to 15.99, and extreme below 15, so a BMI of 15.5 is severe. Extreme is tempting because 15.5 is very low, but it requires a BMI under 15. The restricting type applies because there has been no recurrent binge eating or purging in the last 3 months.

170. A Producing specified documents or records, such as client files

'Duces tecum' means 'bring with you'; this kind of subpoena directs the recipient to produce documents or records. A subpoena ad testificandum requires testimony. Neither type is a judicial finding that privilege has been waived, so a counselor still has to address privilege before disclosing anything.

171. A Interpersonal effectiveness

DEAR MAN is the core objective-effectiveness skill of the interpersonal effectiveness module, used to ask for what one wants or say no effectively. Walking the middle path is an adolescent DBT module about balancing dialectical positions within families, not about making requests.

172. C unique outcome

In narrative therapy, unique outcomes (sometimes called sparkling moments) are events that contradict the problem-saturated story and serve as entry points for an alternative story. Exception is the parallel solution-focused term and is the tempting answer, but the counselor here is working in narrative therapy. The dominant story is the problem-saturated narrative the unique outcome contradicts.

173. B Yes, because FERPA permits disclosure to appropriate parties in a health or safety emergency

FERPA's health or safety emergency exception (34 CFR 99.36) permits schools to disclose education records without consent to appropriate parties whose knowledge of the information is necessary to protect the student's or others' health or safety. FERPA rights belong to parents until the student turns 18 or enters postsecondary education.

174. A Help-rejecting complainer

Yalom describes the help-rejecting complainer as a member who seeks help by presenting problems yet rejects all advice, often frustrating the group. Monopolizing describes dominating airtime generally, whereas Harriet's defining pattern is soliciting and then refusing help.

175. C Her psychological position may resemble that of an only child rather than a typical youngest

Adlerians stress psychological birth order over ordinal position, and a large age gap can lead a child to grow up functioning much like an only child. Assuming fixed youngest-child traits ignores this point, and a 10-year gap makes direct competition with her brother unlikely.

176. A Intermediate beliefs

Intermediate beliefs are the rules, attitudes, and "if...then" assumptions that sit between core beliefs and automatic thoughts (J. Beck). Core beliefs are tempting, but they are global, absolute statements about the self ("I am a failure") without a conditional form.

177. C Adjourning

Tuckman's 1965 model included forming, storming, norming, and performing; in 1977 Tuckman and Jensen added adjourning to address the group's termination. Norming is an original stage in which members develop cohesion and shared expectations, so it was not the later addition.

178. C Establish safety and stabilization first within a phase-oriented model

ISSTD guidelines recommend a phase-oriented approach for dissociative identity disorder: (1) safety, stabilization, and symptom reduction, (2) processing traumatic memories, and (3) integration and rehabilitation. With active self-harm and unstable housing, starting memory processing would risk destabilization, and hypnosis to recover memories risks creating inaccurate memories.

179. B Refer her for a medical evaluation to rule out a physical cause such as a thyroid condition

Her symptoms (tremor, heat intolerance, weight loss, tachycardia) strongly suggest hyperthyroidism, which can mimic anxiety. A medical rule-out should come before a psychological diagnosis or treatment. Diagnosing GAD is premature because DSM-5-TR requires that symptoms not be attributable to another medical condition, and GAD requires at least 6 months of symptoms.

180. A Pre-Encounter Assimilation

In the revised Cross model (measured by the Cross Racial Identity Scale), Pre-Encounter Assimilation describes low race salience paired with a strong American or individual identity, without negative views of Black people. Miseducation involves accepting negative stereotypes about Black people, which Darnell does not express. Internalization Multiculturalist Inclusive requires that Black identity be highly salient alongside other identities, the opposite of what he describes.

181. B Confirm Jasmine's current physical address and emergency resources available where she is

Telehealth best practice and ACA H.2.a emergency-procedure requirements call for verifying the client's physical location at each session so that local emergency services can be reached if needed. An emergency plan built around her home address is not useful while she is elsewhere, and no-harm contracts are not an evidence-based substitute for safety planning.

182. C using therapeutic documents to strengthen the alternative story

White and Epston used letters and other therapeutic documents to record and reinforce clients' alternative stories; they argued a letter could be worth several sessions. Bibliotherapy uses published reading material, and a written treatment plan or process notes serve documentation purposes rather than strengthening the client's preferred narrative.

183. B True score plus error

Classical test theory models every observed score as $X = T + E$, the true score plus random error. Reliability is then the ratio of true-score variance to observed-score variance. The mean-plus-z-times-SD expression is a formula for converting standard scores back to raw scores, not the classical test theory model.

184. D Validity of Cognition (VoC) scale

The VoC scale ranges from 1 (completely false) to 7 (completely true) and tracks the positive cognition during assessment and installation. The SUD scale, ranging from 0 to 10, rates disturbance associated with the target memory rather than belief in the positive cognition.

185. D renegotiating their marriage as a dyad without children at home

In the launching stage, Carter and McGoldrick list renegotiation of the marital system as a dyad among the key second-order changes. Coping with physiological decline belongs to later life, and making space for child-rearing belongs to families with young children.

