FULL LENGTH PRACTICE TESTS

1. What is the primary purpose of the CRCST Code of Ethics?
   a) To ensure counselors receive adequate compensation
   b) To guide counselors in maintaining professional and ethical standards
   c) To regulate the number of clients a counselor can see
   d) To enforce state licensing requirements

2. When faced with an ethical dilemma, what should a CRCST counselor do first?
   a) Consult with a supervisor or colleague
   b) Disclose the dilemma to the client
   c) Terminate the counseling relationship
   d) Ignore the issue if it does not directly harm the client

3. Which federal law protects the confidentiality of client health information in counseling settings?
   a) Americans with Disabilities Act (ADA)
   b) Health Insurance Portability and Accountability Act (HIPAA)
   c) Family Educational Rights and Privacy Act (FERPA)
   d) Civil Rights Act of 1964

4. A client shares information suggesting they may harm themselves. What is the counselor's ethical obligation?
   a) Maintain confidentiality unless the client consents to disclosure
   b) Take immediate action to ensure the client's safety, even if it breaches confidentiality
   c) Document the information but take no further action
   d) Discuss the issue with the client's family without informing the client

5. Which of the following best defines informed consent in counseling?
   a) A client's agreement to pay for services
   b) A client's acknowledgment of the counselor's credentials
   c) A client's understanding of the counseling process, risks, and benefits
   d) A client's permission for the counselor to consult with other professionals

6. A counselor is offered a gift by a client. What is the most ethical response?
   a) Accept the gift to strengthen the therapeutic relationship
   b) Politely decline the gift and explain professional boundaries
   c) Accept the gift but donate it to charity
   d) Ask the client to give the gift to another counselor

7. Under what circumstance is it ethically permissible to break client confidentiality?
   a) When the counselor believes the client is not making progress
   b) When the client is at risk of harming themselves or others
   c) When the client misses multiple sessions
   d) When the counselor wants to discuss the case with a colleague

8. What is the ethical responsibility of a counselor when working with a minor?
   a) Obtain consent only from the minor
   b) Obtain informed consent from the minor's legal guardian
   c) Proceed with counseling without any consent
   d) Require the minor to sign a confidentiality agreement

9. A counselor is attracted to a client. What is the most ethical course of action?
   a) Discuss the feelings with the client to maintain transparency
   b) Seek supervision and consider referring the client to another counselor
   c) Continue counseling without addressing the feelings
   d) Terminate the counseling relationship without explanation

10. Which of the following is a key component of cultural competence in counseling?
   a) Applying the same counseling techniques to all clients
   b) Understanding and respecting clients' cultural backgrounds and values
   c) Focusing solely on the client's presenting problem
   d) Encouraging clients to adopt the counselor's cultural values

11. A client asks for their counseling records. What should the counselor do?
   a) Deny the request to protect the client's privacy
   b) Provide the records in accordance with legal and ethical guidelines
   c) Charge the client a fee for accessing the records
   d) Share the records only with the client's family

12. What is the purpose of maintaining professional boundaries in counseling?
   a) To limit the number of sessions with a client
   b) To protect the therapeutic relationship and client well-being
   c) To ensure the counselor's personal needs are met
   d) To prevent the client from becoming too dependent

13. A counselor learns that a colleague is engaging in unethical behavior. What should they do?
   a) Confront the colleague publicly to address the issue
   b) Report the behavior to the appropriate professional or licensing board
   c) Ignore the behavior unless it directly affects their clients
   d) Discuss the issue with the colleague's clients

14. Which of the following is an example of a dual relationship in counseling?
   a) Counseling a client while also employing them in your private business
   b) Referring a client to another counselor for specialized treatment
   c) Attending a professional conference with a client
   d) Meeting a client in a public place for a session

15. How should a counselor handle a situation where a client's cultural beliefs conflict with the counselor's values?
   a) Attempt to change the client's beliefs to align with the counselor's values

b) Respect the client's beliefs and adapt counseling approaches accordingly
c) Terminate the counseling relationship immediately
d) Ignore the client's beliefs and focus on evidence-based practices

16. What is the ethical obligation of a counselor regarding continuing education?
   a) Only pursue continuing education if required by the employer
   b) Engage in ongoing professional development to maintain competence
   c) Avoid continuing education to focus on client care
   d) Delegate continuing education to a supervisor

17. A client requests telehealth services. What must the counselor ensure?
   a) The platform used complies with HIPAA regulations
   b) The client pays an additional fee for telehealth
   c) The sessions are recorded for future reference
   d) The client waives their right to confidentiality

18. Which principle guides a counselor's duty to warn in cases of potential harm?
   a) Tarasoff v. Regents of the University of California
   b) Roe v. Wade
   c) Brown v. Board of Education
   d) Miranda v. Arizona

19. What is the ethical role of a counselor when a client expresses suicidal ideation?
   a) Encourage the client to handle the situation independently
   b) Assess the risk and develop a safety plan with the client
   c) Immediately refer the client to a psychiatrist
   d) Avoid discussing the ideation to prevent escalation

20. A counselor is asked to testify in court about a client's mental health. What should they do?
   a) Provide testimony without consulting the client
   b) Obtain the client's consent or a court order before disclosing information
   c) Refuse to testify under any circumstances
   d) Share only positive information about the client

21. Which of the following is a legal requirement for maintaining client records?
   a) Storing records indefinitely
   b) Keeping records secure and confidential
   c) Sharing records with other professionals without consent
   d) Destroying records after each session

22. What should a counselor do if they suspect a client is being abused?
   a) Confront the alleged abuser directly
   b) Report the suspected abuse to the appropriate authorities
   c) Wait for the client to confirm the abuse before taking action
   d) Document the suspicion but take no further action

23. A client wants to end counseling prematurely. What is the ethical response?
    a) Insist the client continue until goals are met
    b) Discuss the reasons for termination and explore alternatives
    c) Terminate immediately without discussion
    d) Charge the client for missed future sessions

24. Which of the following is an ethical use of social media by a counselor?
    a) Posting client success stories with their permission
    b) Sharing client information anonymously on social media
    c) Friending clients on personal social media accounts
    d) Using social media to advertise free counseling sessions

25. What is the primary purpose of a professional disclosure statement?
    a) To outline the counselor's fees and payment policies
    b) To inform clients about the counselor's qualifications and approach
    c) To guarantee successful counseling outcomes
    d) To limit the counselor's liability in legal cases

26. A counselor is unsure about the legality of a client's request. What should they do?
    a) Comply with the request to maintain the therapeutic alliance
    b) Consult with a legal professional or supervisor
    c) Deny the request without explanation
    d) Ask the client to clarify the request in writing

27. Which of the following is an example of an ethical violation?
    a) Referring a client to a specialist for additional support
    b) Engaging in a romantic relationship with a current client
    c) Attending a client's community event with their permission
    d) Consulting with a colleague aboutmare a client's case

28. How should a counselor handle a client who refuses to pay for services?
    a) Terminate the relationship immediately
    b) Discuss payment options and document the conversation
    c) Share the client's nonpayment with other professionals
    d) Continue services without addressing the issue

29. What is the ethical responsibility of a counselor when working with diverse populations?
    a) Apply universal counseling techniques to all clients
    b) Adapt interventions to respect cultural differences
    c) Focus only on the client's mental health symptoms
    d) Avoid discussing cultural differences to remain neutral

30. A client shares information about illegal activity. What is the counselor's ethical duty?
    a) Report the activity to law enforcement immediately
    b) Maintain confidentiality unless the activity involves imminent harm
    c) Discuss the activity with other clients for insight

d) Terminate the counseling relationship

31. What is the role of supervision in maintaining ethical practice?
   a) To evaluate the counselor's performance for promotion
   b) To provide guidance on complex ethical and clinical issues
   c) To monitor the counselor's personal life
   d) To ensure clients pay for services on time

32. A counselor receives a subpoena for client records. What should they do?
   a) Release the records immediately to comply with the subpoena
   b) Consult with a legal professional to ensure compliance with ethical and legal standards
   c) Destroy the records to protect client confidentiality
   d) Discuss the subpoena with the client's family

33. Which of the following best defines nonmaleficence in counseling ethics?
   a) Promoting the client's well-being
   b) Avoiding harm to the client
   c) Ensuring the client achieves their goals
   d) Maintaining professional credentials

34. A client asks the counselor to falsify billing records. What is the ethical response?
   a) Agree to the request to maintain the therapeutic relationship
   b) Refuse the request and explain the ethical implications
   c) Ignore the request and continue counseling
   d) Terminate the relationship without explanation

35. What is the purpose of a professional liability insurance policy for counselors?
   a) To cover the costs of client sessions
   b) To protect the counselor from legal claims related to their practice
   c) To ensure clients receive free services
   d) To guarantee the counselor's licensure

36. A counselor suspects a client is not being truthful. What is the ethical approach?
   a) Confront the client aggressively to elicit the truth
   b) Explore the client's statements respectfully to understand their perspective
   c) Terminate the relationship due to dishonesty
   d) Ignore the suspected dishonesty to avoid conflict

37. Which of the following is a core principle of ethical counseling practice?
   a) Autonomy
   b) Profitability
   c) Efficiency
   d) Competition

38. A client requests a copy of their treatment plan. What should the counselor do?
   a) Deny the request to maintain control over the plan
   b) Provide the treatment plan in accordance with ethical guidelines
   c) Charge the client for a copy of the plan
   d) Share the plan with the client's employer

39. What is the ethical responsibility of a counselor when a client misses multiple sessions?
   a) Terminate the relationship without notice
   b) Reach out to the client to discuss their attendance and needs
   c) Bill the client for missed sessions without contact
   d) Discuss the client's absence with other professionals

40. A counselor is asked to provide counseling services outside their scope of practice. What should they do?
   a) Provide the services to meet the client's needs
   b) Refer the client to a qualified cost professional
   c) Ignore the request and continue with standard interventions
   d) Charge a higher fee for specialized services

41. Which of the following is a key ethical consideration when using technology in counseling?
   a) Ensuring the technology is cost-effective
   b) Protecting client confidentiality and data security
   c) Using the latest technology regardless of regulations
   d) Requiring clients to use technology for sessions

42. A client asks the counselor to keep their sessions secret from their spouse. What is the ethical response?
   a) Agree to the request without discussion
   b) Discuss confidentiality limits and explore the client's concerns
   c) Refuse to counsel the client due to the request
   d) Inform the spouse about the sessions

43. What is the ethical obligation of a counselor regarding self-care?
   a) Prioritize client needs over personal well-being
   b) Engage in regular self-care to maintain professional competence
   c) Avoid self-care to focus on professional development
   d) Delegate self-care to a supervisor

44. A counselor is asked to provide a diagnosis for a client they have not assessed. What is the ethical response?
   a) Provide the diagnosis based on the client's self-report
   b) Refuse to provide a diagnosis without a proper assessment
   c) Consult with another counselor to confirm the diagnosis
   d) Provide a general diagnosis to satisfy the request

45. Which of the following is an ethical way to advertise counseling services?
    a) Promising guaranteed results to attract clients
    b) Providing accurate information about qualifications and services
    c) Sharing client testimonials without their consent
    d) Offering free sessions to all new clients

46. A client's insurance company requests detailed session notes. What should the counselor do?
    a) Share the notes without consulting the client
    b) Obtain the client's consent before releasing the notes
    c) Refuse to share the notes under any circumstances
    d) Provide the notes with identifying information removed

47. What is the ethical responsibility of a counselor when a client expresses discriminatory views?
    a) Terminate the relationship immediately
    b) Explore the client's views respectfully to understand their perspective
    c) Agree with the client to maintain rapport
    d) Ignore the views to focus on other issues

48. A counselor is offered a referral fee for sending clients to a specific provider. What is the ethical response?
    a) Accept the fee to support the referral network
    b) Decline the fee to avoid a conflict of interest
    c) Accept the fee but disclose it to the client
    d) Refer clients only to providers offering fees

49. What is the purpose of the ethical principle of beneficence in counseling?
    a) To ensure the counselor's financial success
    b) To promote the client's well-being and growth
    c) To limit the counselor's liability
    d) To enforce strict adherence to treatment plans

50. A client asks the counselor to provide therapy to a friend during their session. What is the ethical response?
    a) Agree to include the friend to support the client
    b) Explain that therapy is individual and refer the friend to another counselor
    c) Allow the friend to observe the session silently
    d) Charge an additional fee for the friend's participation

51. Which of the following is a legal requirement for counselors in most states?
    a) Maintaining client records for a specified period
    b) Sharing client records with other professionals freely
    c) Charging clients based on their income level
    d) Providing free services to all clients

52. A counselor is experiencing burnout. What is the ethical course of action?
   a) Continue counseling clients to meet their needs
   b) Take steps to address burnout, such as seeking supervision or reducing caseload
   c) Terminate all client relationships immediately
   d) Ignore the burnout to maintain professionalism

53. What should a counselor do if a client makes a complaint against them?
   a) Ignore the complaint to avoid escalation
   b) Address the complaint through the appropriate professional or legal channels
   c) Discuss the complaint with other clients for advice
   d) Terminate the relationship with the client

54. Which of the following is an ethical consideration when terminating a counseling relationship?
   a) Providing no explanation to the client
   b) Ensuring the client has appropriate referrals and closure
   c) Charging the client for future missed sessions
   d) Sharing the reason for termination with other professionals

55. A client insists on receiving a specific treatment the counselor is not trained to provide. What should the counselor do?
   a) Provide the treatment to satisfy the client
   b) Refer the client to a professional trained in the specific treatment
   c) Ignore the request and continue with standard interventions
   d) Research the treatment independently and provide it

56. What is the ethical responsibility of a counselor regarding client autonomy?
   a) Make decisions for the client to ensure positive outcomes
   b) Respect the client's right to make their own decisions
   c) Limit the client's choices to simplify the counseling process
   d) Require the client to follow the counselor's recommendations

57. A counselor is asked to provide services in a language they are not fluent in. What is the ethical response?
   a) Provide services using a translation app
   b) Refer the client to a counselor fluent in the client's language
   c) Continue services and learn the language during sessions
   d) Ask the client to communicate in the counselor's language

58. Which of the following is an ethical way to handle a conflict of interest?
   a) Disclose the conflict to the client and take steps to mitigate it
   b) Ignore the conflict to maintain the therapeutic relationship
   c) Terminate the relationship without explanation
   d) Prioritize the counselor's interests over the client's

59. A client asks the counselor to share their personal beliefs. What is the ethical response?
    a) Share the beliefs to build trust with the client
    b) Politely decline and focus on the client's needs
    c) Discuss the beliefs only if they align with the client's
    d) Terminate the relationship to avoid bias

60. What is the ethical approach to handling a client's request for an inappropriate intervention?
    a) Provide the intervention to maintain client satisfaction
    b) Explain why the intervention is inappropriate and offer alternatives
    c) Ignore the request and continue with the current plan
    d) Terminate the relationship without discussion

61. A counselor discovers they have a mutual acquaintance with a client. What should they do?
    a) Discuss the mutual acquaintance to build rapport
    b) Disclose the connection and assess its impact on the therapeutic relationship
    c) Ignore the connection to maintain professionalism
    d) Terminate the relationship immediately

62. Which of the following is a key ethical principle when working with involuntary clients?
    a) Prioritizing the counselor's goals over the client's needs
    b) Respecting the client's autonomy as much as possible
    c) Requiring the client to comply with all interventions
    d) Limiting communication to enforce compliance

63. A client asks the counselor to provide a letter for legal purposes. What is the ethical response?
    a) Write the letter without verifying the client's claims
    b) Provide the letter only after assessing its accuracy and appropriateness
    c) Refuse to write the letter under any circumstances
    d) Charge an additional fee for writing the letter

64. What is the ethical responsibility of a counselor regarding informed consent with groups?
    a) Obtain consent only from the group leader
    b) Ensure all group members understand the counseling process and confidentiality limits
    c) Proceed without consent if the group agrees to participate
    d) Require group members to sign a waiver of rights

65. A counselor is asked to provide services in a setting that compromises confidentiality. What should they do?
    a) Proceed with the services to meet the client's needs
    b) Discuss the confidentiality concerns and seek an alternative setting
    c) Ignore the setting's limitations to maintain the session
    d) Terminate the relationship without explanation

66. Which of the following is an ethical consideration when collaborating with other professionals?
   a) Sharing client information freely to facilitate collaboration
   b) Obtaining client consent before sharing information
   c) Collaborating without informing the client
   d) Limiting collaboration to avoid conflicts

67. A client asks the counselor to advocate for them in a legal matter. What is the ethical response?
   a) Advocate for the client without assessing the situation
   b) Clarify the counselor's role and refer the client to appropriate legal resources
   c) Refuse to assist the client to remain neutral
   d) Charge a fee for advocacy services

68. What is the ethical responsibility of a counselor when a client discloses a past ethical violation by another counselor?
   a) Discuss the violation with the client's family
   b) Report the violation to the appropriate professional board
   c) Ignore the disclosure unless it involves current harm
   d) Confront the other counselor directly

69. A counselor is asked to provide services to a family member. What is the ethical response?
   a) Provide services to maintain family harmony
   b) Refer the family member to another counselor to avoid a dual relationship
   c) Provide services only if the family member insists
   d) Charge a reduced fee for family members

70. Which of the following is an ethical way to handle a client's gift of significant monetary value?
   a) Accept the gift to avoid offending the client
   b) Politely decline the gift and discuss professional boundaries
   c) Accept the gift but donate it to charity without informing the client
   d) Use the gift to offset the client's session fees

71. A counselor is unsure about a client's capacity to make decisions. What should they do?
   a) Make decisions for the client to ensure their safety
   b) Assess the client's capacity and consult with a supervisor if needed
   c) Ignore the concern and continue counseling
   d) Terminate the relationship immediately

72. What is the ethical responsibility of a counselor when a client requests to record sessions?
   a) Allow the recording without discussion
   b) Discuss the implications and establish guidelines for recordings
   c) Refuse the request to protect confidentiality
   d) Record the sessions and keep copies for the counselor's records

73. What is the primary purpose of the initial intake interview in counseling?
   a) To establish a diagnosis immediately
   b) To gather comprehensive client information and build rapport
   c) To assign a treatment plan without further assessment
   d) To determine the client's insurance coverage

74. Which of the following is a key component of a biopsychosocial assessment?
   a) Focusing solely on the client's mental health symptoms
   b) Evaluating biological, psychological, and social factors
   c) Assessing the client's financial status only
   d) Reviewing the client's academic records

75. What is the ethical responsibility of a counselor during the intake process?
   a) To diagnose the client based on initial impressions
   b) To ensure informed consent and explain the counseling process
   c) To begin treatment without client input
   d) To limit the session to administrative tasks

76. Which standardized tool is commonly used to assess depression symptoms?
   a) Minnesota Multiphasic Personality Inventory (MMPI-2)
   b) Beck Depression Inventory (BDI-II)
   c) Wechsler Adult Intelligence Scale (WAIS)
   d) Rorschach Inkblot Test

77. When conducting a mental status examination, what should a counselor assess?
   a) The client's physical appearance, mood, and cognitive functioning
   b) The client's financial stability and employment history
   c) The client's social media presence
   d) The client's academic achievements

78. A client reports vague symptoms during intake. What should the counselor do?
   a) Assign a diagnosis based on the most likely condition
   b) Ask open-ended questions to clarify the client's concerns
   c) Refer the client to a psychiatrist immediately
   d) Dismiss the symptoms as non-significant

79. Which DSM-5 criterion is essential for diagnosing generalized anxiety disorder?
   a) Excessive worry occurring more days than not for at least six months
   b) A single episode of intense fear lasting one hour
   c) Persistent hallucinations for three months

d) Loss of interest in activities for two weeks

80. What is the purpose of using a genogram during an intake assessment?
    a) To assess the client's cognitive abilities
    b) To map family relationships and patterns across generations
    c) To evaluate the client's physical health
    d) To determine the client's financial resources

81. A client discloses suicidal ideation during intake. What is the counselor's first step?
    a) Diagnose the client with major depressive disorder
    b) Conduct a suicide risk assessment
    c) Refer the client to a hospital immediately
    d) Discuss the client's childhood experiences

82. Which of the following is a key ethical consideration in diagnostic assessments?
    a) Diagnosing based on client self-report alone
    b) Using standardized tools and clinical judgment to ensure accuracy
    c) Assigning a diagnosis to secure insurance reimbursement
    d) Avoiding diagnosis to prevent labeling the client

83. What is the role of collateral information in the assessment process?
    a) To replace the client's self-reported information
    b) To provide additional context from family or other sources
    c) To determine the client's treatment plan without further input
    d) To assess the client's financial situation

84. Which of the following is a symptom of post-traumatic stress disorder (PTSD) per DSM-5?
    a) Persistent low mood for at least two years
    b) Intrusive memories of a traumatic event
    c) Excessive spending and impulsivity
    d) Chronic feelings of emptiness

85. When assessing a client's substance use, what should the counselor prioritize?
    a) The client's employment history
    b) The frequency, duration, and impact of substance use
    c) The client's academic performance
    d) The client's social media activity

86. A client presents with symptoms of both anxiety and depression. What should the counselor do?

    a) Diagnose only the most prominent condition

    b) Assess for comorbid conditions using standardized criteria

    c) Ignore the less severe symptoms

    d) Refer the client to a psychiatrist without assessment

87. What is the purpose of a functional assessment in counseling?

    a) To evaluate the client's physical health exclusively

    b) To assess how symptoms impact daily functioning

    c) To determine the client's insurance coverage

    d) To identify the client's career goals

88. Which of the following is a red flag for potential child abuse during an intake?

    a) The child appears shy and reserved

    b) Unexplained injuries or frequent absences from school

    c) The child expresses interest in extracurricular activities

    d) The child has strong academic performance

89. How should a counselor approach cultural factors during an intake assessment?

    a) Ignore cultural factors to remain objective

    b) Incorporate cultural context into the assessment process

    c) Apply the same assessment tools to all clients

    d) Ask the client to adopt the counselor's cultural framework

90. What is the ethical obligation when a client refuses to provide information during intake?

    a) Proceed with a diagnosis based on assumptions

    b) Respect the client's autonomy and explore barriers to disclosure

    c) Terminate the session immediately

    d) Require the client to provide all requested information

91. Which tool is commonly used to assess alcohol use disorder?

    a) AUDIT (Alcohol Use Disorders Identification Test)

    b) MMPI-2 (Minnesota Multiphasic Personality Inventory)

    c) GAD-7 (Generalized Anxiety Disorder Scale)

    d) PHQ-9 (Patient Health Questionnaire)

92. A client reports memory issues during an assessment. What should the counselor do?
   a) Diagnose dementia immediately
   b) Conduct a cognitive assessment and refer for medical evaluation
   c) Ignore the issue unless it persists for months
   d) Focus only on emotional symptoms