186. A Splitting

Splitting occurs when members idealize one leader and devalue the other, which can divide co-leaders if they do not discuss it together and present a coordinated response. Pairing, one of Bion's basic assumptions, describes a group's hope invested in two members, and scapegoating targets a member rather than polarizing the leaders.

187. D REBT disputes beliefs more directly; Beck relies on guided discovery

Ellis often disputed irrational beliefs in an active, direct, and sometimes forceful way, while Beck stressed collaborative empiricism, Socratic questioning, and testing thoughts as hypotheses. Both approaches use homework heavily, and Beck's model works with core beliefs from early experience as well as present thoughts.

188. A Assess for cultural mistrust and examine her own possible bias first

ACA Code of Ethics E.5.b and E.5.c call on counselors to consider culture and to recognize the historical misdiagnosis and pathologizing of certain groups; Black clients have often been overdiagnosed with paranoid and psychotic conditions. Distrust grounded in real discrimination may be adaptive cultural mistrust rather than pathology, and DSM-5-TR's Cultural Formulation Interview helps the counselor understand his perspective before diagnosing.

189. C Give the PHQ-9 at regular intervals and compare scores to his intake baseline

Measurement-based care uses brief, valid, repeatable measures such as the PHQ-9, whose score ranges correspond to severity levels, to compare progress against baseline. The MMPI-3 is a lengthy broadband inventory not designed for weekly monitoring, and impressions or end-of-treatment questions are not standardized measurements.

190. C 5

The number needed to treat is 1 divided by the absolute difference in response rates: 1 / (0.60 - 0.40) = 1 / 0.20 = 5. Answering 20 confuses the absolute risk difference expressed as a percentage with the NNT itself.

191. B All of the counselor's reactions to the client, treated as clinical data

The totalistic view treats all of the counselor's emotional responses as countertransference and sees them as potentially useful data about the client and the relationship. The classical (Freudian) view is narrower, limiting countertransference to unconscious reactions to the client's transference that arise from the counselor's own conflicts.

192. B Turning away from a bid for connection

A bid is any attempt to connect, and ignoring or missing it is turning away; turning against would be an irritable or hostile reply (e.g., "Can't you see I'm busy?"). Stonewalling describes emotional withdrawal during conflict, and there is no conflict here; contempt requires a stance of superiority or disrespect.

193. A Provide Marcus only those portions of the record that relate directly to him, withholding Elena's confidential information

ACA B.6.e states that when clients request access to records involving multiple clients, counselors provide only the parts that relate directly to the requesting client and do not include confidential information related to any other client. A blanket refusal denies Marcus his own information, while full release breaches Elena's confidentiality.

194. C Elicit the client's view of the problem, its causes, and help-seeking

The 16-question core CFI elicits the client's cultural definition of the problem, perceptions of cause and context, cultural factors in coping and help-seeking, and cultural factors in current help-seeking, including the clinician relationship. It is a person-centered interview, not a scored acculturation scale, and DSM-5-TR now refers to cultural concepts of distress rather than culture-bound syndromes.

195. D Naltrexone

Naltrexone is an opioid antagonist that reduces craving and the reinforcing effects of alcohol without causing an aversive reaction; it requires that the person be opioid-free. Disulfiram is the tempting choice, but it works by producing an unpleasant reaction (flushing, nausea, palpitations) if alcohol is consumed. Naloxone is a short-acting antagonist used to reverse opioid overdose, and methadone treats opioid use disorder.

196. A Consult with a supervisor or colleague and document her reasoning

ACA Code of Ethics B.2.a directs counselors to consult with other professionals when in doubt about whether an exception to confidentiality applies, and documenting the assessment and reasoning is basic risk management. Warning the neighbor without meeting the threshold would be an unjustified breach, and ignoring the statement skips ongoing assessment.

197. A Other specified feeding or eating disorder (atypical anorexia nervosa)

Atypical anorexia nervosa is listed under other specified feeding or eating disorder for people who meet all anorexia criteria except that weight remains within or above the normal range despite significant loss. The unspecified category is used when the clinician chooses not to state the reason criteria are not met, which is the opposite of what this counselor wants.

198. A Address public encounters in informed consent and let clients choose whether to greet her

In small communities multiple relationships are often unavoidable, so the ethical task is to manage them by clarifying expectations in advance (ACA A.2, A.6). Letting the client lead protects confidentiality, because a warm public greeting can reveal the counseling relationship. Refusing clients or withdrawing from community life is impractical and can reduce access to care.

199. B Care

Erikson linked generativity versus stagnation in middle adulthood to the virtue of care, a concern for guiding the next generation and contributing to society. Wisdom is the virtue of ego integrity versus despair, fidelity of identity versus role confusion, and love of intimacy versus isolation.

200. D Encourage them to bring what happens between them outside the group back into the sessions

Yalom notes that extragroup socializing and subgrouping become harmful when they are kept secret, because the hidden alliance shapes group interactions without being examined. He recommends making it a norm that members bring outside contact back into the group, which turns the subgroup into material for interpersonal learning rather than banning it.