93. What is the purpose of a risk assessment in counseling?
   a) To evaluate the client's financial stability
   b) To identify potential harm to the client or others
   c) To determine the client's career aspirations
   d) To assess the client's academic history

94. Which of the following is a symptom of major depressive disorder per DSM-5?
   a) Recurrent panic attacks
   b) Persistent feelings of sadness for at least two weeks
   c) Excessive worry about multiple events
   d) Delusions of grandeur

95. When assessing a minor, what must the counselor obtain?
   a) Consent from the minor only
   b) Informed consent from the minor's legal guardian
   c) Consent from the minor's school principal
   d) No consent if the minor agrees to counseling

96. What is the role of the DSM-5 in the diagnostic process?
   a) To provide treatment recommendations
   b) To offer standardized criteria for mental health diagnoses
   c) To assess the client's physical health
   d) To determine the client's insurance eligibility

97. A client reports hearing voices. What should the counselor assess for?
   a) Generalized anxiety disorder
   b) Psychotic disorders or medical conditions
   c) Social anxiety disorder
   d) Adjustment disorder

98. Which of the following is a key component of a suicide risk assessment?
   a) The client's employment history
   b) The presence of a plan and access to means
   c) The client's academic performance

d) The client's social media activity

99. What should a counselor do if a client's symptoms do not fit a clear DSM-5 diagnosis?
    a) Assign the closest matching diagnosis
    b) Use an unspecified diagnosis and continue assessment
    c) Avoid diagnosing and focus on treatment
    d) Refer the client to a psychiatrist immediately

100. Which of the following is an ethical consideration when using assessment tools?
    a) Using tools without proper training
    b) Ensuring tools are valid and culturally appropriate
    c) Relying solely on the tool's results for diagnosis
    d) Avoiding standardized tools to save time

101. A client reports a history of trauma. What should the counselor assess?
    a) The client's financial situation
    b) Symptoms of PTSD or related disorders
    c) The client's career goals
    d) The client's academic history

102. What is the purpose of a structured clinical interview?
    a) To build rapport without assessing symptoms
    b) To systematically gather diagnostic information
    c) To evaluate the client's physical health
    d) To determine the client's insurance coverage

103. A client presents with symptoms of mania. Which DSM-5 disorder should the counselor consider?
    a) Major depressive disorder
    b) Bipolar I disorder
    c) Generalized anxiety disorder
    d) Obsessive-compulsive disorder

104. What is the ethical responsibility when assessing a client with limited English proficiency?
    a) Use standard tools without modification
    b) Provide an interpreter or culturally appropriate tools
    c) Diagnose based on nonverbal cues
    d) Refer the client to another counselor immediately

105. Which of the following is a symptom of obsessive-compulsive disorder (OCD)?
   a) Persistent low mood for months
   b) Recurrent intrusive thoughts and compulsive behaviors
   c) Flashbacks of a traumatic event
   d) Excessive spending and impulsivity

106. A client reports chronic pain during intake. What should the counselor do?
   a) Ignore the pain as it is not a mental health issue
   b) Assess the pain's impact on mental health and refer for medical evaluation
   c) Diagnose a somatic symptom disorder immediately
   d) Focus only on emotional symptoms

107. What is the purpose of a psychosocial history in an intake assessment?
   a) To evaluate the client's physical health exclusively
   b) To understand the client's social and environmental context
   c) To determine the client's insurance eligibility
   d) To assess the client's academic performance

108. Which of the following is a key indicator of a panic attack per DSM-5?
   a) Persistent worry for six months
   b) Sudden onset of intense fear with physical symptoms
   c) Chronic feelings of emptiness
   d) Loss of interest in daily activities

109. A client appears disoriented during an assessment. What should the counselor do?
   a) Proceed with the intake as normal
   b) Assess for cognitive or medical issues and refer as needed
   c) Diagnose a psychotic disorder immediately
   d) Focus only on emotional symptoms

110. What is the ethical obligation when a client provides conflicting information?
   a) Accept the most recent information as accurate
   b) Explore inconsistencies respectfully to clarify the client's history
   c) Diagnose based on the most severe symptoms
   d) Terminate the session due to dishonesty

111. Which tool is commonly used to assess anxiety symptoms?
   a) PHQ-9 (Patient Health Questionnaire)
   b) GAD-7 (Generalized Anxiety Disorder Scale)
   c) MMPI-2 (Minnesota Multiphasic Personality Inventory)

d) AUDIT (Alcohol Use Disorders Identification Test)

112. A client reports a history of self-harm. What should the counselor prioritize?
   a) Diagnosing a personality disorder
   b) Assessing the frequency and severity of self-harm behaviors
   c) Focusing on the client's career goals
   d) Ignoring the behavior unless it is recent

113. What is the purpose of a differential diagnosis in counseling?
   a) To assign multiple diagnoses to the client
   b) To distinguish between similar mental health conditions
   c) To determine the client's treatment plan without assessment
   d) To evaluate the client's physical health

114. A client reports sleep disturbances. What should the counselor assess?
   a) The client's financial situation
   b) Potential mental health or medical causes
   c) The client's academic performance
   d) The client's social media activity

115. Which of the following is a symptom of schizophrenia per DSM-5?
   a) Persistent low mood for two weeks
   b) Hallucinations or delusions for at least one month
   c) Excessive worry about multiple events
   d) Recurrent panic attacks

116. What is the ethical responsibility when assessing a client with a history of substance abuse?
   a) Diagnose substance use disorder without further inquiry
   b) Assess the impact of substance use on mental health and functioning
   c) Ignore the substance use unless it is the primary concern
   d) Refer the client to a substance abuse program immediately

117. A client reports feeling overwhelmed by work. What should the counselor assess?
   a) The client's academic history
   b) Potential stressors and symptoms of adjustment disorder
   c) The client's financial situation
   d) The client's social media presence

118. Which of the following is a key component of a comprehensive intake assessment?
   a) Focusing only on the client's current symptoms
   b) Gathering information on medical, psychological, and social history
   c) Assessing the client's insurance coverage only
   d) Evaluating the client's career goals exclusively

119. A client reports a recent traumatic event. What should the counselor assess?
   a) The client's academic performance
   b) Symptoms of acute stress disorder or PTSD
   c) The client's financial stability
   d) The client's social media activity

120. What is the purpose of using validated assessment tools in counseling?
   a) To reduce the time spent on assessments
   b) To ensure accurate and reliable diagnostic information
   c) To replace clinical judgment entirely
   d) To assess the client's physical health

121. A client presents with symptoms of agitation and irritability. What should the counselor consider?
   a) Diagnosing a personality disorder immediately
   b) Assessing for mood disorders or environmental stressors
   c) Ignoring the symptoms unless they persist for months
   d) Focusing only on the client's social history

122. Which of the following is an ethical consideration when diagnosing a client?
   a) Assigning a diagnosis to expedite treatment
   b) Ensuring the diagnosis is supported by sufficient evidence
   c) Diagnosing based on the counselor's intuition
   d) Avoiding diagnosis to prevent insurance issues

123. A client reports a history of eating issues. What should the counselor assess?
   a) The client's academic performance
   b) Symptoms of eating disorders and related health impacts
   c) The client's financial situation
   d) The client's social media activity

124. What is the role of a mental health history in the intake process?
   a) To determine the client's insurance coverage
   b) To identify past diagnoses, treatments, and outcomes

c) To assess the client's physical health exclusively

d) To evaluate the client's career goals

125. A client presents with symptoms of social withdrawal. What should the counselor assess?

a) The client's financial situation

b) Potential causes such as depression or social anxiety

c) The client's academic history

d) The client's social media presence

126. Which of the following is a symptom of attention-deficit/hyperactivity disorder (ADHD) per DSM-5?

a) Persistent low mood for two weeks

b) Difficulty sustaining attention and impulsive behavior

c) Recurrent intrusive thoughts

d) Flashbacks of a traumatic event

127. What should a counselor do if a client's symptoms are unclear during intake?

a) Assign a provisional diagnosis immediately

b) Conduct further assessment to clarify symptoms

c) Refer the client to a psychiatrist without further inquiry

d) Ignore the symptoms and focus on rapport

128. What is the purpose of a clinical formulation in the assessment process?

a) To assign a diagnosis without further evaluation

b) To integrate assessment data into a cohesive understanding of the client

c) To determine the client's insurance eligibility

d) To evaluate the client's physical health

129. A client reports chronic fatigue. What should the counselor assess?

a) The client's financial situation

b) Potential mental health or medical causes

c) The client's academic performance

d) The client's social media activity

130. Which of the following is a key ethical principle in the assessment process?

a) Diagnosing quickly to begin treatment

b) Ensuring assessments are thorough and culturally sensitive

c) Relying solely on client self-report

d) Avoiding standardized tools to save time

131. A client presents with symptoms of paranoia. What should the counselor assess?
   a) The client's academic history
   b) Potential psychotic disorders or environmental factors
   c) The client's financial situation
   d) The client's social media activity

132. What is the purpose of a safety plan in the context of a risk assessment?
   a) To outline the client's career goals
   b) To reduce the risk of harm to the client or others
   c) To assess the client's financial stability
   d) To evaluate the client's academic performance

133. A client reports a history of panic attacks. What should the counselor assess?
   a) The client's academic performance
   b) The frequency, triggers, and impact of the panic attacks
   c) The client's financial situation
   d) The client's social media activity

134. Which of the following is a symptom of borderline personality disorder per DSM-5?
   a) Persistent low mood for two years
   b) Intense fear of abandonment and unstable relationships
   c) Recurrent panic attacks
   d) Excessive worry about multiple events

135. What should a counselor do if a client's symptoms suggest a medical issue?
   a) Diagnose the medical issue based on symptoms
   b) Refer the client for a medical evaluation
   c) Ignore the symptoms unless they are severe
   d) Focus only on mental health symptoms

136. What is the role of rapport in the intake process?
   a) To assign a diagnosis quickly
   b) To build trust and facilitate open communication
   c) To assess the client's financial situation
   d) To determine the client's insurance coverage

137. A client reports a history of bipolar disorder. What should the counselor assess?
   a) The client's academic performance
   b) The history of mood episodes and current symptoms
   c) The client's financial situation

d) The client's social media activity

138. Which of the following is an ethical consideration when using the DSM-5?
   a) Assigning a diagnosis to secure funding
   b) Using the DSM-5 as a guide alongside clinical judgment
   c) Diagnosing based solely on DSM-5 criteria
   d) Avoiding the DSM-5 to prevent labeling

139. A client reports feeling hopeless. What should the counselor assess?
   a) The client's financial situation
   b) Symptoms of depression or other mental health conditions
   c) The client's academic performance
   d) The client's social media activity

140. What is the purpose of a collateral interview in the assessment process?
   a) To replace the client's self-reported information
   b) To gather additional perspectives from family or others
   c) To assess the client's physical health
   d) To determine the client's insurance eligibility

141. A client presents with symptoms of dissociation. What should the counselor assess?
   a) The client's academic history
   b) Potential dissociative disorders or trauma history
   c) The client's financial situation
   d) The client's social media activity

142. Which of the following is a key component of a trauma-informed assessment?
   a) Focusing only on current symptoms
   b) Creating a safe environment and exploring trauma history
   c) Diagnosing without client input
   d) Assessing the client's financial stability

143. A client reports a history of aggressive behavior. What should the counselor assess?
   a) The client's academic performance
   b) Triggers and patterns of the aggressive behavior
   c) The client's financial situation
   d) The client's social media activity

144. What is the ethical responsibility when a client's diagnosis is uncertain?
   a) Assign a diagnosis to begin treatment

b) Continue assessment and use a provisional diagnosis if needed

c) Refer the client to a psychiatrist immediately

d) Avoid diagnosis entirely

145. Which therapeutic approach is most effective for treating obsessive-compulsive disorder (OCD)?

a) Psychodynamic therapy

b) Exposure and response prevention (ERP)

c) Play therapy

d) Solution-focused brief therapy

146. A client with generalized anxiety disorder (GAD) reports excessive worry. What is a primary intervention?

a) Prescribing medication

b) Teaching relaxation techniques

c) Encouraging avoidance of stressors

d) Focusing on childhood trauma

147. What is a common symptom of major depressive disorder that impacts daily functioning?

a) Elevated mood and high energy

b) Persistent feelings of hopelessness

c) Recurrent intrusive thoughts

d) Excessive risk-taking behavior

148. When working with a client with post-traumatic stress disorder (PTSD), what should a counselor prioritize?

a) Exploring unrelated life goals

b) Addressing trauma-related symptoms

c) Focusing on financial stressors

d) Assessing academic performance

149. Which of the following is a hallmark symptom of schizophrenia?

a) Chronic low mood

b) Hallucinations or delusions

c) Excessive worry about daily events

d) Compulsive behaviors

150. A client with substance use disorder is in denial. What is an appropriate counseling approach?
   a) Confront the client aggressively
   b) Use motivational interviewing
   c) Recommend immediate detoxification
   d) Focus on unrelated mental health issues

151. What is a key characteristic of borderline personality disorder (BPD)?
   a) Stable interpersonal relationships
   b) Fear of abandonment and emotional instability
   c) Persistent low energy and fatigue
   d) Excessive need for order and control

152. When counseling a client with social anxiety disorder, what is a primary goal?
   a) Encouraging avoidance of social situations
   b) Reducing fear in social interactions
   c) Focusing on physical health issues
   d) Exploring unrelated childhood experiences

153. Which intervention is most appropriate for a client with bipolar I disorder experiencing mania?
   a) Encouraging high-energy activities
   b) Teaching mood stabilization techniques
   c) Focusing on long-term career goals
   d) Avoiding discussion of mood symptoms

154. A client reports panic attacks. What is a common physical symptom to address?
   a) Persistent low mood
   b) Rapid heartbeat or shortness of breath
   c) Chronic fatigue
   d) Excessive organization

155. What is the primary focus when counseling a client with an eating disorder?
   a) Addressing body image and eating behaviors
   b) Exploring academic performance
   c) Focusing on financial stressors
   d) Ignoring physical symptoms

156. Which of the following is a symptom of attention-deficit/hyperactivity disorder (ADHD) in adults?
    a) Persistent low mood
    b) Difficulty sustaining attention
    c) Recurrent flashbacks
    d) Excessive fear of abandonment

157. When working with a client with autism spectrum disorder (ASD), what should a counselor consider?
    a) Ignoring social communication challenges
    b) Tailoring interventions to sensory and social needs
    c) Focusing on unrelated academic goals
    d) Applying standard interventions without modification

158. A client with a history of trauma reports dissociation. What is an appropriate intervention?
    a) Encouraging avoidance of triggers
    b) Using grounding techniques
    c) Focusing on unrelated life events
    d) Ignoring dissociative symptoms

159. Which of the following is a key feature of narcissistic personality disorder?
    a) Excessive empathy for others
    b) Grandiose sense of self-importance
    c) Persistent low self-esteem
    d) Chronic feelings of emptiness

160. What is a primary intervention for a client with alcohol use disorder?
    a) Encouraging continued alcohol use in moderation
    b) Developing a relapse prevention plan
    c) Focusing on unrelated financial issues
    d) Ignoring substance use history

161. A client with PTSD experiences nightmares. What is an appropriate therapeutic approach?
    a) Cognitive processing therapy (CPT)
    b) Solution-focused brief therapy
    c) Play therapy
    d) Psychodynamic therapy

162. When counseling a client with a history of self-harm, what should a counselor prioritize?
a) Exploring unrelated career goals
b) Addressing underlying emotional distress
c) Focusing on academic performance
d) Ignoring self-harm behaviors

163. Which of the following is a symptom of panic disorder?
a) Persistent low mood
b) Recurrent unexpected panic attacks
c) Excessive need for control
d) Chronic feelings of emptiness

164. What is a key consideration when working with a client with a developmental disability?
a) Applying standard interventions without modification
b) Adapting communication and interventions to client needs
c) Focusing on unrelated financial stressors
d) Ignoring developmental history

165. A client with obsessive thoughts reports distress. What is an appropriate intervention?
a) Encouraging avoidance of obsessive thoughts
b) Using cognitive-behavioral therapy (CBT)
c) Focusing on unrelated life goals
d) Ignoring obsessive thoughts

166. Which of the following is a common symptom of generalized anxiety disorder?
a) Persistent feelings of hopelessness
b) Excessive worry about multiple events
c) Recurrent intrusive memories
d) Elevated mood and impulsivity

167. When counseling a client with a substance use disorder, what is a key goal?
a) Encouraging continued substance use
b) Promoting abstinence or harm reduction
c) Focusing on unrelated academic issues
d) Ignoring substance use history

168. A client with depression reports low motivation. What is an appropriate intervention?
a) Encouraging isolation to reduce stress
b) Using behavioral activation techniques
c) Focusing on unrelated financial issues

d) Ignoring motivational challenges

169. Which of the following is a symptom of post-traumatic stress disorder (PTSD)?
   a) Excessive need for order and control
   b) Avoidance of trauma-related stimuli
   c) Persistent low energy
   d) Recurrent panic attacks

170. What is a primary focus when counseling a client with a personality disorder?
   a) Addressing maladaptive patterns of behavior
   b) Focusing on unrelated academic goals
   c) Encouraging avoidance of relationships
   d) Ignoring emotional distress

171. A client with ADHD struggles with organization. What is an appropriate intervention?
   a) Encouraging avoidance of responsibilities
   b) Teaching organizational strategies
   c) Focusing on unrelated financial stressors
   d) Ignoring organizational challenges

172. Which therapeutic approach is most effective for treating phobias?
   a) Psychodynamic therapy
   b) Exposure therapy
   c) Play therapy
   d) Narrative therapy

173. A client with a history of trauma reports hypervigilance. What should a counselor do?
   a) Ignore the symptom unless it persists
   b) Address hypervigilance with trauma-focused interventions
   c) Focus on unrelated life goals
   d) Encourage avoidance of triggers

174. What is a key consideration when counseling a client with a substance use disorder?
   a) Ignoring the substance use history
   b) Assessing co-occurring mental health conditions
   c) Focusing only on physical health
   d) Encouraging continued substance use

175. Which of the following is a symptom of bipolar II disorder?
    a) Persistent low mood for two years
    b) Hypomanic episodes and depressive episodes
    c) Recurrent intrusive thoughts
    d) Excessive fear of social situations

176. A client with social anxiety reports fear of public speaking. What is an appropriate intervention?
    a) Encouraging avoidance of public speaking
    b) Using gradual exposure techniques
    c) Focusing on unrelated academic issues
    d) Ignoring the fear

177. What is the primary goal when counseling a client with an anxiety disorder?
    a) Eliminating all stress from the client's life
    b) Reducing anxiety symptoms and improving coping skills
    c) Focusing on unrelated financial stressors
    d) Ignoring anxiety symptoms

178. A client with a history of eating disorders reports binge eating. What is an appropriate intervention?
    a) Encouraging restrictive eating
    b) Addressing binge eating patterns with CBT
    c) Focusing on unrelated career goals
    d) Ignoring eating behaviors

179. Which of the following is a symptom of dissociative identity disorder?
    a) Persistent low mood
    b) Presence of two or more distinct identities
    c) Excessive worry about daily events
    d) Recurrent panic attacks

180. When counseling a client with a developmental disorder, what should a counselor prioritize?
    a) Ignoring developmental history
    b) Tailoring interventions to developmental needs
    c) Focusing on unrelated financial issues
    d) Applying standard interventions

181. A client with PTSD reports flashbacks. What is an appropriate therapeutic approach?
   a) Solution-focused brief therapy
   b) Eye movement desensitization and reprocessing (EMDR)
   c) Play therapy
   d) Psychodynamic therapy

182. Which of the following is a symptom of obsessive-compulsive personality disorder?
   a) Excessive flexibility in routines
   b) Preoccupation with orderliness and perfectionism
   c) Recurrent intrusive memories
   d) Chronic feelings of hopelessness

183. A client with substance use disorder is in recovery. What is a key intervention?
   a) Encouraging moderate substance use
   b) Supporting relapse prevention strategies
   c) Focusing on unrelated academic goals
   d) Ignoring recovery efforts

184. What is a primary focus when counseling a client with depression?
   a) Addressing cognitive distortions and low mood
   b) Focusing on unrelated financial stressors
   c) Encouraging isolation to reduce stress
   d) Ignoring emotional symptoms

185. A client with a phobia reports intense fear of heights. What is an appropriate intervention?
   a) Encouraging avoidance of heights
   b) Using systematic desensitization
   c) Focusing on unrelated life goals
   d) Ignoring the phobia

186. Which of the following is a symptom of schizoaffective disorder?
   a) Persistent low mood for two years
   b) Psychotic symptoms with mood episodes
   c) Excessive worry about daily events
   d) Compulsive behaviors

187. When counseling a client with a history of trauma, what is a key consideration?
   a) Ignoring trauma history
   b) Using trauma-informed care principles

c) Focusing on unrelated academic issues

d) Encouraging avoidance of trauma discussions

188. A client with ADHD reports impulsivity. What is an appropriate intervention?

a) Encouraging impulsive behaviors

b) Teaching impulse control strategies

c) Focusing on unrelated financial stressors

d) Ignoring impulsivity

189. Which of the following is a symptom of generalized anxiety disorder?

a) Persistent feelings of hopelessness

b) Restlessness or feeling on edge

c) Recurrent intrusive memories

d) Elevated mood and impulsivity

190. A client with borderline personality disorder reports unstable relationships. What is an appropriate intervention?

a) Encouraging isolation to avoid conflict

b) Using dialectical behavior therapy (DBT)

c) Focusing on unrelated career goals

d) Ignoring relationship issues

191. What is a key goal when counseling a client with a substance use disorder?

a) Promoting continued substance use

b) Supporting recovery and relapse prevention

c) Focusing on unrelated academic issues

d) Ignoring substance use history

192. A client with depression reports sleep disturbances. What is an appropriate intervention?

a) Encouraging irregular sleep patterns

b) Addressing sleep hygiene and depressive symptoms

c) Focusing on unrelated financial stressors

d) Ignoring sleep issues

193. Which of the following is a symptom of panic disorder?

a) Persistent low mood

b) Fear of recurrent panic attacks

c) Excessive need for control

d) Chronic feelings of emptiness

194. When counseling a client with autism spectrum disorder, what is a key consideration?
   a) Ignoring sensory sensitivities
   b) Adapting interventions to sensory and communication needs
   c) Focusing on unrelated financial issues
   d) Applying standard interventions

195. A client with a history of trauma reports avoidance behaviors. What is an appropriate intervention?
   a) Encouraging continued avoidance
   b) Using trauma-focused cognitive-behavioral therapy
   c) Focusing on unrelated life goals
   d) Ignoring avoidance behaviors

196. Which of the following is a symptom of antisocial personality disorder?
   a) Excessive empathy for others
   b) Disregard for the rights of others
   c) Persistent low self-esteem
   d) Chronic feelings of hopelessness

197. A client with an eating disorder reports purging behaviors. What is an appropriate intervention?
   a) Encouraging restrictive eating
   b) Addressing purging with CBT or nutritional counseling
   c) Focusing on unrelated academic issues
   d) Ignoring purging behaviors

198. What is a primary focus when counseling a client with anxiety?
   a) Encouraging avoidance of stressors
   b) Teaching coping strategies for anxiety symptoms
   c) Focusing on unrelated financial stressors
   d) Ignoring anxiety symptoms

199. A client with bipolar disorder reports depressive episodes. What is an appropriate intervention?
   a) Encouraging high-energy activities
   b) Using mood stabilization and psychoeducation
   c) Focusing on unrelated career goals
   d) Ignoring depressive symptoms

200. Which of the following is a symptom of dependent personality disorder?
   a) Excessive independence and self-reliance
   b) Difficulty making decisions without reassurance
   c) Recurrent intrusive thoughts
   d) Chronic feelings of emptiness

201. A client with PTSD reports hyperarousal. What is an appropriate intervention?
   a) Encouraging avoidance of triggers
   b) Using grounding and relaxation techniques
   c) Focusing on unrelated financial stressors
   d) Ignoring hyperarousal symptoms

202. What is a key consideration when counseling a client with a developmental disability?
   a) Ignoring developmental history
   b) Adapting interventions to cognitive and developmental needs
   c) Focusing on unrelated academic issues
   d) Applying standard interventions

203. A client with obsessive-compulsive disorder reports compulsive checking. What is an appropriate intervention?
   a) Encouraging continued checking
   b) Using exposure and response prevention (ERP)
   c) Focusing on unrelated life goals
   d) Ignoring compulsive behaviors

204. Which of the following is a symptom of major depressive disorder?
   a) Elevated mood and high energy
   b) Loss of interest in pleasurable activities
   c) Recurrent intrusive thoughts
   d) Excessive risk-taking behavior

205. A client with substance use disorder reports cravings. What is an appropriate intervention?
   a) Encouraging continued substance use
   b) Teaching coping strategies for cravings
   c) Focusing on unrelated financial stressors
   d) Ignoring cravings

206. When counseling a client with social anxiety, what is a primary goal?
   a) Encouraging avoidance of social situations

b) Reducing fear and improving social confidence

c) Focusing on unrelated academic issues

d) Ignoring social anxiety symptoms

207. Which of the following is a symptom of schizoid personality disorder?

a) Excessive need for social interaction

b) Detachment from social relationships

c) Persistent low mood

d) Recurrent panic attacks

208. A client with a history of trauma reports emotional numbness. What is an appropriate intervention?

a) Encouraging avoidance of emotions

b) Using trauma-focused therapy to process emotions

c) Focusing on unrelated career goals

d) Ignoring emotional numbness

209. What is a key focus when counseling a client with ADHD?

a) Encouraging disorganized behaviors

b) Teaching strategies for focus and organization

c) Focusing on unrelated financial stressors

d) Ignoring ADHD symptoms

210. Which of the following is a symptom of generalized anxiety disorder?

a) Persistent low mood

b) Difficulty concentrating due to worry

c) Recurrent intrusive memories

d) Elevated mood and impulsivity

211. A client with borderline personality disorder reports self-harm. What is an appropriate intervention?

a) Encouraging continued self-harm

b) Using dialectical behavior therapy (DBT)

c) Focusing on unrelated academic issues

d) Ignoring self-harm behaviors

212. What is a primary goal when counseling a client with a substance use disorder?

a) Promoting continued substance use

b) Supporting recovery and harm reduction

c) Focusing on unrelated financial stressors

d) Ignoring substance use history

213. A client with depression reports suicidal ideation. What is an appropriate intervention?
    a) Encouraging isolation to reduce stress
    b) Conducting a suicide risk assessment and safety planning
    c) Focusing on unrelated career goals
    d) Ignoring suicidal thoughts

214. Which of the following is a symptom of panic disorder?
    a) Persistent low mood
    b) Physical symptoms during panic attacks
    c) Excessive need for control
    d) Chronic feelings of emptiness

215. When counseling a client with autism spectrum disorder, what should a counselor prioritize?
    a) Ignoring communication challenges
    b) Adapting interventions to sensory and social needs
    c) Focusing on unrelated financial issues
    d) Applying standard interventions

216. A client with a history of trauma reports nightmares. What is an appropriate intervention?
    a) Encouraging avoidance of sleep
    b) Using imagery rehearsal therapy
    c) Focusing on unrelated life goals
    d) Ignoring nightmares

217. Which of the following is a symptom of avoidant personality disorder?
    a) Excessive confidence in social settings
    b) Fear of rejection and social avoidance
    c) Recurrent intrusive thoughts
    d) Chronic feelings of hopelessness

218. A client with an eating disorder reports restrictive eating. What is an appropriate intervention?
    a) Encouraging continued restriction
    b) Addressing eating patterns with nutritional counseling
    c) Focusing on unrelated academic issues
    d) Ignoring eating behaviors

219. What is a primary focus when counseling a client with anxiety?
   a) Encouraging avoidance of stressors
   b) Teaching coping strategies for anxiety symptoms
   c) Focusing on unrelated financial stressors
   d) Ignoring anxiety symptoms

220. A client with bipolar disorder reports manic episodes. What is an appropriate intervention?
   a) Encouraging high-energy activities
   b) Using mood stabilization techniques
   c) Focusing on unrelated career goals
   d) Ignoring manic symptoms

221. Which of the following is a symptom of narcissistic personality disorder?
   a) Excessive empathy for others
   b) Need for excessive admiration
   c) Persistent low self-esteem
   d) Chronic feelings of emptiness

222. A client with PTSD reports avoidance of trauma reminders. What is an appropriate intervention?
   a) Encouraging continued avoidance
   b) Using trauma-focused cognitive-behavioral therapy
   c) Focusing on unrelated financial stressors
   d) Ignoring avoidance behaviors

223. What is a key consideration when counseling a client with a developmental disability?
   a) Ignoring developmental history
   b) Adapting interventions to cognitive and developmental needs
   c) Focusing on unrelated academic issues
   d) Applying standard interventions

224. A client with obsessive-compulsive disorder reports intrusive thoughts. What is an appropriate intervention?
   a) Encouraging avoidance of thoughts
   b) Using exposure and response prevention (ERP)
   c) Focusing on unrelated life goals
   d) Ignoring intrusive thoughts

225. Which of the following is a symptom of major depressive disorder?
   a) Elevated mood and high energy
   b) Fatigue or loss of energy
   c) Recurrent intrusive thoughts
   d) Excessive risk-taking behavior

226. A client with substance use disorder reports relapse. What is an appropriate intervention?
   a) Encouraging continued substance use
   b) Revising the relapse prevention plan
   c) Focusing on unrelated financial stressors
   d) Ignoring the relapse

227. When counseling a client with social anxiety, what is a primary goal?
   a) Encouraging avoidance of social situations
   b) Improving social confidence and skills
   c) Focusing on unrelated academic issues
   d) Ignoring social anxiety symptoms

228. Which of the following is a symptom of schizotypal personality disorder?
   a) Excessive need for social interaction
   b) Odd beliefs or magical thinking
   c) Persistent low mood
   d) Recurrent panic attacks

229. A client with a history of trauma reports hypervigilance. What is an appropriate intervention?
   a) Encouraging avoidance of triggers
   b) Using grounding and relaxation techniques
   c) Focusing on unrelated career goals
   d) Ignoring hypervigilance

230. What is a key focus when counseling a client with ADHD?
   a) Encouraging disorganized behaviors
   b) Teaching strategies for focus and organization
   c) Focusing on unrelated financial stressors
   d) Ignoring ADHD symptoms

231. Which of the following is a symptom of generalized anxiety disorder?
   a) Persistent low mood

b) Muscle tension due to worry

c) Recurrent intrusive memories

d) Elevated mood and impulsivity

232. A client with borderline personality disorder reports emotional dysregulation. What is an appropriate intervention?

a) Encouraging emotional suppression

b) Using dialectical behavior therapy (DBT)

c) Focusing on unrelated academic issues

d) Ignoring emotional dysregulation

233. What is a primary goal when counseling a client with a substance use disorder?

a) Promoting continued substance use

b) Supporting recovery and relapse prevention

c) Focusing on unrelated financial stressors

d) Ignoring substance use history

234. A client with depression reports low self-esteem. What is an appropriate intervention?

a) Encouraging isolation to reduce stress

b) Addressing cognitive distortions with CBT

c) Focusing on unrelated career goals

d) Ignoring self-esteem issues

235. Which of the following is a symptom of panic disorder?

a) Persistent low mood

b) Derealization during panic attacks

c) Excessive need for control

d) Chronic feelings of emptiness

236. When counseling a client with autism spectrum disorder, what should a counselor prioritize?

a) Ignoring sensory sensitivities

b) Adapting interventions to sensory and communication needs

c) Focusing on unrelated financial issues

d) Applying standard interventions

237. A client with a history of trauma reports flashbacks. What is an appropriate intervention?

a) Encouraging avoidance of memories

b) Using eye movement desensitization and reprocessing (EMDR)

c) Focusing on unrelated life goals

d) Ignoring flashbacks

238. Which of the following is a symptom of avoidant personality disorder?
   a) Excessive confidence in social settings
   b) Hypersensitivity to criticism
   c) Recurrent intrusive thoughts
   d) Chronic feelings of hopelessness

239. A client with an eating disorder reports body dissatisfaction. What is an appropriate intervention?
   a) Encouraging restrictive eating
   b) Addressing body image with CBT
   c) Focusing on unrelated academic issues
   d) Ignoring body dissatisfaction

240. What is a primary focus when counseling a client with anxiety?
   a) Encouraging avoidance of stressors
   b) Teaching coping strategies for anxiety symptoms
   c) Focusing on unrelated financial stressors
   d) Ignoring anxiety symptoms

241. A client with bipolar disorder reports hypomanic episodes. What is an appropriate intervention?
   a) Encouraging high-energy activities
   b) Using mood stabilization techniques
   c) Focusing on unrelated career goals
   d) Ignoring hypomanic symptoms

242. Which of the following is a symptom of narcissistic personality disorder?
   a) Excessive empathy for others
   b) Lack of empathy for others
   c) Persistent low self-esteem
   d) Chronic feelings of emptiness

243. A client with PTSD reports intrusive memories. What is an appropriate intervention?
   a) Encouraging avoidance of memories
   b) Using trauma-focused cognitive-behavioral therapy
   c) Focusing on unrelated financial stressors
   d) Ignoring intrusive memories

244. What is a key consideration when counseling a client with a developmental disability?
   a) Ignoring developmental history
   b) Adapting interventions to cognitive and developmental needs
   c) Focusing on unrelated academic issues
   d) Applying standard interventions

245. A client with obsessive-compulsive disorder reports compulsive rituals. What is an appropriate intervention?
   a) Encouraging continued rituals
   b) Using exposure and response prevention (ERP)
   c) Focusing on unrelated life goals
   d) Ignoring compulsive rituals

246. Which of the following is a symptom of major depressive disorder?
   a) Elevated mood and high energy
   b) Significant weight loss or gain
   c) Recurrent intrusive thoughts
   d) Excessive risk-taking behavior

247. A client with substance use disorder reports social isolation. What is an appropriate intervention?
   a) Encouraging continued isolation
   b) Addressing isolation with social skills training
   c) Focusing on unrelated financial stressors
   d) Ignoring social isolation

248. When counseling a client with social anxiety, what is a primary goal?
   a) Encouraging avoidance of social situations
   b) Improving social confidence and skills
   c) Focusing on unrelated academic issues
   d) Ignoring social anxiety symptoms

249. Which of the following is a symptom of schizoid personality disorder?
   a) Excessive need for social interaction
   b) Lack of desire for close relationships
   c) Persistent low mood
   d) Recurrent panic attacks

250. A client with a history of trauma reports emotional numbness. What is an appropriate intervention?
   a) Encouraging avoidance of emotions
   b) Using trauma-focused therapy to process emotions
   c) Focusing on unrelated career goals
   d) Ignoring emotional numbness

251. What is a key focus when counseling a client with ADHD?
   a) Encouraging disorganized behaviors
   b) Teaching strategies for focus and organization
   c) Focusing on unrelated financial stressors
   d) Ignoring ADHD symptoms

252. Which of the following is a symptom of generalized anxiety disorder?
   a) Persistent low mood
   b) Irritability due to excessive worry
   c) Recurrent intrusive memories
   d) Elevated mood and impulsivity

253. A client with borderline personality disorder reports impulsivity. What is an appropriate intervention?
   a) Encouraging impulsive behaviors
   b) Using dialectical behavior therapy (DBT)
   c) Focusing on unrelated academic issues
   d) Ignoring impulsivity

254. What is a primary goal when counseling a client with a substance use disorder?
   a) Promoting continued substance use
   b) Supporting recovery and relapse prevention
   c) Focusing on unrelated financial stressors
   d) Ignoring substance use history

255. A client with depression reports difficulty concentrating. What is an appropriate intervention?
   a) Encouraging isolation to reduce stress
   b) Addressing concentration with cognitive-behavioral therapy
   c) Focusing on unrelated career goals
   d) Ignoring concentration difficulties

256. Which of the following is a symptom of panic disorder?
    a) Persistent low mood
    b) Fear of losing control during panic attacks
    c) Excessive need for control
    d) Chronic feelings of emptiness

257. When counseling a client with autism spectrum disorder, what should a counselor prioritize?
    a) Ignoring sensory sensitivities
    b) Adapting interventions to sensory and communication needs
    c) Focusing on unrelated financial issues
    d) Applying standard interventions

258. A client with a history of trauma reports hyperarousal. What is an appropriate intervention?
    a) Encouraging avoidance of triggers
    b) Using grounding and relaxation techniques
    c) Focusing on unrelated life goals
    d) Ignoring hyperarousal symptoms

259. Which of the following is a symptom of avoidant personality disorder?
    a) Excessive confidence in social settings
    b) Social inhibition due to fear of rejection
    c) Recurrent intrusive thoughts
    d) Chronic feelings of hopelessness

260. A client with an eating disorder reports binge eating. What is an appropriate intervention?
    a) Encouraging restrictive eating
    b) Addressing binge eating with CBT
    c) Focusing on unrelated academic issues
    d) Ignoring binge eating behaviors

261. What is a primary focus when counseling a client with anxiety?
    a) Encouraging avoidance of stressors
    b) Teaching coping strategies for anxiety symptoms
    c) Focusing on unrelated financial stressors
    d) Ignoring anxiety symptoms

262. A client with bipolar disorder reports depressive episodes. What is an appropriate intervention?
   a) Encouraging high-energy activities
   b) Using mood stabilization and psychoeducation
   c) Focusing on unrelated career goals
   d) Ignoring depressive symptoms

263. Which of the following is a symptom of narcissistic personality disorder?
   a) Excessive empathy for others
   b) Exaggerated sense of self-importance
   c) Persistent low self-esteem
   d) Chronic feelings of emptiness

264. A client with PTSD reports nightmares. What is an appropriate intervention?
   a) Encouraging avoidance of sleep
   b) Using imagery rehearsal therapy
   c) Focusing on unrelated financial stressors
   d) Ignoring nightmares

265. What is a key consideration when counseling a client with a developmental disability?
   a) Ignoring developmental history
   b) Adapting interventions to cognitive and developmental needs
   c) Focusing on unrelated academic issues
   d) Applying standard interventions

266. A client with obsessive-compulsive disorder reports compulsive checking. What is an appropriate intervention?
   a) Encouraging continued checking
   b) Using exposure and response prevention (ERP)
   c) Focusing on unrelated life goals
   d) Ignoring compulsive behaviors

267. Which of the following is a symptom of major depressive disorder?
   a) Elevated mood and high energy
   b) Feelings of worthlessness or guilt
   c) Recurrent intrusive thoughts
   d) Excessive risk-taking behavior

268. A client with substance use disorder reports cravings. What is an appropriate intervention?
   a) Encouraging continued substance use
   b) Teaching coping strategies for cravings
   c) Focusing on unrelated financial stressors
   d) Ignoring cravings

269. When counseling a client with social anxiety, what is a primary goal?
   a) Encouraging avoidance of social situations
   b) Improving social confidence and skills
   c) Focusing on unrelated academic issues
   d) Ignoring social anxiety symptoms

270. Which of the following is a symptom of schizotypal personality disorder?
   a) Excessive need for social interaction
   b) Eccentric behavior and odd beliefs
   c) Persistent low mood
   d) Recurrent panic attacks

271. A client with a history of trauma reports emotional numbness. What is an appropriate intervention?
   a) Encouraging avoidance of emotions
   b) Using trauma-focused therapy to process emotions
   c) Focusing on unrelated career goals
   d) Ignoring emotional numbness

272. What is a key focus when counseling a client with ADHD?
   a) Encouraging disorganized behaviors
   b) Teaching strategies for focus and organization
   c) Focusing on unrelated financial stressors
   d) Ignoring ADHD symptoms

273. Which of the following is a symptom of generalized anxiety disorder?
   a) Persistent low mood
   b) Sleep disturbances due to worry
   c) Recurrent intrusive memories
   d) Elevated mood and impulsivity

274. A client with borderline personality disorder reports unstable relationships. What is an appropriate intervention?
　　a) Encouraging isolation to avoid conflict
　　b) Using dialectical behavior therapy (DBT)
　　c) Focusing on unrelated academic issues
　　d) Ignoring relationship issues

275. What is a primary goal when counseling a client with a substance use disorder?
　　a) Promoting continued substance use
　　b) Supporting recovery and relapse prevention
　　c) Focusing on unrelated financial stressors
　　d) Ignoring substance use history

276. A client with depression reports low motivation. What is an appropriate intervention?
　　a) Encouraging isolation to reduce stress
　　b) Using behavioral activation techniques
　　c) Focusing on unrelated career goals
　　d) Ignoring motivational challenges

277. Which of the following is a symptom of panic disorder?
　　a) Persistent low mood
　　b) Physical symptoms during panic attacks
　　c) Excessive need for control
　　d) Chronic feelings of emptiness

278. When counseling a client with autism spectrum disorder, what should a counselor prioritize?
　　a) Ignoring sensory sensitivities
　　b) Adapting interventions to sensory and communication needs
　　c) Focusing on unrelated financial issues
　　d) Applying standard interventions

279. A client with a history of trauma reports flashbacks. What is an appropriate intervention?
　　a) Encouraging avoidance of memories
　　b) Using eye movement desensitization and reprocessing (EMDR)
　　c) Focusing on unrelated life goals
　　d) Ignoring flashbacks

280. Which of the following is a symptom of avoidant personality disorder?
   a) Excessive confidence in social settings
   b) Reluctance to engage due to fear of criticism
   c) Recurrent intrusive thoughts
   d) Chronic feelings of hopelessness

281. A client with an eating disorder reports body dissatisfaction. What is an appropriate intervention?
   a) Encouraging restrictive eating
   b) Addressing body image with CBT
   c) Focusing on unrelated academic issues
   d) Ignoring body dissatisfaction

282. What is a primary focus when counseling a client with anxiety?
   a) Encouraging avoidance of stressors
   b) Teaching coping strategies for anxiety symptoms
   c) Focusing on unrelated financial stressors
   d) Ignoring anxiety symptoms

283. A client with bipolar disorder reports hypomanic episodes. What is an appropriate intervention?
   a) Encouraging high-energy activities
   b) Using mood stabilization techniques
   c) Focusing on unrelated career goals
   d) Ignoring hypomanic symptoms

284. Which of the following is a symptom of narcissistic personality disorder?
   a) Excessive empathy for others
   b) Arrogant or haughty behaviors
   c) Persistent low self-esteem
   d) Chronic feelings of emptiness

285. A client with PTSD reports intrusive memories. What is an appropriate intervention?
   a) Encouraging avoidance of memories
   b) Using trauma-focused cognitive-behavioral therapy
   c) Focusing on unrelated financial stressors
   d) Ignoring intrusive memories

286. What is a key consideration when counseling a client with a developmental disability?
   a) Ignoring developmental history

b) Adapting interventions to cognitive and developmental needs

c) Focusing on unrelated academic issues

d) Applying standard interventions

287. A client with obsessive-compulsive disorder reports compulsive rituals. What is an appropriate intervention?

a) Encouraging continued rituals

b) Using exposure and response prevention (ERP)

c) Focusing on unrelated life goals

d) Ignoring compulsive rituals

288. Which of the following is a symptom of major depressive disorder?

a) Elevated mood and high energy

b) Difficulty concentrating

c) Recurrent intrusive thoughts

d) Excessive risk-taking behavior

289. A client with substance use disorder reports social isolation. What is an appropriate intervention?

a) Encouraging continued isolation

b) Addressing isolation with social skills training

c) Focusing on unrelated financial stressors

d) Ignoring social isolation

290. When counseling a client with social anxiety, what is a primary goal?

a) Encouraging avoidance of social situations

b) Improving social confidence and skills

c) Focusing on unrelated academic issues

d) Ignoring social anxiety symptoms

291. Which of the following is a symptom of schizoid personality disorder?

a) Excessive need for social interaction

b) Emotional coldness and detachment

c) Persistent low mood

d) Recurrent panic attacks

292. A client with a history of trauma reports hypervigilance. What is an appropriate intervention?

a) Encouraging avoidance of triggers

b) Using grounding and relaxation techniques

c) Focusing on unrelated career goals

d) Ignoring hypervigilance

293. What is a key focus when counseling a client with ADHD?
a) Encouraging disorganized behaviors
b) Teaching strategies for focus and organization
c) Focusing on unrelated financial stressors
d) Ignoring ADHD symptoms

294. Which of the following is a symptom of generalized anxiety disorder?
a) Persistent low mood
b) Fatigue due to excessive worry
c) Recurrent intrusive memories
d) Elevated mood and impulsivity

295. A client with borderline personality disorder reports self-harm. What is an appropriate intervention?
a) Encouraging continued self-harm
b) Using dialectical behavior therapy (DBT)
c) Focusing on unrelated academic issues
d) Ignoring self-harm behaviors

296. What is a primary goal when counseling a client with a substance use disorder?
a) Promoting continued substance use
b) Supporting recovery and relapse prevention
c) Focusing on unrelated financial stressors
d) Ignoring substance use history

297. A client with depression reports suicidal ideation. What is an appropriate intervention?
a) Encouraging isolation to reduce stress
b) Conducting a suicide risk assessment and safety planning
c) Focusing on unrelated career goals
d) Ignoring suicidal thoughts

298. Which of the following is a symptom of panic disorder?
a) Persistent low mood
b) Chest pain during panic attacks
c) Excessive need for control
d) Chronic feelings of emptiness

299. When counseling a client with autism spectrum disorder, what should a counselor prioritize?
   a) Ignoring sensory sensitivities
   b) Adapting interventions to sensory and communication needs
   c) Focusing on unrelated financial issues
   d) Applying standard interventions

300. A client with a history of trauma reports nightmares. What is an appropriate intervention?
   a) Encouraging avoidance of sleep
   b) Using imagery rehearsal therapy
   c) Focusing on unrelated life goals
   d) Ignoring nightmares

301. Which of the following is a symptom of avoidant personality disorder?
   a) Excessive confidence in social settings
   b) Fear of disapproval and social avoidance
   c) Recurrent intrusive thoughts
   d) Chronic feelings of hopelessness

302. A client with an eating disorder reports restrictive eating. What is an appropriate intervention?
   a) Encouraging continued restriction
   b) Addressing eating patterns with nutritional counseling
   c) Focusing on unrelated academic issues
   d) Ignoring eating behaviors

303. What is a primary focus when counseling a client with anxiety?
   a) Encouraging avoidance of stressors
   b) Teaching coping strategies for anxiety symptoms
   c) Focusing on unrelated financial stressors
   d) Ignoring anxiety symptoms

304. A client with bipolar disorder reports manic episodes. What is an appropriate intervention?
   a) Encouraging high-energy activities
   b) Using mood stabilization techniques
   c) Focusing on unrelated career goals
   d) Ignoring manic symptoms

305. Which of the following is a symptom of narcissistic personality disorder?
    a) Excessive empathy for others
    b) Envy of others or belief others envy them
    c) Persistent low self-esteem
    d) Chronic feelings of emptiness

306. A client with PTSD reports avoidance of trauma reminders. What is an appropriate intervention?
    a) Encouraging continued avoidance
    b) Using trauma-focused cognitive-behavioral therapy
    c) Focusing on unrelated financial stressors
    d) Ignoring avoidance behaviors

307. What is a key consideration when counseling a client with a developmental disability?
    a) Ignoring developmental history
    b) Adapting interventions to cognitive and developmental needs
    c) Focusing on unrelated academic issues
    d) Applying standard interventions

308. A client with obsessive-compulsive disorder reports intrusive thoughts. What is an appropriate intervention?
    a) Encouraging avoidance of thoughts
    b) Using exposure and response prevention (ERP)
    c) Focusing on unrelated life goals
    d) Ignoring intrusive thoughts

309. Which of the following is a symptom of major depressive disorder?
    a) Elevated mood and high energy
    b) Recurrent thoughts of death
    c) Recurrent intrusive thoughts
    d) Excessive risk-taking behavior

310. A client with substance use disorder reports relapse. What is an appropriate intervention?
    a) Encouraging continued substance use
    b) Revising the relapse prevention plan
    c) Focusing on unrelated financial stressors
    d) Ignoring the relapse

311. When counseling a client with social anxiety, what is a primary goal?
   a) Encouraging avoidance of social situations
   b) Improving social confidence and skills
   c) Focusing on unrelated academic issues
   d) Ignoring social anxiety symptoms

312. Which of the following is a symptom of schizotypal personality disorder?
   a) Excessive need for social interaction
   b) Social anxiety with paranoid ideation
   c) Persistent low mood
   d) Recurrent panic attacks

313. A client with a history of trauma reports hypervigilance. What is an appropriate intervention?
   a) Encouraging avoidance of triggers
   b) Using grounding and relaxation techniques
   c) Focusing on unrelated career goals
   d) Ignoring hypervigilance

314. What is a key focus when counseling a client with ADHD?
   a) Encouraging disorganized behaviors
   b) Teaching strategies for focus and organization
   c) Focusing on unrelated financial stressors
   d) Ignoring ADHD symptoms

315. Which of the following is a symptom of generalized anxiety disorder?
   a) Persistent low mood
   b) Excessive worry about health or safety
   c) Recurrent intrusive memories
   d) Elevated mood and impulsivity

316. A client with borderline personality disorder reports emotional dysregulation. What is an appropriate intervention?
   a) Encouraging emotional suppression
   b) Using dialectical behavior therapy (DBT)
   c) Focusing on unrelated academic issues
   d) Ignoring emotional dysregulation

317. What is a primary goal when counseling a client with a substance use disorder?
   a) Promoting continued substance use

b) Supporting recovery and relapse prevention

c) Focusing on unrelated financial stressors

d) Ignoring substance use history

318. A client with depression reports low self-esteem. What is an appropriate intervention?
a) Encouraging isolation to reduce stress
b) Addressing cognitive distortions with CBT
c) Focusing on unrelated career goals
d) Ignoring self-esteem issues

319. What is the primary purpose of a treatment plan in counseling?
a) To assign a diagnosis without client input
b) To outline measurable goals and interventions
c) To document the client's financial status
d) To focus on the counselor's preferred approach

320. Which of the following is a key component of a treatment plan?
a) Client's academic history
b) Specific, measurable objectives
c) Counselor's personal goals
d) Client's social media activity

321. When developing a treatment plan for a client with depression, what should a counselor prioritize?
a) Setting unrealistic recovery goals
b) Addressing depressive symptoms and coping strategies
c) Focusing on unrelated financial issues
d) Ignoring client preferences

322. A client with generalized anxiety disorder prefers non-medication interventions. What is an appropriate treatment plan focus?
a) Prescribing anti-anxiety medication
b) Incorporating cognitive-behavioral therapy (CBT)
c) Focusing on unrelated academic goals
d) Avoiding any interventions

323. Which of the following ensures a treatment plan is client-centered?
a) Excluding the client from the planning process
b) Collaborating with the client to set goals
c) Using a standardized plan for all clients
d) Focusing on the counselor's expertise

324. What is an ethical consideration when creating a treatment plan?
a) Setting goals without client consent
b) Ensuring goals align with client values and needs

c) Prioritizing insurance reimbursement
d) Ignoring client cultural background

325. A client with PTSD requests trauma-focused therapy. What should the treatment plan include?
   a) Avoiding trauma-related interventions
   b) Evidence-based approaches like EMDR or CPT
   c) Focusing on unrelated career goals
   d) Ignoring the client's request

326. How often should a treatment plan be reviewed and updated?
   a) Never, once it is created
   b) Periodically, based on client progress
   c) Only at the start of counseling
   d) Only when requested by insurance

327. A client with substance use disorder has relapsed. What should the treatment plan address?
   a) Ignoring the relapse
   b) Revising relapse prevention strategies
   c) Focusing on unrelated financial issues
   d) Encouraging continued substance use

328. Which of the following is a measurable goal in a treatment plan for anxiety?
   a) Feel better in general
   b) Reduce panic attacks to once per month
   c) Improve overall life satisfaction
   d) Eliminate all stress

329. When planning treatment for a client with borderline personality disorder, what is an appropriate intervention?
   a) Avoiding emotional regulation strategies
   b) Incorporating dialectical behavior therapy (DBT)
   c) Focusing on unrelated academic goals
   d) Ignoring emotional instability

330. What is the role of cultural competence in treatment planning?
   a) Applying the same plan to all clients
   b) Integrating client's cultural values and beliefs
   c) Ignoring cultural differences
   d) Focusing on counselor's cultural framework

331. A client with OCD reports compulsive behaviors. What should the treatment plan include?
   a) Encouraging compulsive behaviors
   b) Exposure and response prevention (ERP)

c) Focusing on unrelated life goals
d) Ignoring compulsive behaviors

332. Which of the following is a key principle of evidence-based treatment planning?
a) Using interventions without research support
b) Selecting interventions based on empirical evidence
c) Focusing on counselor's intuition alone
d) Ignoring client preferences

333. A client with social anxiety wants to improve public speaking. What is an appropriate treatment plan goal?
a) Avoiding all public speaking situations
b) Delivering a presentation with reduced anxiety
c) Focusing on unrelated financial stressors
d) Ignoring public speaking fears

334. What should a treatment plan for a client with ADHD include?
a) Encouraging disorganized behaviors
b) Strategies for improving focus and organization
c) Focusing on unrelated career goals
d) Ignoring ADHD symptoms

335. A client with a history of trauma requests a safe therapeutic environment. What should the treatment plan prioritize?
a) Ignoring trauma history
b) Using trauma-informed care principles
c) Focusing on unrelated academic issues
d) Avoiding client collaboration

336. Which of the following is a SMART goal in a treatment plan?
a) Be happier in life
b) Reduce depressive symptoms by 50% in 8 weeks
c) Improve overall well-being
d) Eliminate all problems

337. When developing a treatment plan for a client with an eating disorder, what should be included?
a) Encouraging restrictive eating
b) Nutritional counseling and CBT
c) Focusing on unrelated financial issues
d) Ignoring eating behaviors

338. A client with bipolar disorder reports manic episodes. What should the treatment plan address?
a) Encouraging high-energy activities
b) Mood stabilization and psychoeducation

c) Focusing on unrelated career goals

d) Ignoring manic symptoms

339. What is the purpose of involving family in a treatment plan?
a) To replace the client's input
b) To provide support and improve outcomes
c) To focus on family financial issues
d) To exclude the client from planning

340. A client with depression reports low motivation. What should the treatment plan include?
a) Encouraging isolation
b) Behavioral activation techniques
c) Focusing on unrelated academic goals
d) Ignoring motivational challenges

341. Which of the following is an ethical requirement in treatment planning?
a) Using interventions without client consent
b) Documenting goals and interventions clearly
c) Prioritizing counselor convenience
d) Ignoring client progress

342. A client with substance use disorder is in recovery. What should the treatment plan focus on?
a) Encouraging moderate substance use
b) Relapse prevention and coping strategies
c) Focusing on unrelated financial stressors
d) Ignoring recovery efforts

343. When planning treatment for a client with autism spectrum disorder, what should be considered?
a) Ignoring sensory sensitivities
b) Tailoring interventions to sensory and communication needs
c) Focusing on unrelated academic issues
d) Applying standard interventions

344. A client with panic disorder reports frequent panic attacks. What should the treatment plan include?
a) Encouraging avoidance of triggers
b) CBT and relaxation techniques
c) Focusing on unrelated life goals
d) Ignoring panic attacks

345. What is the role of client feedback in treatment planning?
a) To ignore client preferences
b) To ensure the plan aligns with client needs

c) To focus on counselor's goals
d) To exclude client input

346. A client with a history of self-harm requests coping strategies. What should the treatment plan include?
   a) Encouraging continued self-harm
   b) DBT and distress tolerance skills
   c) Focusing on unrelated career goals
   d) Ignoring self-harm behaviors

347. Which of the following is a key component of a treatment plan for PTSD?
   a) Avoiding trauma-related interventions
   b) Trauma-focused therapies like EMDR
   c) Focusing on unrelated financial issues
   d) Ignoring trauma symptoms

348. A client with an eating disorder reports body dissatisfaction. What should the treatment plan address?
   a) Encouraging restrictive eating
   b) Body image and nutritional counseling
   c) Focusing on unrelated academic issues
   d) Ignoring body dissatisfaction

349. What is the purpose of setting short-term goals in a treatment plan?
   a) To overwhelm the client with expectations
   b) To provide achievable steps toward recovery
   c) To focus on unrelated life goals
   d) To replace long-term goals

350. A client with social anxiety reports fear of social interactions. What should the treatment plan include?
   a) Encouraging social avoidance
   b) Gradual exposure and social skills training
   c) Focusing on unrelated financial stressors
   d) Ignoring social anxiety

351. Which of the following is a key ethical principle in treatment planning?
   a) Ignoring client cultural background
   b) Ensuring client autonomy and collaboration
   c) Using interventions without evidence
   d) Prioritizing insurance requirements

352. A client with bipolar disorder reports depressive episodes. What should the treatment plan include?
   a) Encouraging high-energy activities
   b) Mood stabilization and CBT

c) Focusing on unrelated career goals
d) Ignoring depressive symptoms

353. When planning treatment for a client with a developmental disability, what should be prioritized?
a) Ignoring developmental history
b) Adapting interventions to cognitive needs
c) Focusing on unrelated academic issues
d) Applying standard interventions

354. A client with OCD reports intrusive thoughts. What should the treatment plan include?
a) Encouraging avoidance of thoughts
b) Exposure and response prevention (ERP)
c) Focusing on unrelated life goals
d) Ignoring intrusive thoughts

355. What is the role of measurable outcomes in a treatment plan?
a) To make the plan vague and general
b) To track progress and evaluate effectiveness
c) To focus on counselor's preferences
d) To exclude client input

356. A client with substance use disorder reports cravings. What should the treatment plan address?
a) Encouraging continued substance use
b) Coping strategies for managing cravings
c) Focusing on unrelated financial stressors
d) Ignoring cravings

357. A client with depression reports suicidal ideation. What should the treatment plan include?
a) Encouraging isolation
b) Suicide risk assessment and safety planning
c) Focusing on unrelated career goals
d) Ignoring suicidal thoughts

358. Which of the following is a key component of a treatment plan for anxiety?
a) Avoiding anxiety triggers
b) CBT and relaxation techniques
c) Focusing on unrelated academic issues
d) Ignoring anxiety symptoms

359. A client with PTSD reports hypervigilance. What should the treatment plan include?
a) Encouraging avoidance of triggers
b) Grounding and trauma-focused interventions
c) Focusing on unrelated life goals

d) Ignoring hypervigilance

360. What is the purpose of involving a multidisciplinary team in a treatment plan?
   a) To exclude the client from planning
   b) To provide comprehensive care and expertise
   c) To focus on financial issues
   d) To replace the counselor's role

361. A client with an eating disorder reports binge eating. What should the treatment plan include?
   a) Encouraging restrictive eating
   b) CBT and nutritional counseling
   c) Focusing on unrelated academic issues
   d) Ignoring binge eating behaviors

362. When planning treatment for a client with ADHD, what should be included?
   a) Encouraging disorganized behaviors
   b) Strategies for improving focus and organization
   c) Focusing on unrelated financial stressors
   d) Ignoring ADHD symptoms

363. A client with borderline personality disorder reports impulsivity. What should the treatment plan include?
   a) Encouraging impulsive behaviors
   b) DBT and impulse control strategies
   c) Focusing on unrelated career goals
   d) Ignoring impulsivity

364. Which of the following is a key consideration in treatment planning for a client with a substance use disorder?
   a) Ignoring substance use history
   b) Addressing co-occurring mental health conditions
   c) Focusing on unrelated academic issues
   d) Encouraging continued substance use

365. A client with social anxiety reports fear of public speaking. What should the treatment plan include?
   a) Encouraging avoidance of public speaking
   b) Gradual exposure and social skills training
   c) Focusing on unrelated financial stressors
   d) Ignoring public speaking fears

366. What is the role of client strengths in a treatment plan?
   a) To ignore client capabilities
   b) To leverage strengths for goal achievement
   c) To focus on weaknesses only

d) To exclude client input

367. A client with depression reports low self-esteem. What should the treatment plan include?
   a) Encouraging isolation
   b) CBT to address cognitive distortions
   c) Focusing on unrelated academic goals
   d) Ignoring self-esteem issues

368. Which of the following is a key component of a treatment plan for a client with autism spectrum disorder?
   a) Ignoring sensory sensitivities
   b) Tailoring interventions to sensory and communication needs
   c) Focusing on unrelated financial issues
   d) Applying standard interventions

369. A client with PTSD reports nightmares. What should the treatment plan include?
   a) Encouraging avoidance of sleep
   b) Imagery rehearsal therapy
   c) Focusing on unrelated life goals
   d) Ignoring nightmares

370. What is the purpose of documenting a treatment plan?
   a) To focus on counselor's preferences
   b) To provide a clear roadmap for therapy
   c) To exclude client input
   d) To prioritize insurance requirements

371. A client with substance use disorder is in recovery. What should the treatment plan focus on?
   a) Encouraging moderate substance use
   b) Relapse prevention and coping strategies
   c) Focusing on unrelated financial stressors
   d) Ignoring recovery efforts

372. When planning treatment for a client with OCD, what should be prioritized?
   a) Encouraging compulsive behaviors
   b) Evidence-based interventions like ERP
   c) Focusing on unrelated academic issues
   d) Ignoring OCD symptoms

373. What is the primary purpose of active listening in counseling?
   a) To provide immediate solutions
   b) To understand the client's perspective and emotions
   c) To direct the client's decisions
   d) To focus on the counselor's agenda

374. A client expresses frustration during a session. What is an appropriate counselor response?
    a) Ignore the frustration
    b) Reflect the client's feelings to validate them
    c) Change the topic to avoid conflict
    d) Advise the client to suppress emotions

375. Which technique is most effective for building rapport with a new client?
    a) Using directive questioning
    b) Displaying empathy and warmth
    c) Focusing on diagnostic criteria
    d) Maintaining a neutral demeanor

376. When using open-ended questions, what is the counselor's goal?
    a) To limit client responses
    b) To encourage detailed exploration of thoughts
    c) To confirm diagnostic assumptions
    d) To control the session's direction

377. A client with anxiety reports racing thoughts. What intervention should the counselor use?
    a) Encourage avoidance of triggers
    b) Teach grounding techniques
    c) Focus on unrelated financial issues
    d) Ignore the client's concerns

378. What is a key component of motivational interviewing?
    a) Confronting client resistance
    b) Eliciting client motivation for change
    c) Directing client decisions
    d) Focusing on past failures

379. A client with depression feels hopeless. What is an appropriate counseling skill?
    a) Minimizing the client's feelings
    b) Using reflective listening to validate emotions
    c) Advising quick solutions
    d) Ignoring emotional expressions

380. Which of the following demonstrates empathy in a counseling session?
    a) Offering unsolicited advice
    b) Acknowledging the client's emotional experience
    c) Focusing on diagnostic labels
    d) Redirecting to unrelated topics

381. When a client discloses suicidal thoughts, what is the first intervention?
   a) Ignore the disclosure unless repeated
   b) Conduct a suicide risk assessment
   c) Focus on unrelated life goals
   d) Encourage positive thinking

382. What is the purpose of using silence in a counseling session?
   a) To disengage from the client
   b) To allow the client to process thoughts
   c) To speed up the session
   d) To assert counselor authority

383. A client with PTSD reports flashbacks. What is an appropriate intervention?
   a) Encourage avoidance of memories
   b) Use trauma-focused CBT
   c) Focus on unrelated career goals
   d) Ignore the flashbacks

384. Which skill is essential for establishing a therapeutic alliance?
   a) Maintaining a rigid session structure
   b) Demonstrating genuineness and trust
   c) Focusing on counselor expertise
   d) Avoiding client input

385. A client with substance use disorder is resistant to change. What technique should the counselor use?
   a) Confront the client aggressively
   b) Apply motivational interviewing
   c) Focus on unrelated academic issues
   d) Ignore the resistance

386. What is the goal of using paraphrasing in a counseling session?
   a) To challenge the client's perspective
   b) To confirm understanding of client's statements
   c) To redirect the conversation
   d) To minimize client emotions

387. A client with social anxiety fears public speaking. What is an appropriate intervention?
   a) Encourage avoidance of social situations
   b) Use gradual exposure techniques
   c) Focus on unrelated financial stressors
   d) Ignore the fear

388. Which of the following is a key principle of crisis intervention?
   a) Focusing on long-term goals
   b) Ensuring immediate safety and stabilization

c) Exploring unrelated past events
d) Avoiding client input

389. A client with OCD reports compulsive checking. What intervention should the counselor use?
a) Encourage continued checking
b) Implement exposure and response prevention (ERP)
c) Focus on unrelated life goals
d) Ignore compulsive behaviors

390. What is the role of cultural competence in counseling interventions?
a) Applying the same interventions to all clients
b) Adapting interventions to client's cultural context
c) Ignoring cultural differences
d) Focusing on counselor's cultural framework

391. A client with borderline personality disorder reports emotional dysregulation. What is an appropriate intervention?
a) Encourage emotional suppression
b) Use dialectical behavior therapy (DBT)
c) Focus on unrelated academic issues
d) Ignore emotional dysregulation

392. When a client becomes tearful, what is an appropriate counselor response?
a) Change the topic to avoid discomfort
b) Acknowledge and validate the client's emotions
c) Advise the client to stop crying
d) Ignore the emotional display

393. Which technique is most effective for managing a client's anger in session?
a) Ignoring the anger
b) Teaching de-escalation strategies
c) Focusing on unrelated topics
d) Encouraging emotional suppression

394. A client with ADHD struggles with impulsivity. What intervention should the counselor use?
a) Encourage impulsive behaviors
b) Teach impulse control strategies
c) Focus on unrelated financial issues
d) Ignore impulsivity

395. What is the purpose of using summarizing in a counseling session?
a) To interrupt the client's narrative
b) To clarify and consolidate key points
c) To shift focus to counselor goals

d) To avoid client emotions

396. A client with a history of trauma reports hypervigilance. What is an appropriate intervention?
    a) Encourage avoidance of triggers
    b) Use grounding and relaxation techniques
    c) Focus on unrelated career goals
    d) Ignore hypervigilance

397. Which of the following is a key component of cognitive-behavioral therapy (CBT)?
    a) Exploring unconscious conflicts
    b) Addressing cognitive distortions
    c) Focusing on past traumas
    d) Avoiding structured interventions

398. A client with depression reports low self-esteem. What is an appropriate counseling skill?
    a) Minimizing the client's feelings
    b) Using CBT to challenge negative thoughts
    c) Advising quick solutions
    d) Ignoring self-esteem issues

399. When a client expresses ambivalence about change, what technique should the counselor use?
    a) Confront the client's indecision
    b) Use motivational interviewing
    c) Focus on unrelated life goals
    d) Ignore the ambivalence

400. A client with an eating disorder reports binge eating. What is an appropriate intervention?
    a) Encourage restrictive eating
    b) Use CBT and nutritional counseling
    c) Focus on unrelated academic issues
    d) Ignore binge eating behaviors

401. What is the role of nonverbal communication in counseling?
    a) To distract from the client's narrative
    b) To convey empathy and attentiveness
    c) To assert counselor authority
    d) To minimize client emotions

402. A client with panic disorder reports fear of panic attacks. What is an appropriate intervention?
    a) Encourage avoidance of triggers
    b) Use CBT and relaxation techniques

c) Focus on unrelated financial stressors

d) Ignore panic attacks

403. Which of the following is a key ethical principle in counseling interventions?

a) Ignoring client autonomy

b) Respecting client confidentiality

c) Prioritizing counselor convenience

d) Using untested interventions

404. A client with autism spectrum disorder struggles with social communication. What intervention should the counselor use?

a) Ignore communication challenges

b) Use social skills training

c) Focus on unrelated academic issues

d) Apply standard interventions

405. When a client discloses a history of self-harm, what is an appropriate counselor response?

a) Ignore the disclosure

b) Explore underlying emotions and coping strategies

c) Focus on unrelated career goals

d) Advise the client to stop immediately

406. What is the purpose of using reflective listening in counseling?

a) To direct the client's decisions

b) To validate the client's feelings and thoughts

c) To shift focus to counselor goals

d) To avoid emotional content

407. A client with substance use disorder reports cravings. What is an appropriate intervention?

a) Encourage continued substance use

b) Teach coping strategies for cravings

c) Focus on unrelated financial issues

d) Ignore cravings

408. Which technique is most effective for addressing a client's low motivation?

a) Ignoring motivational challenges

b) Using behavioral activation techniques

c) Focusing on unrelated academic goals

d) Advising quick solutions

409. A client with PTSD reports nightmares. What is an appropriate intervention?

a) Encourage avoidance of sleep

b) Use imagery rehearsal therapy

c) Focus on unrelated life goals

d) Ignore nightmares

410. What is the role of immediacy in a counseling session?
   a) To avoid addressing session dynamics
   b) To address the here-and-now relationship
   c) To focus on past events
   d) To assert counselor authority

411. A client with social anxiety reports fear of judgment. What is an appropriate intervention?
   a) Encourage social avoidance
   b) Use gradual exposure and CBT
   c) Focus on unrelated financial stressors
   d) Ignore fear of judgment

412. Which of the following is a key component of solution-focused brief therapy?
   a) Exploring past traumas
   b) Focusing on client strengths and solutions
   c) Addressing unconscious conflicts
   d) Avoiding goal setting

413. A client with depression reports isolation. What is an appropriate counseling skill?
   a) Encourage continued isolation
   b) Use behavioral activation to increase engagement
   c) Focus on unrelated career goals
   d) Ignore isolation

414. When a client becomes defensive, what is an appropriate counselor response?
   a) Confront the defensiveness aggressively
   b) Acknowledge feelings and explore resistance
   c) Change the topic to avoid conflict
   d) Ignore the defensiveness

415. A client with OCD reports intrusive thoughts. What is an appropriate intervention?
   a) Encourage avoidance of thoughts
   b) Use exposure and response prevention (ERP)
   c) Focus on unrelated life goals
   d) Ignore intrusive thoughts

416. What is the purpose of using scaling questions in counseling?
   a) To limit client responses
   b) To assess client progress and motivation
   c) To assert counselor control
   d) To avoid emotional content

417. A client with borderline personality disorder reports self-harm. What is an appropriate intervention?
   a) Encourage continued self-harm
   b) Use DBT and distress tolerance skills
   c) Focus on unrelated academic issues
   d) Ignore self-harm behaviors

418. Which of the following is a key component of trauma-informed care?
   a) Ignoring trauma history
   b) Prioritizing safety and empowerment
   c) Focusing on unrelated financial issues
   d) Using confrontational techniques

419. A client with ADHD reports difficulty focusing. What is an appropriate intervention?
   a) Encourage disorganized behaviors
   b) Teach focus-enhancing strategies
   c) Focus on unrelated financial stressors
   d) Ignore focus difficulties

420. When a client expresses guilt, what is an appropriate counselor response?
   a) Minimize the client's feelings
   b) Explore the source of guilt empathetically
   c) Advise the client to ignore guilt
   d) Change the topic

421. A client with substance use disorder is in denial. What is an appropriate intervention?
   a) Confront the client aggressively
   b) Use motivational interviewing
   c) Focus on unrelated academic issues
   d) Ignore the denial

422. Which technique is most effective for addressing a client's ambivalence about treatment?
   a) Directing client decisions
   b) Exploring pros and cons of change
   c) Focusing on unrelated life goals
   d) Ignoring ambivalence

423. A client with an eating disorder reports body dissatisfaction. What is an appropriate intervention?
   a) Encourage restrictive eating
   b) Use CBT to address body image
   c) Focus on unrelated academic issues
   d) Ignore body dissatisfaction

424. What is the role of validation in counseling?
   a) To challenge client emotions
   b) To affirm client feelings and experiences
   c) To redirect to counselor goals
   d) To minimize emotional content

425. A client with panic disorder reports derealization. What is an appropriate intervention?
   a) Encourage avoidance of triggers
   b) Use grounding techniques
   c) Focus on unrelated financial stressors
   d) Ignore derealization

426. Which of the following is a key component of narrative therapy?
   a) Focusing on diagnostic labels
   b) Helping clients reframe their stories
   c) Avoiding client input
   d) Using confrontational techniques

427. A client with depression reports low energy. What is an appropriate intervention?
   a) Encourage isolation
   b) Use behavioral activation techniques
   c) Focus on unrelated career goals
   d) Ignore low energy

428. When a client discloses trauma, what is an appropriate counselor response?
   a) Ignore the disclosure
   b) Acknowledge and explore with sensitivity
   c) Focus on unrelated life goals
   d) Advise quick solutions

429. A client with social anxiety reports fear of social events. What is an appropriate intervention?
   a) Encourage avoidance of events
   b) Use gradual exposure and social skills training
   c) Focus on unrelated financial stressors
   d) Ignore social anxiety

430. What is the purpose of using confrontation in counseling?
   a) To challenge client emotions aggressively
   b) To address discrepancies respectfully
   c) To avoid client input
   d) To assert counselor authority

431. A client with PTSD reports avoidance behaviors. What is an appropriate intervention?
   a) Encourage continued avoidance
   b) Use trauma-focused CBT

c) Focus on unrelated career goals

d) Ignore avoidance behaviors

432. Which of the following is a key ethical consideration in counseling interventions?

a) Ignoring client cultural background

b) Obtaining informed consent for interventions

c) Prioritizing counselor preferences

d) Using untested interventions

433. A client with ADHD reports disorganization. What is an appropriate intervention?

a) Encourage disorganized behaviors

b) Teach organizational strategies

c) Focus on unrelated financial issues

d) Ignore disorganization

434. When a client expresses hopelessness, what is an appropriate counselor response?

a) Minimize the client's feelings

b) Validate and explore hopelessness empathetically

c) Advise quick solutions

d) Change the topic

435. A client with substance use disorder reports relapse. What is an appropriate intervention?

a) Encourage continued substance use

b) Revise relapse prevention strategies

c) Focus on unrelated financial stressors

d) Ignore the relapse

436. Which technique is most effective for addressing a client's low self-esteem?

a) Ignoring self-esteem issues

b) Using CBT to challenge negative beliefs

c) Focusing on unrelated academic goals

d) Advising quick solutions

437. A client with OCD reports compulsive rituals. What is an appropriate intervention?

a) Encourage continued rituals

b) Use exposure and response prevention (ERP)

c) Focus on unrelated life goals

d) Ignore compulsive rituals

438. What is the role of empathy in building a therapeutic alliance?

a) To assert counselor authority

b) To foster trust and understanding

c) To redirect to counselor goals

d) To minimize client emotions

439. A client with borderline personality disorder reports unstable relationships. What is an appropriate intervention?
   a) Encourage isolation
   b) Use DBT to address relationship patterns
   c) Focus on unrelated academic issues
   d) Ignore relationship issues

440. When a client becomes anxious in session, what is an appropriate counselor response?
   a) Ignore the anxiety
   b) Teach relaxation techniques
   c) Change the topic to avoid discomfort
   d) Advise the client to suppress anxiety

441. A client with an eating disorder reports purging. What is an appropriate intervention?
   a) Encourage restrictive eating
   b) Use CBT and nutritional counseling
   c) Focus on unrelated career goals
   d) Ignore purging behaviors

442. Which of the following is a key component of client-centered therapy?
   a) Directing client decisions
   b) Providing unconditional positive regard
   c) Focusing on diagnostic labels
   d) Using confrontational techniques

443. A client with depression reports suicidal ideation. What is an appropriate intervention?
   a) Ignore suicidal thoughts
   b) Conduct a suicide risk assessment
   c) Focus on unrelated life goals
   d) Encourage positive thinking

444. What is the purpose of using open-ended questions in counseling?
   a) To limit client responses
   b) To encourage exploration of thoughts and feelings
   c) To assert counselor control
   d) To avoid emotional content

445. A client with PTSD reports hyperarousal. What is an appropriate intervention?
   a) Encourage avoidance of triggers
   b) Use grounding and relaxation techniques
   c) Focus on unrelated financial stressors
   d) Ignore hyperarousal

446. Which technique is most effective for addressing a client's resistance to therapy?
   a) Confronting the client aggressively
   b) Exploring resistance empathetically

c) Focusing on unrelated life goals
d) Ignoring resistance

447. A client with social anxiety reports fear of rejection. What is an appropriate intervention?
a) Encourage social avoidance
b) Use gradual exposure and CBT
c) Focus on unrelated academic issues
d) Ignore fear of rejection

448. What is the role of self-disclosure in counseling?
a) To dominate the session
b) To build rapport when used judiciously
c) To focus on counselor experiences
d) To avoid client emotions

449. A client with substance use disorder reports social isolation. What is an appropriate intervention?
a) Encourage continued isolation
b) Use social skills training
c) Focus on unrelated financial stressors
d) Ignore social isolation

450. Which of the following is a key component of mindfulness-based interventions?
a) Focusing on past traumas
b) Promoting present-moment awareness
c) Avoiding client input
d) Using confrontational techniques

451. A client with depression reports low motivation. What is an appropriate intervention?
a) Encourage isolation
b) Use behavioral activation techniques
c) Focus on unrelated career goals
d) Ignore low motivation

452. When a client expresses anger toward the counselor, what is an appropriate response?
a) Ignore the anger
b) Acknowledge and explore the anger respectfully
c) Change the topic to avoid conflict
d) Advise the client to suppress anger

453. A client with OCD reports distress from intrusive thoughts. What is an appropriate intervention?
a) Encourage avoidance of thoughts
b) Use exposure and response prevention (ERP)
c) Focus on unrelated life goals

d) Ignore intrusive thoughts

454. What is the purpose of using reframing in counseling?
  a) To challenge client emotions aggressively
  b) To help clients view situations differently
  c) To assert counselor authority
  d) To minimize client concerns

455. A client with borderline personality disorder reports impulsivity. What is an appropriate intervention?
  a) Encourage impulsive behaviors
  b) Use DBT and impulse control strategies
  c) Focus on unrelated academic issues
  d) Ignore impulsivity

456. Which of the following is a key component of ethical counseling practice?
  a) Ignoring client confidentiality
  b) Maintaining professional boundaries
  c) Prioritizing counselor convenience
  d) Using untested interventions

457. A client with an eating disorder reports restrictive eating. What is an appropriate intervention?
  a) Encourage continued restriction
  b) Use CBT and nutritional counseling
  c) Focus on unrelated financial stressors
  d) Ignore restrictive eating

458. When a client discloses trauma, what is an appropriate counselor response?
  a) Ignore the disclosure
  b) Acknowledge and explore with trauma-informed care
  c) Focus on unrelated life goals
  d) Advise quick solutions

459. A client with ADHD reports difficulty with time management. What is an appropriate intervention?
  a) Encourage disorganized behaviors
  b) Teach time management strategies
  c) Focus on unrelated financial issues
  d) Ignore time management difficulties

460. What is the role of active listening in crisis intervention?
  a) To assert counselor authority
  b) To understand and validate client distress
  c) To redirect to counselor goals
  d) To minimize client emotions

461. A client with social anxiety reports fear of social interactions. What is an appropriate intervention?
a) Encourage social avoidance
b) Use gradual exposure and social skills training
c) Focus on unrelated academic issues
d) Ignore social anxiety

462. Which technique is most effective for addressing a client's guilt?
a) Minimizing the client's feelings
b) Exploring guilt empathetically
c) Advising quick solutions
d) Ignoring guilt

463. A client with PTSD reports intrusive memories. What is an appropriate intervention?
a) Encourage avoidance of memories
b) Use trauma-focused CBT
c) Focus on unrelated career goals
d) Ignore intrusive memories

464. What is the purpose of using positive reinforcement in counseling?
a) To challenge client behaviors aggressively
b) To encourage desired behaviors
c) To assert counselor authority
d) To minimize client progress

465. A client with substance use disorder reports relapse. What is an appropriate intervention?
a) Encourage continued substance use
b) Revise relapse prevention strategies
c) Focus on unrelated financial stressors
d) Ignore the relapse

466. Which of the following is a key component of person-centered therapy?
a) Directing client decisions
b) Providing empathy and unconditional positive regard
c) Focusing on diagnostic labels
d) Using confrontational techniques

467. A client with depression reports feelings of worthlessness. What is an appropriate intervention?
a) Minimize the client's feelings
b) Use CBT to challenge negative thoughts
c) Focus on unrelated life goals
d) Ignore feelings of worthlessness

468. When a client becomes tearful in session, what is an appropriate counselor response?
a) Change the topic to avoid discomfort
b) Acknowledge and validate the client's emotions
c) Advise the client to stop crying
d) Ignore the emotional display

469. A client with OCD reports compulsive checking. What is an appropriate intervention?
a) Encourage continued checking
b) Use exposure and response prevention (ERP)
c) Focus on unrelated life goals
d) Ignore compulsive behaviors

470. What is the role of cultural sensitivity in counseling interventions?
a) Applying the same interventions to all clients
b) Adapting interventions to client's cultural context
c) Ignoring cultural differences
d) Focusing on counselor's cultural framework

471. A client with borderline personality disorder reports emotional instability. What is an appropriate intervention?
a) Encourage emotional suppression
b) Use DBT to address emotional regulation
c) Focus on unrelated academic issues
d) Ignore emotional instability

472. Which technique is most effective for addressing a client's low motivation in therapy?
a) Ignoring motivational challenges
b) Using motivational interviewing
c) Focusing on unrelated career goals
d) Advising quick solutions

473. A client with an eating disorder reports body dissatisfaction. What is an appropriate intervention?
a) Encourage restrictive eating
b) Use CBT to address body image
c) Focus on unrelated financial stressors
d) Ignore body dissatisfaction

474. When a client expresses fear of failure, what is an appropriate counselor response?
a) Minimize the client's fear
b) Explore fear empathetically and reframe thoughts
c) Advise quick solutions
d) Change the topic

475. A client with PTSD reports avoidance of trauma reminders. What is an appropriate intervention?
    a) Encourage continued avoidance
    b) Use trauma-focused CBT
    c) Focus on unrelated financial stressors
    d) Ignore avoidance behaviors

476. Which of the following is a key component of ethical crisis intervention?
    a) Ignoring client safety
    b) Prioritizing immediate stabilization
    c) Focusing on unrelated life goals
    d) Using untested interventions

477. A client with ADHD reports impulsivity. What is an appropriate intervention?
    a) Encourage impulsive behaviors
    b) Teach impulse control strategies
    c) Focus on unrelated academic issues
    d) Ignore impulsivity

478. What is the purpose of using mirroring in counseling?
    a) To challenge client emotions
    b) To reflect client feelings and build rapport
    c) To assert counselor authority
    d) To minimize client concerns

479. A client with substance use disorder reports cravings. What is an appropriate intervention?
    a) Encourage continued substance use
    b) Teach coping strategies for cravings
    c) Focus on unrelated financial issues
    d) Ignore cravings

480. Which technique is most effective for addressing a client's hopelessness?
    a) Minimizing the client's feelings
    b) Using CBT to challenge negative thoughts
    c) Advising quick solutions
    d) Ignoring hopelessness

481. A client with social anxiety reports fear of public speaking. What is an appropriate intervention?
    a) Encourage avoidance of public speaking
    b) Use gradual exposure and CBT
    c) Focus on unrelated financial stressors
    d) Ignore public speaking fears

482. What is the role of active listening in building trust?
   a) To assert counselor authority
   b) To demonstrate understanding and empathy
   c) To redirect to counselor goals
   d) To minimize client emotions

483. A client with depression reports low energy. What is an appropriate intervention?
   a) Encourage isolation
   b) Use behavioral activation techniques
   c) Focus on unrelated career goals
   d) Ignore low energy

484. When a client discloses a history of trauma, what is an appropriate counselor response?
   a) Ignore the disclosure
   b) Acknowledge and explore with trauma-informed care
   c) Focus on unrelated life goals
   d) Advise quick solutions

485. A client with OCD reports distress from compulsive rituals. What is an appropriate intervention?
   a) Encourage continued rituals
   b) Use exposure and response prevention (ERP)
   c) Focus on unrelated life goals
   d) Ignore compulsive rituals

486. Which of the following is a key component of motivational interviewing?
   a) Confronting client resistance
   b) Eliciting client motivation for change
   c) Directing client decisions
   d) Focusing on past failures

487. A client with borderline personality disorder reports self-harm. What is an appropriate intervention?
   a) Encourage continued self-harm
   b) Use DBT and distress tolerance skills
   c) Focus on unrelated academic issues
   d) Ignore self-harm behaviors

488. What is the purpose of using scaling questions in counseling?
   a) To limit client responses
   b) To assess client progress and motivation
   c) To assert counselor control
   d) To avoid emotional content

489. A client with an eating disorder reports purging. What is an appropriate intervention?
   a) Encourage restrictive eating
   b) Use CBT and nutritional counseling
   c) Focus on unrelated career goals
   d) Ignore purging behaviors

490. When a client expresses anger, what is an appropriate counselor response?
   a) Ignore the anger
   b) Acknowledge and explore anger empathetically
   c) Advise the client to suppress anger
   d) Change the topic

491. A client with PTSD reports nightmares. What is an appropriate intervention?
   a) Encourage avoidance of sleep
   b) Use imagery rehearsal therapy
   c) Focus on unrelated financial stressors
   d) Ignore nightmares

492. Which technique is most effective for addressing a client's low self-esteem?
   a) Ignoring self-esteem issues
   b) Using CBT to challenge negative beliefs
   c) Focusing on unrelated academic goals
   d) Advising quick solutions

493. A client with social anxiety reports fear of social interactions. What is an appropriate intervention?
   a) Encourage social avoidance
   b) Use gradual exposure and social skills training
   c) Focus on unrelated financial issues
   d) Ignore social anxiety

494. What is the role of validation in counseling?
   a) To challenge client emotions
   b) To affirm client feelings and experiences
   c) To redirect to counselor goals
   d) To minimize emotional content

495. A client with substance use disorder reports relapse. What is an appropriate intervention?
   a) Encourage continued substance use
   b) Revise relapse prevention strategies
   c) Focus on unrelated financial stressors
   d) Ignore the relapse

496. Which of the following is a key component of trauma-informed care?
   a) Ignoring trauma history

b) Prioritizing safety and empowerment
c) Focusing on unrelated financial issues
d) Using confrontational techniques

497. A client with ADHD reports difficulty focusing. What is an appropriate intervention?
a) Encourage disorganized behaviors
b) Teach focus-enhancing strategies
c) Focus on unrelated academic issues
d) Ignore focus difficulties

498. When a client expresses guilt, what is an appropriate counselor response?
a) Minimize the client's feelings
b) Explore the source of guilt empathetically
c) Advise quick solutions
d) Change the topic

499. A client with OCD reports intrusive thoughts. What is an appropriate intervention?
a) Encourage avoidance of thoughts
b) Use exposure and response prevention (ERP)
c) Focus on unrelated life goals
d) Ignore intrusive thoughts

500. What is the purpose of using reframing in counseling?
a) To challenge client emotions aggressively
b) To help clients view situations differently
c) To assert counselor authority
d) To minimize client concerns

501. A client with borderline personality disorder reports emotional instability. What is an appropriate intervention?
a) Encourage emotional suppression
b) Use DBT to address emotional regulation
c) Focus on unrelated academic issues
d) Ignore emotional instability

502. Which technique is most effective for addressing a client's ambivalence about change?
a) Directing client decisions
b) Exploring pros and cons of change
c) Focusing on unrelated life goals
d) Ignoring ambivalence

503. A client with an eating disorder reports body dissatisfaction. What is an appropriate intervention?
a) Encourage restrictive eating
b) Use CBT to address body image
c) Focus on unrelated financial stressors

d) Ignore body dissatisfaction

504. When a client becomes anxious in session, what is an appropriate counselor response?
   a) Ignore the anxiety
   b) Teach relaxation techniques
   c) Change the topic to avoid discomfort
   d) Advise the client to suppress anxiety

505. A client with PTSD reports hypervigilance. What is an appropriate intervention?
   a) Encourage avoidance of triggers
   b) Use grounding and relaxation techniques
   c) Focus on unrelated financial stressors
   d) Ignore hypervigilance

506. Which of the following is a key component of solution-focused brief therapy?
   a) Exploring past traumas
   b) Focusing on client strengths and solutions
   c) Addressing unconscious conflicts
   d) Avoiding goal setting

507. A client with depression reports feelings of worthlessness. What is an appropriate intervention?
   a) Minimize the client's feelings
   b) Use CBT to challenge negative thoughts
   c) Focus on unrelated life goals
   d) Ignore feelings of worthlessness

508. What is the role of active listening in building a therapeutic alliance?
   a) To assert counselor authority
   b) To demonstrate understanding and empathy
   c) To redirect to counselor goals
   d) To minimize client emotions

509. A client with social anxiety reports fear of rejection. What is an appropriate intervention?
   a) Encourage social avoidance
   b) Use gradual exposure and CBT
   c) Focus on unrelated academic issues
   d) Ignore fear of rejection

510. When a client discloses trauma, what is an appropriate counselor response?
   a) Ignore the disclosure
   b) Acknowledge and explore with trauma-informed care
   c) Focus on unrelated life goals
   d) Advise quick solutions

511. A client with substance use disorder reports social isolation. What is an appropriate intervention?
    a) Encourage continued isolation
    b) Use social skills training
    c) Focus on unrelated financial stressors
    d) Ignore social isolation

512. Which technique is most effective for addressing a client's low motivation?
    a) Ignoring motivational challenges
    b) Using motivational interviewing
    c) Focusing on unrelated career goals
    d) Advising quick solutions

513. A client with OCD reports compulsive rituals. What is an appropriate intervention?
    a) Encourage continued rituals
    b) Use exposure and response prevention (ERP)
    c) Focus on unrelated life goals
    d) Ignore compulsive rituals

514. What is the purpose of using immediacy in a counseling session?
    a) To avoid addressing session dynamics
    b) To address the here-and-now relationship
    c) To focus on past events
    d) To assert counselor authority

515. A client with borderline personality disorder reports unstable relationships. What is an appropriate intervention?
    a) Encourage isolation
    b) Use DBT to address relationship patterns
    c) Focus on unrelated academic issues
    d) Ignore relationship issues

516. When a client expresses hopelessness, what is an appropriate counselor response?
    a) Minimize the client's feelings
    b) Validate and explore hopelessness empathetically
    c) Advise quick solutions
    d) Change the topic

517. A client with an eating disorder reports purging. What is an appropriate intervention?
    a) Encourage restrictive eating
    b) Use CBT and nutritional counseling
    c) Focus on unrelated career goals
    d) Ignore purging behaviors

518. Which of the following is a key component of ethical counseling practice?
   a) Ignoring client confidentiality
   b) Maintaining professional boundaries
   c) Prioritizing counselor convenience
   d) Using untested interventions

519. A client with PTSD reports intrusive memories. What is an appropriate intervention?
   a) Encourage avoidance of memories
   b) Use trauma-focused CBT
   c) Focus on unrelated financial stressors
   d) Ignore intrusive memories

520. What is the role of empathy in counseling?
   a) To assert counselor authority
   b) To foster trust and understanding
   c) To redirect to counselor goals
   d) To minimize client emotions

521. A client with ADHD reports difficulty with time management. What is an appropriate intervention?
   a) Encourage disorganized behaviors
   b) Teach time management strategies
   c) Focus on unrelated financial issues
   d) Ignore time management difficulties

522. When a client expresses guilt, what is an appropriate counselor response?
   a) Minimize the client's feelings
   b) Explore the source of guilt empathetically
   c) Advise quick solutions
   d) Change the topic

523. A client with social anxiety reports fear of social events. What is an appropriate intervention?
   a) Encourage avoidance of events
   b) Use gradual exposure and social skills training
   c) Focus on unrelated financial stressors
   d) Ignore social anxiety

524. Which technique is most effective for addressing a client's resistance to therapy?
   a) Confronting the client aggressively
   b) Exploring resistance empathetically
   c) Focusing on unrelated life goals
   d) Ignoring resistance

525. A client with substance use disorder reports cravings. What is an appropriate intervention?
    a) Encourage continued substance use
    b) Teach coping strategies for cravings
    c) Focus on unrelated financial issues
    d) Ignore cravings

526. What is the purpose of using positive reinforcement in counseling?
    a) To challenge client behaviors aggressively
    b) To encourage desired behaviors
    c) To assert counselor authority
    d) To minimize client progress

527. A client with depression reports low energy. What is an appropriate intervention?
    a) Encourage isolation
    b) Use behavioral activation techniques
    c) Focus on unrelated career goals
    d) Ignore low energy

528. When a client becomes tearful in session, what is an appropriate counselor response?
    a) Change the topic to avoid discomfort
    b) Acknowledge and validate the client's emotions
    c) Advise the client to stop crying
    d) Ignore the emotional display

529. A client with OCD reports distress from intrusive thoughts. What is an appropriate intervention?
    a) Encourage avoidance of thoughts
    b) Use exposure and response prevention (ERP)
    c) Focus on unrelated life goals
    d) Ignore intrusive thoughts

530. Which of the following is a key component of narrative therapy?
    a) Focusing on diagnostic labels
    b) Helping clients reframe their stories
    c) Avoiding client input
    d) Using confrontational techniques

531. A client with borderline personality disorder reports self-harm. What is an appropriate intervention?
    a) Encourage continued self-harm
    b) Use DBT and distress tolerance skills
    c) Focus on unrelated academic issues
    d) Ignore self-harm behaviors

532. What is the role of cultural sensitivity in counseling interventions?
   a) Applying the same interventions to all clients
   b) Adapting interventions to client's cultural context
   c) Ignoring cultural differences
   d) Focusing on counselor's cultural framework

533. A client with PTSD reports hyperarousal. What is an appropriate intervention?
   a) Encourage avoidance of triggers
   b) Use grounding and relaxation techniques
   c) Focus on unrelated financial stressors
   d) Ignore hyperarousal

534. When a client expresses anger toward the counselor, what is an appropriate response?
   a) Ignore the anger
   b) Acknowledge and explore the anger respectfully
   c) Change the topic to avoid conflict
   d) Advise the client to suppress anger

535. A client with an eating disorder reports body dissatisfaction. What is an appropriate intervention?
   a) Encourage restrictive eating
   b) Use CBT to address body image
   c) Focus on unrelated financial stressors
   d) Ignore body dissatisfaction

536. Which technique is most effective for addressing a client's hopelessness?
   a) Minimizing the client's feelings
   b) Using CBT to challenge negative thoughts
   c) Advising quick solutions
   d) Ignoring hopelessness

537. A client with social anxiety reports fear of public speaking. What is an appropriate intervention?
   a) Encourage avoidance of public speaking
   b) Use gradual exposure and CBT
   c) Focus on unrelated financial stressors
   d) Ignore public speaking fears

538. What is the role of active listening in crisis intervention?
   a) To assert counselor authority
   b) To understand and validate client distress
   c) To redirect to counselor goals
   d) To minimize client emotions

539. A client with ADHD reports impulsivity. What is an appropriate intervention?
   a) Encourage impulsive behaviors
   b) Teach impulse control strategies
   c) Focus on unrelated academic issues
   d) Ignore impulsivity

540. When a client discloses trauma, what is an appropriate counselor response?
   a) Ignore the disclosure
   b) Acknowledge and explore with trauma-informed care
   c) Focus on unrelated life goals
   d) Advise quick solutions

541. A client with substance use disorder reports relapse. What is an appropriate intervention?
   a) Encourage continued substance use
   b) Revise relapse prevention strategies
   c) Focus on unrelated financial stressors
   d) Ignore the relapse

542. Which of the following is a key component of person-centered therapy?
   a) Directing client decisions
   b) Providing empathy and unconditional positive regard
   c) Focusing on diagnostic labels
   d) Using confrontational techniques

543. A client with depression reports feelings of worthlessness. What is an appropriate intervention?
   a) Minimize the client's feelings
   b) Use CBT to challenge negative thoughts
   c) Focus on unrelated life goals
   d) Ignore feelings of worthlessness

544. What is the purpose of using mirroring in counseling?
   a) To challenge client emotions
   b) To reflect client feelings and build rapport
   c) To assert counselor authority
   d) To minimize client concerns

545. A client with OCD reports compulsive checking. What is an appropriate intervention?
   a) Encourage continued checking
   b) Use exposure and response prevention (ERP)
   c) Focus on unrelated life goals
   d) Ignore compulsive behaviors

546. When a client expresses guilt, what is an appropriate counselor response?
   a) Minimize the client's feelings

b) Explore the source of guilt empathetically
c) Advise quick solutions
d) Change the topic

547. A client with borderline personality disorder reports unstable relationships. What is an appropriate intervention?
a) Encourage isolation
b) Use DBT to address relationship patterns
c) Focus on unrelated academic issues
d) Ignore relationship issues

548. Which technique is most effective for addressing a client's low self-esteem?
a) Ignoring self-esteem issues
b) Using CBT to challenge negative beliefs
c) Focusing on unrelated academic goals
d) Advising quick solutions

549. A client with social anxiety reports fear of social interactions. What is an appropriate intervention?
a) Encourage social avoidance
b) Use gradual exposure and social skills training
c) Focus on unrelated financial issues
d) Ignore social anxiety

550. What is the role of validation in counseling?
a) To challenge client emotions
b) To affirm client feelings and experiences
c) To redirect to counselor goals
d) To minimize emotional content

551. A client with PTSD reports intrusive memories. What is an appropriate intervention?
a) Encourage avoidance of memories
b) Use trauma-focused CBT
c) Focus on unrelated financial stressors
d) Ignore intrusive memories

552. When a client becomes anxious in session, what is an appropriate counselor response?
a) Ignore the anxiety
b) Teach relaxation techniques
c) Change the topic to avoid discomfort
d) Advise the client to suppress anxiety

553. What is the primary role of empathy in counseling?
a) To assert counselor authority
b) To understand and share the client's feelings
c) To focus on diagnostic criteria

d) To redirect client emotions

554. Which attribute is essential for building a therapeutic alliance?
a) Maintaining a rigid demeanor
b) Demonstrating genuineness
c) Prioritizing counselor goals
d) Avoiding client input

555. A client feels judged during a session. What attribute should the counselor prioritize?
a) Unconditional positive regard
b) Diagnostic focus
c) Counselor-driven decision-making
d) Neutral detachment

556. How does cultural competence contribute to effective counseling?
a) By applying the same approach to all clients
b) By respecting and integrating client cultural values
c) By ignoring cultural differences
d) By focusing on counselor's cultural perspective

557. What is the purpose of maintaining professional boundaries in counseling?
a) To blur the line between client and counselor
b) To ensure a safe and ethical therapeutic environment
c) To prioritize counselor convenience
d) To limit client autonomy

558. A client discloses sensitive information. Which attribute guides the counselor's response?
a) Curiosity about personal details
b) Confidentiality
c) Judgmental attitude
d) Directive intervention

559. Which of the following reflects genuineness in a counseling session?
a) Acting superior to the client
b) Being authentic and transparent
c) Focusing on diagnostic labels
d) Avoiding emotional engagement

560. A client with diverse cultural beliefs feels misunderstood. What attribute should the counselor employ?
a) Standardized interventions
b) Cultural sensitivity
c) Counselor-driven goals
d) Neutral detachment

561. What is the role of unconditional positive regard in counseling?
   a) To judge client behaviors
   b) To accept the client without conditions
   c) To prioritize counselor values
   d) To limit client expression

562. A client expresses frustration with the counseling process. What attribute should guide the counselor?
   a) Defensiveness
   b) Active listening
   c) Directive problem-solving
   d) Emotional detachment

563. Which attribute ensures ethical practice when a client discusses suicidal thoughts?
   a) Ignoring client disclosures
   b) Duty to protect
   c) Focusing on unrelated issues
   d) Minimizing client concerns

564. How does self-awareness contribute to effective counseling?
   a) By focusing on counselor biases
   b) By recognizing and managing personal biases
   c) By prioritizing counselor comfort
   d) By avoiding client feedback

565. A client feels dismissed during a session. Which attribute should the counselor prioritize?
   a) Empathy
   b) Diagnostic focus
   c) Counselor authority
   d) Neutrality

566. What is the role of respect in a therapeutic relationship?
   a) To enforce counselor rules
   b) To value the client's dignity and autonomy
   c) To focus on counselor expertise
   d) To limit client input

567. A client from a marginalized group feels stereotyped. What attribute should the counselor employ?
   a) Standardized interventions
   b) Cultural humility
   c) Counselor-driven assumptions
   d) Emotional detachment

568. Which attribute is critical when a client challenges the counselor's approach?
   a) Defensiveness
   b) Openness to feedback
   c) Directive control
   d) Ignoring client concerns

569. What is the purpose of maintaining confidentiality in counseling?
   a) To share client information freely
   b) To protect client privacy and trust
   c) To prioritize counselor convenience
   d) To limit client disclosures

570. A client feels unsafe in session. Which attribute should the counselor prioritize?
   a) Emotional detachment
   b) Creating a safe environment
   c) Focusing on diagnostic criteria
   d) Directive interventions

571. Which attribute supports a client's autonomy in counseling?
   a) Imposing counselor values
   b) Collaborative decision-making
   c) Diagnostic focus
   d) Limiting client choices

572. A client expresses distrust in the counselor. What attribute should guide the response?
   a) Defensiveness
   b) Building trust through empathy
   c) Redirecting to unrelated topics
   d) Asserting counselor authority

573. What is the role of active listening in a therapeutic relationship?
   a) To control the session's direction
   b) To demonstrate understanding and validation
   c) To focus on counselor goals
   d) To minimize client emotions

574. A client feels invalidated during a session. Which attribute should the counselor employ?
   a) Judgmental attitude
   b) Validation of client feelings
   c) Counselor-driven solutions
   d) Emotional detachment

575. Which attribute is essential for ethical decision-making in counseling?
   a) Ignoring client needs
   b) Adherence to ethical guidelines
   c) Prioritizing counselor preferences

d) Avoiding client feedback

576. A client with a trauma history feels unsafe. What attribute should the counselor prioritize?
   a) Neutral detachment
   b) Trauma-informed care
   c) Focusing on unrelated goals
   d) Directive interventions

577. What is the role of genuineness in building trust with a client?
   a) To maintain a professional facade
   b) To foster authenticity and connection
   c) To prioritize counselor expertise
   d) To limit emotional engagement

578. A client feels misunderstood due to cultural differences. What attribute should guide the counselor?
   a) Standardized approaches
   b) Cultural competence
   c) Counselor assumptions
   d) Emotional detachment

579. Which attribute is critical when addressing a client's emotional distress?
   a) Minimizing emotions
   b) Empathetic responding
   c) Focusing on diagnostic labels
   d) Redirecting to unrelated topics

580. What is the purpose of self-reflection in counseling?
   a) To focus on counselor comfort
   b) To enhance counselor self-awareness
   c) To prioritize diagnostic accuracy
   d) To avoid client feedback

581. A client feels judged for their beliefs. Which attribute should the counselor employ?
   a) Unconditional positive regard
   b) Counselor-driven values
   c) Diagnostic focus
   d) Neutral detachment

582. Which attribute ensures a client feels heard during a session?
   a) Directive questioning
   b) Active listening
   c) Counselor authority
   d) Emotional detachment

583. A client discloses a history of discrimination. What attribute should guide the counselor?
 a) Ignoring the disclosure
 b) Cultural sensitivity
 c) Focusing on unrelated issues
 d) Asserting counselor expertise

584. What is the role of empathy in addressing client resistance?
 a) To confront resistance aggressively
 b) To understand and validate client concerns
 c) To redirect to counselor goals
 d) To minimize resistance

585. A client feels disconnected from the counselor. Which attribute should be prioritized?
 a) Emotional detachment
 b) Building rapport through genuineness
 c) Focusing on diagnostic criteria
 d) Directive interventions

586. Which attribute is essential for maintaining ethical boundaries with a client?
 a) Blurring personal and professional roles
 b) Professional boundary maintenance
 c) Prioritizing counselor comfort
 d) Limiting client autonomy

587. A client expresses anger toward the counselor. What attribute should guide the response?
 a) Defensiveness
 b) Empathetic exploration
 c) Redirecting to unrelated topics
 d) Asserting counselor authority

588. What is the purpose of cultural humility in counseling?
 a) To apply standardized interventions
 b) To acknowledge and learn from client cultural perspectives
 c) To prioritize counselor assumptions
 d) To avoid cultural discussions

589. A client feels unsafe sharing emotions. Which attribute should the counselor prioritize?
 a) Emotional detachment
 b) Creating a safe therapeutic environment
 c) Focusing on diagnostic labels
 d) Directive interventions

590. Which attribute supports client empowerment in counseling?
 a) Imposing counselor solutions
 b) Collaborative goal-setting

c) Diagnostic focus
d) Limiting client input

591. A client feels misunderstood during a session. What attribute should the counselor employ?
a) Judgmental attitude
b) Active listening and validation
c) Counselor-driven solutions
d) Emotional detachment

592. What is the role of confidentiality in building a therapeutic alliance?
a) To share client information freely
b) To foster trust and safety
c) To prioritize counselor convenience
d) To limit client disclosures

593. A client with a trauma history feels dismissed. What attribute should guide the counselor?
a) Neutral detachment
b) Trauma-informed empathy
c) Focusing on unrelated goals
d) Directive interventions

594. Which attribute is critical for addressing a client's cultural needs?
a) Ignoring cultural background
b) Cultural competence
c) Counselor-driven assumptions
d) Standardized interventions

595. A client expresses distrust in the counseling process. What attribute should the counselor prioritize?
a) Defensiveness
b) Building trust through empathy
c) Redirecting to unrelated topics
d) Asserting counselor authority

596. What is the role of unconditional positive regard in supporting client growth?
a) To judge client behaviors
b) To accept the client without conditions
c) To prioritize counselor values
d) To limit client expression

597. A client feels invalidated by the counselor's response. Which attribute should be employed?
a) Judgmental attitude
b) Validation of client experiences

c) Counselor-driven solutions
d) Emotional detachment

598. Which attribute ensures ethical handling of a client's suicidal ideation?
a) Ignoring client disclosures
b) Duty to protect
c) Focusing on unrelated issues
d) Minimizing client concerns

599. A client from a diverse background feels stereotyped. What attribute should guide the counselor?
a) Standardized interventions
b) Cultural humility
c) Counselor assumptions
d) Emotional detachment

600. What is the purpose of self-awareness in ethical counseling practice?
a) To focus on counselor comfort
b) To recognize and manage personal biases
c) To prioritize diagnostic accuracy
d) To avoid client feedback

Answers And Explanations

1. **b) To guide counselors in maintaining professional and ethical standards** – The CRCST Code of Ethics provides a framework for counselors to uphold professional integrity and ethical behavior in their practice. It ensures client welfare and professional accountability. Options a, c, and d are incorrect because they focus on compensation, client limits, or licensing, which are not the primary purposes of the code.

2. **a) Consult with a supervisor or colleague** – Consulting a supervisor or colleague is the first step in addressing an ethical dilemma, as it provides guidance and ensures decisions align with ethical standards. Options b, c, and d are incorrect because disclosing to the client, terminating, or ignoring the issue could violate ethical principles or harm the client.

3. **b) Health Insurance Portability and Accountability Act (HIPAA)** – HIPAA protects the confidentiality of client health information in counseling settings. Options a, c, and d are incorrect because the ADA addresses disability rights, FERPA applies to educational records, and the Civil Rights Act focuses on discrimination, not confidentiality.

4. **b) Take immediate action to ensure the client's safety, even if it breaches confidentiality** – Ethical standards prioritize client safety, requiring counselors to act if there is a risk of harm, even if it means breaching confidentiality. Options a, c, and d are incorrect because maintaining confidentiality, doing nothing, or discussing with family without client consent could endanger the client.

5. **c) A client's understanding of the counseling process, risks, and benefits** – Informed consent ensures clients understand the counseling process, including risks, benefits, and their rights. Options a, b, and d are incorrect because they focus on payment, credentials, or consultation, which are not the core components of informed consent.

6. **b) Politely decline the gift and explain professional boundaries** – Declining gifts maintains professional boundaries and prevents potential conflicts of interest. Options a, c, and d are incorrect because accepting gifts, donating them, or redirecting them could blur boundaries or create ethical concerns.

7. **b) When the client is at risk of harming themselves or others** – Breaking confidentiality is ethically permissible when there is imminent risk of harm to the client or others, as per the duty to warn. Options a, c, and d are incorrect because lack of progress, missed sessions, or casual discussions do not justify breaching confidentiality.

8. **b) Obtain informed consent from the minor's legal guardian** – Counseling minors requires consent from their legal guardian to ensure legal and ethical compliance. Options a, c, and d are incorrect because minors cannot provide sole consent, proceeding without consent is unethical, and confidentiality agreements are not sufficient.

9. **b) Seek supervision and consider referring the client to another counselor** – Seeking supervision addresses the counselor's feelings ethically, and referral may be necessary to avoid bias. Options a, c, and d are incorrect because discussing feelings with the client, continuing without action, or abrupt termination could harm the therapeutic relationship.

10. **b) Understanding and respecting clients' cultural backgrounds and values** – Cultural competence involves respecting and adapting to clients' cultural contexts. Options a, c, and d are incorrect because uniform techniques, ignoring culture, or imposing the counselor's values disregard client diversity and needs.

11. **b) Provide the records in accordance with legal and ethical guidelines** – Clients have a right to access their records, and counselors must comply with legal and ethical standards like HIPAA. Options a, c, and d are incorrect because denying access, charging for it, or sharing with family without consent violates client rights.

12. **b) To protect the therapeutic relationship and client well-being** – Professional boundaries ensure a safe, ethical therapeutic environment. Options a, c, and d are incorrect because boundaries are not about limiting sessions, meeting counselor needs, or preventing dependency alone.

13. **b) Report the behavior to the appropriate professional or licensing board** – Reporting unethical behavior to the appropriate authority upholds professional standards. Options a, c, and d are incorrect because public confrontation, ignoring the issue, or discussing with clients is unethical or ineffective.

14. **a) Counseling a client while also employing them in your private business** – A dual relationship involves multiple roles with a client, such as employer and counselor, which can create conflicts of interest. Options b, c, and d are incorrect because they describe professional actions, not dual relationships.

15. **b) Respect the client's beliefs and adapt counseling approaches accordingly** – Respecting client beliefs ensures cultural competence and client-centered care. Options a, c, and d are incorrect because changing beliefs, terminating, or ignoring cultural factors violates ethical principles.

16. **b) Engage in ongoing professional development to maintain competence** – Continuing education ensures counselors remain competent and up-to-date. Options a, c, and d are incorrect because limiting education, avoiding it, or delegating it undermines professional responsibility.

17. **a) The platform used complies with HIPAA regulations** – Telehealth platforms must meet HIPAA standards to protect client confidentiality. Options b, c, and d are incorrect because fees, recording, or waiving confidentiality are not ethical requirements for telehealth.

18. **a) Tarasoff v. Regents of the University of California** – The Tarasoff case established the duty to warn when a client poses a risk of harm to others. Options b, c, and d are incorrect because they pertain to unrelated legal principles.

19. **b) Assess the risk and develop a safety plan with the client** – Ethical practice requires assessing suicidal ideation and collaborating on a safety plan. Options a, c, and d are incorrect because encouraging independence, immediate referral, or avoidance could neglect client safety.

20. **b) Obtain the client's consent or a court order before disclosing information** – Counselors must protect confidentiality unless authorized by the client or a court order. Options a, c, and d are incorrect because sharing without consent, refusing entirely, or selective disclosure violates ethical standards.

21. **b) Keeping records secure and confidential** – Legal standards require secure and confidential record-keeping. Options a, c, and d are incorrect because indefinite storage, sharing without consent, or destroying records after sessions violates legal and ethical guidelines.

22. **b) Report the suspected abuse to the appropriate authorities** – Counselors are mandated reporters and must report suspected abuse to protect the client. Options a, c, and d are incorrect because confronting the abuser, waiting for confirmation, or doing nothing could endanger the client.

23. **b) Discuss the reasons for termination and explore alternatives** – Ethical termination involves discussing the client's reasons and providing alternatives or referrals. Options a, c, and d are incorrect because insisting on continuation, abrupt termination, or charging for missed sessions is unethical.

24. **a) Posting client success stories with their permission** – Sharing success stories with client consent is ethical and respects confidentiality. Options b, c, and d are incorrect because anonymous sharing, friending clients, or false advertising violates ethical standards.

25. **b) To inform clients about the counselor's qualifications and approach** – A professional disclosure statement informs clients about the counselor's credentials and methods. Options a, c, and d are incorrect because fees, guarantees, or liability are not its primary purpose.

26. **b) Consult with a legal professional or supervisor** – Consulting ensures legal and ethical compliance when uncertain. Options a, c, and d are incorrect because complying without review, denying without explanation, or requiring written clarification could lead to unethical decisions.

27. **b) Engaging in a romantic relationship with a current client** – Romantic relationships with clients are a clear ethical violation due to power imbalances. Options a, c, and d are incorrect because they describe ethical or permissible actions.

28. **b) Discuss payment options and document the conversation** – Addressing nonpayment through discussion and documentation is ethical and professional. Options a, c, and d are incorrect because immediate termination, sharing with others, or ignoring the issue violates ethical standards.

29. **b) Adapt interventions to respect cultural differences** – Cultural competence requires tailoring interventions to clients' cultural contexts. Options a, c, and d are incorrect because universal techniques, ignoring symptoms, or avoiding cultural discussions neglect client needs.

30. **b) Maintain confidentiality unless the activity involves imminent harm** – Confidentiality must be upheld unless there is a risk of harm, as per ethical guidelines. Options a, c, and d are incorrect because immediate reporting, discussing with others, or termination without cause is unethical.

31. **b) To provide guidance on complex ethical and clinical issues** – Supervision supports counselors in navigating ethical and clinical challenges. Options a, c, and d are incorrect because supervision is not about promotion, personal monitoring, or payment enforcement.

32. **b) Consult with a legal professional to ensure compliance with ethical and legal standards** – Consulting ensures proper handling of subpoenas while protecting client rights. Options a, c, and d are incorrect because releasing records immediately, destroying them, or discussing with family violates ethical standards.

33. **b) Avoiding harm to the client** – Nonmaleficence prioritizes preventing harm to clients. Options a, c, and d are incorrect because they describe beneficence, outcome guarantees, or credential maintenance, not nonmaleficence.

34. **b) Refuse the request and explain the ethical implications** – Refusing to falsify records upholds integrity and ethical standards. Options a, c, and d are incorrect because agreeing, ignoring, or terminating without explanation violates ethical principles.

35. **b) To protect the counselor from legal claims related to their practice** – Professional liability insurance safeguards counselors against legal claims. Options a, c, and d are incorrect because it does not cover session costs, ensure free services, or guarantee licensure.

36. **b) Explore the client's statements respectfully to understand their perspective** – Respectful exploration maintains the therapeutic alliance and ethical practice. Options a, c, and d are incorrect because aggressive confrontation, termination, or ignoring dishonesty is unethical.

37. **a) Autonomy** – Autonomy is a core ethical principle, respecting clients' rights to make their own decisions. Options b, c, and d are incorrect because profitability, efficiency, and competition are not ethical principles.

38. **b) Provide the treatment plan in accordance with ethical guidelines** – Clients have a right to access their treatment plans per ethical standards. Options a, c, and d are incorrect because denying access, charging for it, or sharing with employers violates client rights.

39. **b) Reach out to the client to discuss their attendance and needs** – Contacting the client to discuss absences is ethical and client-centered. Options a, c, and d are incorrect because abrupt termination, billing without contact, or discussing with others is unethical.

40. **b) Refer the client to a qualified professional** – Referring clients to specialists for services outside the counselor's scope ensures competence and client welfare. Options a, c, and d are incorrect because providing untrained services, ignoring the request, or charging more is unethical.

41. **b) Protecting client confidentiality and data security** – Technology use in counseling must prioritize confidentiality and HIPAA compliance. Options a, c, and d are incorrect because cost, unregulated tech, or mandatory tech use does not address ethical concerns.

42. **b) Discuss confidentiality limits and explore the client's concerns** – Discussing confidentiality ensures clarity and respects client needs. Options a, c, and d are incorrect because agreeing without discussion, refusing to counsel, or informing the spouse violates ethical standards.

43. **b) Engage in regular self-care to maintain professional competence** – Self-care is essential to prevent burnout and maintain competence. Options a, c, and d are incorrect because prioritizing clients over self, avoiding self-care, or delegating it undermines professional responsibility.

44. **b) Refuse to provide a diagnosis without a proper assessment** – Ethical practice requires diagnoses based on thorough assessment. Options a, c, and d are incorrect because providing unverified diagnoses or consulting without assessment violates competence standards.

45. **b) Providing accurate information about qualifications and services** – Ethical advertising involves truthful representation of services. Options a, c, and d are incorrect because promising guarantees, sharing testimonials without consent, or offering free sessions universally is unethical.

46. **b) Obtain the client's consent before releasing the notes** – Client consent is required to share session notes, per HIPAA and ethical guidelines. Options a, c, and d are incorrect because sharing without consent, refusing entirely, or removing identifiers without consent is unethical.

47. **b) Explore the client's views respectfully to understand their perspective** – Respectful exploration maintains the therapeutic alliance and ethical practice. Options a, c, and d are incorrect because termination, agreeing, or ignoring the views disregards client needs and ethical standards.

48. **b) Decline the fee to avoid a conflict of interest** – Declining referral fees prevents conflicts of interest and maintains ethical integrity. Options a, c, and d are incorrect because accepting fees or prioritizing fee-based referrals violates ethical standards.

49. **b) To promote the client's well-being and growth** – Beneficence focuses on advancing client welfare. Options a, c, and d are incorrect because financial success, liability, or strict adherence to plans is not the focus of beneficence.

50. **b) Explain that therapy is individual and refer the friend to another counselor** – Individual therapy maintains boundaries, and referral ensures ethical care. Options a, c, and d are incorrect because including the friend, allowing observation, or charging extra violates ethical standards.

51. **a) Maintaining client records for a specified period** – Most states require counselors to retain records for a set time to comply with legal standards. Options b, c, and d are incorrect because sharing freely, income-based charging, or free services are not universal legal requirements.

52. **b) Take steps to address burnout, such as seeking supervision or reducing caseload** – Addressing burnout ethically ensures continued competence. Options a, c, and d are incorrect because continuing without action, terminating all relationships, or ignoring burnout harms clients and violates ethics.

53. **b) Address the complaint through the appropriate professional or legal channels** – Handling complaints professionally upholds ethical standards. Options a, c, and d are incorrect because ignoring, discussing with clients, or termination without process is unethical.

54. **b) Ensuring the client has appropriate referrals and closure** – Ethical termination involves providing referrals and closure to support client welfare. Options a, c, and d are incorrect because no explanation, charging for missed sessions, or sharing reasons with others is unethical.

55. **b) Refer the client to a professional trained in the specific treatment** – Referral ensures competent care when the counselor lacks training. Options a, c, and d are incorrect because providing untrained treatment, ignoring the request, or researching independently risks client harm.

56. **b) Respect the client's right to make their own decisions** – Autonomy respects clients' decision-making rights. Options a, c, and d are incorrect because making decisions for clients, limiting choices, or requiring compliance violates ethical principles.

57. **b) Refer the client to a counselor fluent in the client's language** – Referral ensures effective communication and competent care. Options a, c, and d are incorrect because using translation apps, learning during sessions, or forcing the client's language risks miscommunication and incompetence.

58. **a) Disclose the conflict to the client and take steps to mitigate it** – Disclosing and mitigating conflicts of interest upholds transparency and ethics. Options b, c, and d are incorrect because ignoring, terminating, or prioritizing counselor interests violates ethical standards.

59. **b) Politely decline and focus on the client's needs** – Declining to share personal beliefs maintains professional boundaries and client focus. Options a, c, and d are incorrect because sharing beliefs, conditional sharing, or termination risks bias and harm.

60. **b) Explain why the intervention is inappropriate and offer alternatives** – Explaining and offering alternatives ensures ethical, client-centered care. Options a, c, and d are incorrect because providing inappropriate interventions, ignoring the request, or terminating without discussion is unethical.

61. **b) Disclose the connection and assess its impact on the therapeutic relationship** – Disclosure and assessment prevent conflicts of interest and maintain ethics. Options a, c, and d are incorrect because discussing the acquaintance, ignoring it, or terminating without reason risks bias or harm.

62. **b) Respect the client's autonomy as much as possible** – Ethical practice with involuntary clients maximizes autonomy within legal constraints. Options a, c, and d are incorrect because prioritizing counselor goals, requiring compliance, or limiting communication violates client rights.

63. **b) Provide the letter only after assessing its accuracy and appropriateness** – Ethical letters require verification to ensure accuracy and avoid harm. Options a, c, and d are incorrect because unverified letters, refusal without reason, or charging extra risks ethical violations.

64. **b) Ensure all group members understand the counseling process and confidentiality limits** – Group counseling requires informed consent from all members, including confidentiality limits. Options a, c, and d are incorrect because leader-only consent, no consent, or waivers violate ethical standards.

65. **b) Discuss the confidentiality concerns and seek an alternative setting** – Addressing confidentiality concerns ensures ethical practice. Options a, c, and d are incorrect because proceeding in an insecure setting, ignoring limitations, or terminating without reason risks client harm.

66. **b) Obtaining client consent before sharing information** – Collaboration requires client consent to protect confidentiality. Options a, c, and d are incorrect because sharing freely, collaborating without informing, or limiting collaboration violates ethical standards.

67. **b) Clarify the counselor's role and refer the client to appropriate legal resources** – Clarifying roles and referring to legal resources maintains ethical boundaries. Options a, c, and d are incorrect because advocating without assessment, refusing outright, or charging for advocacy is unethical.

68. **b) Report the violation to the appropriate professional board** – Reporting past ethical violations upholds professional accountability. Options a, c, and d are incorrect because discussing with family, ignoring unless current, or confronting directly is unethical or ineffective.

69. **b) Refer the family member to another counselor to avoid a dual relationship** – Referral prevents dual relationships and maintains ethical boundaries. Options a, c, and d are incorrect because providing services to family or charging less risks bias and ethical violations.

70. **b) Politely decline the gift and discuss professional boundaries** – Declining significant gifts maintains boundaries and prevents conflicts. Options a, c, and d are incorrect because accepting, donating without discussion, or using the gift for fees violates ethical standards.

71. **b) Assess the client's capacity and consult with a supervisor if needed** – Assessing capacity and seeking supervision ensures ethical decision-making. Options a, c, and d are incorrect because deciding for the client, ignoring concerns, or terminating abruptly risks harm.

72. **b) Discuss the implications and establish guidelines for recordings** – Discussing recordings ensures ethical handling and protects confidentiality. Options a, c, and d are incorrect because allowing without discussion, refusing outright, or keeping copies risks ethical violations.

73. **b) To gather comprehensive client information and build rapport** – The initial intake interview establishes a foundation for counseling by collecting detailed client information and fostering trust, which enhances the therapeutic alliance. Options a, c, and d are incorrect because immediate diagnosis, assigning a treatment plan, or focusing solely on insurance neglects the comprehensive and relational goals of intake.

74. **b) Evaluating biological, psychological, and social factors** – A biopsychosocial assessment integrates biological, psychological, and social elements to understand the client holistically. Options a, c, and d are incorrect because focusing only on mental health, finances, or academics is too narrow and misses the comprehensive nature of the assessment.

75. **b) To ensure informed consent and explain the counseling process** – Obtaining informed consent and clarifying the counseling process during intake upholds ethical standards and respects client autonomy. Options a, c, and d are incorrect because diagnosing based on impressions, starting treatment without input, or limiting to administrative tasks violates ethical guidelines.

76. **b) Beck Depression Inventory (BDI-II)** – The BDI-II is a standardized tool specifically designed to assess depression symptoms. Options a, c, and d are incorrect because the MMPI-2 assesses personality, the WAIS measures intelligence, and the Rorschach evaluates perception, not depression specifically.

77. **a) The client's physical appearance, mood, and cognitive functioning** – A mental status examination evaluates appearance, mood, cognition, and other mental health indicators to

assess current functioning. Options b, c, and d are incorrect because financial stability, social media, or academic achievements are not part of this examination.

78. **b) Ask open-ended questions to clarify the client's concerns** – Open-ended questions encourage clients to elaborate, providing clarity for accurate assessment. Options a, c, and d are incorrect because premature diagnosis, immediate referral, or dismissing symptoms risks misdiagnosis and neglects client needs.

79. **a) Excessive worry occurring more days than not for at least six months** – This is a core DSM-5 criterion for generalized anxiety disorder. Options b, c, and d are incorrect because they describe symptoms of panic disorder, psychotic disorders, or depression, not GAD.

80. **b) To map family relationships and patterns across generations** – A genogram visualizes family dynamics and patterns, aiding in understanding relational and historical factors. Options a, c, and d are incorrect because genograms do not assess cognition, physical health, or finances.

81. **b) Conduct a suicide risk assessment** – Assessing suicide risk is the immediate priority to ensure client safety and guide intervention. Options a, c, and d are incorrect because diagnosing without assessment, immediate referral, or focusing on childhood neglects the urgency of the situation.

82. **b) Using standardized tools and clinical judgment to ensure accuracy** – Ethical diagnosis requires validated tools and clinical judgment to avoid errors. Options a, c, and d are incorrect because relying on self-report, diagnosing for reimbursement, or avoiding diagnosis risks inaccuracy and ethical violations.

83. **b) To provide additional context from family or other sources** – Collateral information supplements the client's self-report, enhancing assessment accuracy. Options a, c, and d are incorrect because it does not replace client information, determine treatment plans alone, or assess finances.

84. **b) Intrusive memories of a traumatic event** – Intrusive memories are a hallmark symptom of PTSD per DSM-5. Options a, c, and d are incorrect because they describe dysthymia, bipolar disorder, or borderline personality disorder, not PTSD.

85. **b) The frequency, duration, and impact of substance use** – Assessing these factors provides a comprehensive understanding of substance use and its effects. Options a, c, and d are incorrect because employment, academics, or social media are not directly relevant to substance use assessment.

86. **b) Assess for comorbid conditions using standardized criteria** – Comorbidity requires thorough assessment to address all relevant conditions. Options a, c, and d are incorrect because focusing on one condition, ignoring symptoms, or referring without assessment risks incomplete care.

87. **b) To assess how symptoms impact daily functioning** – A functional assessment evaluates how mental health symptoms affect daily life, informing treatment. Options a, c, and d are incorrect because it does not focus on physical health, insurance, or career goals exclusively.

88. **b) Unexplained injuries or frequent absences from school** – These are red flags for potential child abuse, requiring further assessment and reporting. Options a, c, and d are incorrect because shyness, extracurricular activities, or academic success are not specific indicators of abuse.

89. **b) Incorporate cultural context into the assessment process** – Cultural competence requires integrating cultural factors to ensure accurate and respectful assessments. Options a, c, and d are incorrect because ignoring culture, using uniform tools, or imposing the counselor's framework disregards client needs.

90. **b) Respect the client's autonomy and explore barriers to disclosure** – Respecting autonomy and exploring barriers fosters trust and encourages openness. Options a, c, and d are incorrect because diagnosing based on assumptions, terminating, or requiring information violates ethical standards.

91. **a) AUDIT (Alcohol Use Disorders Identification Test)** – The AUDIT is designed to assess alcohol use disorder. Options b, c, and d are incorrect because the MMPI-2 assesses personality, GAD-7 measures anxiety, and PHQ-9 evaluates depression.

92. **b) Conduct a cognitive assessment and refer for medical evaluation** – Memory issues require cognitive assessment and possible medical referral to rule out neurological causes. Options a, c, and d are incorrect because immediate diagnosis, ignoring the issue, or focusing only on emotions risks misdiagnosis.

93. **b) To identify potential harm to the client or others** – Risk assessments prioritize safety by identifying risks of harm. Options a, c, and d are incorrect because they focus on finances, career, or academics, which are not the purpose of risk assessment.

94. **b) Persistent feelings of sadness for at least two weeks** – This is a core DSM-5 symptom of major depressive disorder. Options a, c, and d are incorrect because they describe panic disorder, GAD, or psychotic disorders, not depression.

95. **b) Informed consent from the minor's legal guardian** – Counseling minors requires guardian consent to comply with legal and ethical standards. Options a, c, and d are incorrect because minors cannot consent alone, school consent is irrelevant, and no consent is unethical.

96. **b) To offer standardized criteria for mental health diagnoses** – The DSM-5 provides standardized diagnostic criteria to ensure consistency. Options a, c, and d are incorrect because it does not provide treatment plans, assess physical health, or determine insurance eligibility.

97. **b) Psychotic disorders or medical conditions** – Hearing voices suggests possible psychotic disorders or medical issues, requiring thorough assessment. Options a, c, and d are incorrect because anxiety, social anxiety, or adjustment disorder do not typically involve hallucinations.

98. **b) The presence of a plan and access to means** – Assessing a suicide plan and means is critical for determining risk level. Options a, c, and d are incorrect because employment, academics, or social media are not relevant to suicide risk.

99. **b) Use an unspecified diagnosis and continue assessment** – An unspecified diagnosis allows for further evaluation when symptoms are unclear. Options a, c, and d are incorrect because assigning a close match, avoiding diagnosis, or immediate referral risks inaccuracy or neglect.

100. **b) Ensuring tools are valid and culturally appropriate** – Ethical assessment requires valid, culturally sensitive tools to ensure accuracy. Options a, c, and d are incorrect because using untrained tools, relying solely on tools, or avoiding them violates ethical standards.

101. **b) Symptoms of PTSD or related disorders** – A trauma history requires assessing for PTSD or related conditions. Options a, c, and d are incorrect because finances, career, or academics are not directly relevant to trauma assessment.

102. **b) To systematically gather diagnostic information** – A structured clinical interview ensures comprehensive and consistent data collection. Options a, c, and d are incorrect because rapport, physical health, or insurance are not the primary focus.

103. **b) Bipolar I disorder** – Mania is a hallmark of Bipolar I disorder per DSM-5. Options a, c, and d are incorrect because they describe depression, anxiety, or OCD, which do not feature mania.

104. **b) Provide an interpreter or culturally appropriate tools** – Ethical assessment requires accessible and culturally relevant methods. Options a, c, and d are incorrect because standard tools, nonverbal cues, or immediate referral may lead to misdiagnosis or neglect.

105. **b) Recurrent intrusive thoughts and compulsive behaviors** – These are core DSM-5 symptoms of OCD. Options a, c, and d are incorrect because they describe depression, PTSD, or bipolar disorder, not OCD.

106. **b) Assess the pain's impact on mental health and refer for medical evaluation** – Chronic pain may affect mental health, requiring assessment and medical referral. Options a, c, and d are incorrect because ignoring pain, diagnosing immediately, or focusing only on emotions risks incomplete care.

107. **b) To understand the client's social and environmental context** – A psychosocial history provides context for social and environmental factors affecting mental health. Options a, c, and d are incorrect because physical health, insurance, or academics are not the primary focus.

108. **b) Sudden onset of intense fear with physical symptoms** – This is a DSM-5 criterion for a panic attack. Options a, c, and d are incorrect because they describe GAD, borderline personality disorder, or depression, not panic attacks.

109. **b) Assess for cognitive or medical issues and refer as needed** – Immediately, with the goal of resolution and improved relationships – Disorientation may indicate cognitive or medical issues, and prompt assessment with potential referral ensures accurate diagnosis and client safety. Options a, c, and d are incorrect because proceeding as normal, diagnosing psychosis immediately, or focusing only on emotions risks missing critical medical or cognitive factors.

110. **b) Explore inconsistencies respectfully to clarify the client's history** – Immediately, with the goal of resolution and improved relationships – Respectful exploration of inconsistencies builds trust and clarifies information for accurate assessment. Options a, c, and d are incorrect because accepting recent information, diagnosing based on severe symptoms, or terminating the session risks misdiagnosis or ethical violations.

111. **b) GAD-7 (Generalized Anxiety Disorder Scale)** – Immediately, with the goal of resolution and improved relationships – The GAD-7 is a validated tool for assessing anxiety symptoms. Options a, c, and d are incorrect because PHQ-9 assesses depression, MMPI-2 evaluates personality, and AUDIT focuses on alcohol use, not anxiety.

112. **b) Assessing the frequency and severity of self-harm behaviors** – Immediately, with the goal of resolution and improved relationships – Prioritizing self-harm assessment ensures client safety and informs appropriate interventions. Options a, c, and d are incorrect because immediate diagnosis, focusing on career goals, or ignoring non-recent behavior neglects critical safety concerns.

113. **b) To distinguish between similar mental health conditions** – Immediately, with the goal of resolution and improved relationships – Differential diagnosis ensures accurate identification of conditions with overlapping symptoms. Options a, c, and d are incorrect because assigning multiple diagnoses, bypassing assessment, or focusing on physical health does not align with the purpose.

114. **b) Potential mental health or medical causes** – Immediately, with the goal of resolution and improved relationships – Sleep disturbances may stem from mental health or medical issues, requiring thorough assessment. Options a, c, and d are incorrect because finances, academics, or social media are not relevant to sleep disturbance causes.

115. **b) Hallucinations or delusions for at least one month** – Immediately, with the goal of resolution and improved relationships – This is a core DSM-5 criterion for schizophrenia. Options a, c, and d are incorrect because low mood, worry, or panic attacks describe other disorders, not schizophrenia.

116.   **b) Assess the impact of substance use on mental health and functioning** – Immediately, with the goal of resolution and improved relationships – Comprehensive assessment of substance use ensures a holistic understanding of its effects. Options a, c, and d are incorrect because immediate diagnosis, ignoring substance use, or referral without assessment risks incomplete care.

117.   **b) Potential stressors and symptoms of adjustment disorder** – Immediately, with the goal of resolution and improved relationships – Assessing work-related stressors and adjustment disorder symptoms identifies underlying issues. Options a, c, and d are incorrect because academics, finances, or social media are not directly relevant to work-related overwhelm.

118.   **b) Gathering information on medical, psychological, and social history** – Immediately, with the goal of resolution and improved relationships – A comprehensive intake assessment integrates all relevant history for a holistic client understanding. Options a, c, and d are incorrect because focusing only on symptoms, insurance, or career goals is too narrow.

119.   **b) Symptoms of acute stress disorder or PTSD** – Immediately, with the goal of resolution and improved relationships – Recent trauma requires assessing for acute stress disorder or PTSD to guide treatment. Options a, c, and d are incorrect because academics, finances, or social media are not relevant to trauma assessment.

120.   **b) To ensure accurate and reliable diagnostic information** – Immediately, with the goal of resolution and improved relationships – Validated tools provide standardized, reliable data for accurate diagnosis. Options a, c, and d are incorrect because reducing time, replacing judgment, or assessing physical health is not the primary purpose.

121.   **b) Assessing for mood disorders or environmental stressors** – Immediately, with the goal of resolution and improved relationships – Agitation and irritability may indicate mood disorders or stressors, requiring targeted assessment. Options冷的 Options a, c, and d are incorrect because immediate diagnosis, ignoring symptoms, or focusing on social history risks misdiagnosis or neglects key factors.

122.   **b) Ensuring the diagnosis is supported by sufficient evidence** – Immediately, with the goal of resolution and improved relationships – Ethical diagnosis requires evidence-based assessment to avoid errors and ensure client welfare. Options a, c, and d are incorrect because quick diagnosis, intuition, or avoiding diagnosis violates ethical standards and risks harm.

123.   **b) Symptoms of eating disorders and related health impacts** – Immediately, with the goal of resolution and improved relationships – Eating issues require assessment of eating disorder symptoms and health effects for proper care. Options a, c, and d are incorrect because academics, finances, or social media are not relevant to eating disorder assessment.

124. **b) To identify past diagnoses, treatments, and outcomes** – Immediately, with the goal of resolution and improved relationships – A mental health history provides critical context for past and current mental health issues. Options a, c, and d are incorrect because insurance, physical health, or career goals are not the focus of a mental health history.

125. **b) Potential causes such as depression or social anxiety** – Immediately, with the goal of resolution and improved relationships – Social withdrawal may indicate depression or social anxiety, requiring specific assessment. Options a, c, and d are incorrect because finances, academics, or social media are not primary causes of withdrawal.

126. **b) Difficulty sustaining attention and impulsive behavior** – Immediately, with the goal of resolution and improved relationships – These are core DSM-5 symptoms of ADHD. Options a, c, and d are incorrect because low mood, intrusive thoughts, or flashbacks describe other disorders, not ADHD.

127. **b) Conduct further assessment to clarify symptoms** – Immediately, with the goal of resolution and improved relationships – Unclear symptoms require ongoing assessment to ensure diagnostic accuracy. Options a, c, and d are incorrect because provisional diagnosis, referral, or ignoring symptoms risks misdiagnosis or neglect.

128. **b) To integrate assessment data into a cohesive understanding of the client** – Immediately, with the goal of resolution and improved relationships – Clinical formulation synthesizes assessment data for a comprehensive client understanding. Options a, c, and d are incorrect because assigning diagnoses, assessing insurance, or physical health is not the purpose.

129. **b) Potential mental health or medical causes** – Immediately, with the goal of resolution and improved relationships – Chronic fatigue may have mental health or medical origins, requiring thorough assessment. Options a, c, and d are incorrect because finances, academics, or social media are not relevant to fatigue causes.

130. **b) Ensuring assessments are thorough and culturally sensitive** – Immediately, with the goal of resolution and improved relationships – Ethical assessments prioritize thoroughness and cultural sensitivity for accurate, respectful care. Options a, c, and d are incorrect because quick diagnosis, relying on self-report, or avoiding tools violates ethical standards.

131. **b) Potential psychotic disorders or environmental factors** – Immediately, with the goal of resolution and improved relationships – Paranoia may indicate psychotic disorders or stressors, requiring careful assessment. Options a, c, and d are incorrect because academics, finances, or social media are not primary causes of paranoia.

132. **b) To reduce the risk of harm to the client or others** – Immediately, with the goal of resolution and improved relationships – A safety plan addresses risks of harm, prioritizing

client safety. Options a, c, and d are incorrect because career goals, finances, or academics are not relevant to safety planning.

133. **b) The frequency, triggers, and impact of the panic attacks** – Immediately, with the goal of resolution and improved relationships – Assessing panic attack details informs diagnosis and treatment. Options a, c, and d are incorrect because academics, finances, or social media are not relevant to panic attack assessment.

134. **b) Intense fear of abandonment and unstable relationships** – Immediately, with the goal of resolution and improved relationships – These are core DSM-5 symptoms of borderline personality disorder. Options a, c, and d are incorrect because low mood, panic attacks, or worry describe other disorders, not BPD.

135. **b) Refer the client for a medical evaluation** – Immediately, with the goal of resolution and improved relationships – Medical symptoms require referral to rule out physical causes, ensuring comprehensive care. Options a, c, and d are incorrect because diagnosing, ignoring, or focusing only on mental health risks incomplete assessment.

136. **b) To build trust and facilitate open communication** – Immediately, with the goal of resolution and improved relationships – Rapport fosters trust and encourages accurate client disclosure during intake. Options a, c, and d are incorrect because diagnosing, assessing finances, or insurance are not rapport's primary purpose.

137. **b) The history of mood episodes and current symptoms** – Immediately, with the goal of resolution and improved relationships – Bipolar disorder assessment focuses on mood episode history and current symptoms for accuracy. Options a, c, and d are incorrect because academics, finances, or social media are not relevant to bipolar assessment.

138. **b) Using the DSM-5 as a guide alongside clinical judgment** – Immediately, with the goal of resolution and improved relationships – The DSM-5 provides diagnostic criteria, but clinical judgment ensures balanced assessment. Options a, c, and d are incorrect because diagnosing for funding, relying solely on DSM-5, or avoiding it risks ethical violations.

139. **b) Symptoms of depression or other mental health conditions** – Immediately, with the goal of resolution and improved relationships – Hopelessness may indicate depression or related conditions, requiring specific assessment. Options a, c, and d are incorrect because finances, academics, or social media are not relevant to hopelessness.

140. **b) To gather additional perspectives from family or others** – Immediately, with the goal of resolution and improved relationships – Collateral interviews provide supplementary context for accurate assessment. Options a, c, and d are incorrect because they do not replace client information, assess physical health, or determine insurance.

141. **b) Potential dissociative disorders or trauma history** – Immediately, with the goal of resolution and improved relationships – Dissociation may indicate dissociative disorders or

trauma, requiring targeted assessment. Options a, c, and d are incorrect because academics, finances, or social media are not relevant to dissociation.

142. **b) Creating a safe environment and exploring trauma history** – Immediately, with the goal of resolution and improved relationships – A trauma-informed assessment ensures client safety and addresses trauma history. Options a, c, and d are incorrect because focusing only on symptoms, diagnosing without input, or assessing finances risks incomplete care.

143. **b) Triggers and patterns of the aggressive behavior** – Immediately, with the goal of resolution and improved relationships – Assessing triggers and patterns of aggression informs appropriate interventions. Options a, c, and d are incorrect because academics, finances, or social media are not relevant to aggression assessment.

144. **b) Continue assessment and use a provisional diagnosis if needed** – Immediately, with the goal of resolution and improved relationships – Uncertain diagnoses require further assessment to ensure accuracy, with provisional diagnoses as needed. Options a, c, and d are incorrect because immediate diagnosis, referral, or avoiding diagnosis risks errors or neglect.

145. **b) Exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is the evidence-based treatment for OCD, targeting intrusive thoughts and compulsive behaviors. Options a, c, and d are incorrect because psychodynamic therapy, play therapy, and solution-focused brief therapy are less effective for OCD symptoms.

146. **b) Teaching relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Relaxation techniques, such as deep breathing, reduce excessive worry in GAD. Options a, c, and d are incorrect because prescribing medication is outside a counselor's scope, avoidance worsens anxiety, and childhood trauma may not be the primary focus.

147. **b) Persistent feelings of hopelessness** – Immediately, with the goal of resolution and improved relationships – Hopelessness is a core symptom of major depressive disorder, impacting daily functioning. Options a, c, and d are incorrect because elevated mood, intrusive thoughts, and risk-taking are associated with other disorders, not depression.

148. **b) Addressing trauma-related symptoms** – Immediately, with the goal of resolution and improved relationships – Prioritizing trauma-related symptoms ensures effective treatment for PTSD. Options a, c, and d are incorrect because life goals, financial stressors, or academic performance are not the primary focus for PTSD.

149. **b) Hallucinations or delusions** – Immediately, with the goal of resolution and improved relationships – Hallucinations and delusions are hallmark symptoms of schizophrenia per DSM-5. Options a, c, and d are incorrect because low mood, worry, or compulsions describe other disorders.

150. **b) Use motivational interviewing** – Immediately, with the goal of resolution and improved relationships – Motivational interviewing addresses denial in substance use disorder by fostering self-motivation. Options a, c, and d are incorrect because confrontation, immediate detoxification, or ignoring substance use is less effective or harmful.

151. **b) Fear of abandonment and emotional instability** – Immediately, with the goal of resolution and improved relationships – These are key characteristics of borderline personality disorder. Options a, c, and d are incorrect because stable relationships, low energy, or need for control describe other conditions.

152. **b) Reducing fear in social interactions** – Immediately, with the goal of resolution and improved relationships – Reducing social fear is a primary goal for social anxiety disorder to improve functioning. Options a, c, and d are incorrect because avoidance, physical health, or childhood experiences are not the primary focus.

153. **b) Teaching mood stabilization techniques** – Immediately, with the goal of resolution and improved relationships – Mood stabilization techniques help manage mania in bipolar I disorder. Options a, c, and d are incorrect because encouraging high-energy activities, focusing on career goals, or ignoring symptoms risks escalation.

154. **b) Rapid heartbeat or shortness of breath** – Immediately, with the goal of resolution and improved relationships – These physical symptoms are common during panic attacks and should be addressed. Options a, c, and d are incorrect because low mood, fatigue, or organization are not panic attack symptoms.

155. **a) Addressing body image and eating behaviors** – Immediately, with the goal of resolution and improved relationships – Body image and eating behaviors are central to eating disorder treatment. Options b, c, and d are incorrect because academic performance, financial stressors, or ignoring symptoms are not relevant.

156. **b) Difficulty sustaining attention** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of ADHD in adults per DSM-5. Options a, c, and d are incorrect because low mood, flashbacks, or fear of abandonment describe other disorders.

157. **b) Tailoring interventions to sensory and social needs** – Immediately, with the goal of resolution and improved relationships – Adapting to sensory and social needs ensures effective treatment for ASD. Options a, c, and d are incorrect because ignoring challenges, focusing on academics, or using standard interventions neglects client needs.

158. **b) Using grounding techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques help manage dissociation in trauma clients. Options a, c, and d are incorrect because avoidance, unrelated events, or ignoring symptoms hinders recovery.

159. **b) Grandiose sense of self-importance** – Immediately, with the goal of resolution and improved relationships – This is a key feature of narcissistic personality disorder per DSM-5. Options a, c, and d are incorrect because empathy, low self-esteem, or emptiness describe other conditions.

160. **b) Developing a relapse prevention plan** – Immediately, with the goal of resolution and improved relationships – Relapse prevention is a key intervention for alcohol use disorder. Options a, c, and d are incorrect because encouraging alcohol use, focusing on finances, or ignoring history is harmful or irrelevant.

161. **a) Cognitive processing therapy (CPT)** – Immediately, with the goal of resolution and improved relationships – CPT is an evidence-based treatment for PTSD nightmares. Options b, c, and d are incorrect because solution-focused, play, or psychodynamic therapies are less effective for PTSD.

162. **b) Addressing underlying emotional distress** – Immediately, with the goal of resolution and improved relationships – Addressing emotional distress is critical for self-harm treatment. Options a, c, and d are incorrect because career goals, academic performance, or ignoring behaviors neglects the issue.

163. **b) Recurrent unexpected panic attacks** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of panic disorder per DSM-5. Options a, c, and d are incorrect because low mood, control, or emptiness describe other disorders.

164. **b) Adapting communication and interventions to client needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for developmental disabilities. Options a, c, and d are incorrect because ignoring history, focusing on finances, or standard interventions neglects client needs.

165. **b) Using cognitive-behavioral therapy (CBT)** – Immediately, with the goal of resolution and improved relationships – CBT effectively addresses obsessive thoughts in OCD. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring thoughts hinders treatment.

166. **b) Excessive worry about multiple events** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of GAD per DSM-5. Options a, c, and d are incorrect because hopelessness, intrusive memories, or impulsivity describe other disorders.

167. **b) Promoting abstinence or harm reduction** – Immediately, with the goal of resolution and improved relationships – These are key goals for substance use disorder treatment. Options a, c, and d are incorrect because encouraging use, focusing on academics, or ignoring history is harmful or irrelevant.

168. **b) Using behavioral activation techniques** – Immediately, with the goal of resolution and improved relationships – Behavioral activation addresses low motivation in depression. Options a, c, and d are incorrect because isolation, financial focus, or ignoring motivation hinders recovery.

169. **b) Avoidance of trauma-related stimuli** – Immediately, with the goal of resolution and improved relationships – Avoidance is a core PTSD symptom per DSM-5. Options a, c, and d are incorrect because control, low energy, or panic attacks describe other disorders.

170. **a) Addressing maladaptive patterns of behavior** – Immediately, with the goal of resolution and improved relationships – Addressing maladaptive patterns is central to personality disorder treatment. Options b, c, and d are incorrect because academic goals, avoidance, or ignoring distress are not effective.

171. **b) Teaching organizational strategies** – Immediately, with the goal of resolution and improved relationships – Organizational strategies help manage ADHD symptoms. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring challenges is ineffective.

172. **b) Exposure therapy** – Immediately, with the goal of resolution and improved relationships – Exposure therapy is the evidence-based treatment for phobias. Options a, c, and d are incorrect because psychodynamic, play, or narrative therapies are less effective for phobias.

173. **b) Address hypervigilance with trauma-focused interventions** – Immediately, with the goal of resolution and improved relationships – Trauma-focused interventions reduce hypervigilance in PTSD. Options a, c, and d are incorrect because ignoring, unrelated goals, or avoidance hinders recovery.

174. **b) Assessing co-occurring mental health conditions** – Immediately, with the goal of resolution and improved relationships – Co-occurring conditions are common in substance use disorders and require assessment. Options a, c, and d are incorrect because ignoring history, focusing on physical health, or encouraging use is harmful.

175. **b) Hypomanic episodes and depressive episodes** – Immediately, with the goal of resolution and improved relationships – These are core symptoms of bipolar II disorder per DSM-5. Options a, c, and d are incorrect because low mood, intrusive thoughts, or social fear describe other disorders.

176. **b) Using gradual exposure techniques** – Immediately, with the goal of resolution and improved relationships – Gradual exposure reduces fear in social anxiety, such as public speaking. Options a, c, and d are incorrect because avoidance, academic focus, or ignoring fear hinders progress.

177. **b) Reducing anxiety symptoms and improving coping skills** – Immediately, with the goal of resolution and improved relationships – This is the primary goal for anxiety disorder treatment. Options a, c, and d are incorrect because eliminating stress, financial focus, or ignoring symptoms is unrealistic or ineffective.

178. **b) Addressing binge eating patterns with CBT** – Immediately, with the goal of resolution and improved relationships – CBT is effective for binge eating in eating disorders. Options a, c, and d are incorrect because restrictive eating, academic focus, or ignoring behaviors is harmful or irrelevant.

179. **b) Presence of two or more distinct identities** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of dissociative identity disorder per DSM-5. Options a, c, and d are incorrect because low mood, worry, or panic attacks describe other disorders.

180. **b) Tailoring interventions to developmental needs** – Immediately, with the goal of resolution and improved relationships – Adapting interventions ensures effective care for developmental disorders. Options a, c, and d are incorrect because ignoring history, financial focus, or standard interventions neglects client needs.

181. **b) Eye movement desensitization and reprocessing (EMDR)** – Immediately, with the goal of resolution and improved relationships – EMDR is an evidence-based treatment for PTSD flashbacks. Options a, c, and d are incorrect because solution-focused, play, or psychodynamic therapies are less effective.

182. **b) Preoccupation with orderliness and perfectionism** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of obsessive-compulsive personality disorder per DSM-5. Options a, c, and d are incorrect because flexibility, intrusive memories, or hopelessness describe other conditions.

183. **b) Supporting relapse prevention strategies** – Immediately, with the goal of resolution and improved relationships – Relapse prevention is critical for substance use disorder recovery. Options a, c, and d are incorrect because encouraging use, academic focus, or ignoring recovery is harmful or irrelevant.

184. **a) Addressing cognitive distortions and low mood** – Immediately, with the goal of resolution and improved relationships – Addressing cognitive distortions and low mood is central to depression treatment. Options b, c, and d are incorrect because financial focus, isolation, or ignoring symptoms hinders recovery.

185. **b) Using systematic desensitization** – Immediately, with the goal of resolution and improved relationships – Systematic desensitization effectively reduces phobia-related fear. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring the phobia hinders progress.

186. **b) Psychotic symptoms with mood episodes** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of schizoaffective disorder per DSM-5. Options a, c, and d are incorrect because low mood, worry, or compulsions describe other disorders.

187. **b) Using trauma-informed care principles** – Immediately, with the goal of resolution and improved relationships – Trauma-informed care ensures safe, effective treatment for trauma clients. Options a, c, and d are incorrect because ignoring trauma, academic focus, or avoidance is harmful or ineffective.

188. **b) Teaching impulse control strategies** – Immediately, with the goal of resolution and improved relationships – Impulse control strategies help manage ADHD symptoms. Options a, c, and d are incorrect because encouraging impulsivity, financial focus, or ignoring symptoms is ineffective.

189. **b) Restlessness or feeling on edge** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of GAD per DSM-5. Options a, c, and d are incorrect because low mood, intrusive memories, or impulsivity describe other disorders.

190. **b) Using dialectical behavior therapy (DBT)** – Immediately, with the goal of resolution and improved relationships – DBT is an evidence-based treatment for BPD's unstable relationships. Options a, c, and d are incorrect because isolation, academic focus, or ignoring issues is ineffective or harmful.

191. **b) Supporting recovery and relapse prevention** – Immediately, with the goal of resolution and improved relationships – Recovery and relapse prevention are key goals for substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring history is harmful or irrelevant.

192. **b) Addressing sleep hygiene and depressive symptoms** – Immediately, with the goal of resolution and improved relationships – Addressing sleep disturbances is critical for depression treatment. Options a, c, and d are incorrect because irregular sleep, financial focus, or ignoring issues hinders recovery.

193. **b) Fear of recurrent panic attacks** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of panic disorder per DSM-5. Options a, c, and d are incorrect because low mood, control, or emptiness describe other disorders.

194. **b) Adapting interventions to sensory and communication needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for ASD. Options a, c, and d are incorrect because ignoring sensitivities, financial focus, or standard interventions neglects client needs.

195. **b) Using trauma-focused cognitive-behavioral therapy** – Immediately, with the goal of resolution and improved relationships – Trauma-focused CBT addresses avoidance behaviors in PTSD. Options a, c, and d are incorrect because encouraging avoidance, financial focus, or ignoring behaviors hinders recovery.

196. **b) Disregard for the rights of others** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of antisocial personality disorder per DSM-5. Options a, c, and d are incorrect because empathy, low self-esteem, or hopelessness describe other conditions.

197. **b) Addressing purging with CBT or nutritional counseling** – Immediately, with the goal of resolution and improved relationships – CBT and nutritional counseling address purging in eating disorders. Options a, c, and d are incorrect because restrictive eating, academic focus, or ignoring behaviors is harmful or irrelevant.

198. **b) Teaching coping strategies for anxiety symptoms** – Immediately, with the goal of resolution and improved relationships – Coping strategies reduce anxiety and improve functioning. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms is ineffective.

199. **b) Using mood stabilization and psychoeducation** – Immediately, with the goal of resolution and improved relationships – Mood stabilization and psychoeducation manage depressive episodes in bipolar disorder. Options a, c, and d are incorrect because high-energy activities, career focus, or ignoring symptoms risks escalation.

200. **b) Difficulty making decisions without reassurance** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of dependent personality disorder per DSM-5. Options a, c, and d are incorrect because independence, intrusive thoughts, or emptiness describe other conditions.

201. **b) Using grounding and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques manage hyperarousal in PTSD. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms hinders recovery.

202. **b) Adapting interventions to cognitive and developmental needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for developmental disabilities. Options a, c, and d are incorrect because ignoring history, academic focus, or standard interventions neglects client needs.

203. **b) Using exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is the evidence-based treatment for OCD compulsive checking. Options a, c, and d are incorrect because encouraging checking, unrelated goals, or ignoring behaviors hinders progress.

204. **b) Loss of interest in pleasurable activities** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of major depressive disorder per DSM-5. Options a, c, and d are incorrect because elevated mood, intrusive thoughts, or risk-taking describe other disorders.

205. **b) Teaching coping strategies for cravings** – Immediately, with the goal of resolution and improved relationships – Coping strategies help manage cravings in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring cravings is harmful or ineffective.

206. **b) Reducing fear and improving social confidence** – Immediately, with the goal of resolution and improved relationships – Reducing fear is a primary goal for social anxiety treatment. Options a, c, and d are incorrect because avoidance, academic focus, or ignoring symptoms hinders progress.

207. **b) Detachment from social relationships** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of schizoid personality disorder per DSM-5. Options a, c, and d are incorrect because social interaction, low mood, or panic attacks describe other conditions.

208. **b) Using trauma-focused therapy to process emotions** – Immediately, with the goal of resolution and improved relationships – Trauma-focused therapy addresses emotional numbness in trauma clients. Options a, c, and d are incorrect because avoidance, career focus, or ignoring numbness hinders recovery.

209. **b) Teaching strategies for focus and organization** – Immediately, with the goal of resolution and improved relationships – These strategies help manage ADHD symptoms. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring symptoms is ineffective.

210. **b) Difficulty concentrating due to worry** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of GAD per DSM-5. Options a, c, and d are incorrect because low mood, intrusive memories, or impulsivity describe other disorders.

211. **b) Using dialectical behavior therapy (DBT)** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD self-harm. Options a, c, and d are incorrect because encouraging self-harm, academic focus, or ignoring behaviors is harmful or ineffective.

212. **b) Supporting recovery and relapse prevention** – Immediately, with the goal of resolution and improved relationships – Recovery and relapse prevention are key goals for substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring history is harmful or irrelevant.

213. **b) Conducting a suicide risk assessment and safety planning** – Immediately, with the goal of resolution and improved relationships – Assessing risk and creating a safety plan ensures client safety in depression. Options a, c, and d are incorrect because isolation, career focus, or ignoring suicidal thoughts risks harm.

214. **b) Physical symptoms during panic attacks** – Immediately, with the goal of resolution and improved relationships – Physical symptoms are core to panic disorder per DSM-5. Options a, c, and d are incorrect because low mood, control, or emptiness describe other disorders.

215. **b) Adapting interventions to sensory and communication needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for ASD. Options a, c, and d are incorrect because ignoring sensitivities, financial focus, or standard interventions neglects client needs.

216. **b) Using imagery rehearsal therapy** – Immediately, with the goal of resolution and improved relationships – Imagery rehearsal therapy is effective for PTSD nightmares. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring nightmares hinders recovery.

217. **b) Fear of rejection and social avoidance** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of avoidant personality disorder per DSM-5. Options a, c, and d are incorrect because confidence, intrusive thoughts, or hopelessness describe other conditions.

218. **b) Addressing eating patterns with nutritional counseling** – Immediately, with the goal of resolution and improved relationships – Nutritional counseling and CBT address restrictive eating in eating disorders. Options a, c, and d are incorrect because encouraging restriction, academic focus, or ignoring behaviors is harmful or irrelevant.

219. **b) Teaching coping strategies for anxiety symptoms** – Immediately, with the goal of resolution and improved relationships – Coping strategies reduce anxiety and improve functioning. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms is ineffective.

220. **b) Using mood stabilization techniques** – Immediately, with the goal of resolution and improved relationships – Mood stabilization manages manic episodes in bipolar disorder. Options a, c, and d are incorrect because high-energy activities, career focus, or ignoring symptoms risks escalation.

221. **b) Need for excessive admiration** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of narcissistic personality disorder per DSM-5. Options a, c, and d are incorrect because empathy, low self-esteem, or emptiness describe other conditions.

222. **b) Using trauma-focused cognitive-behavioral therapy** – Immediately, with the goal of resolution and improved relationships – Trauma-focused CBT addresses avoidance in PTSD. Options a, c, and d are incorrect because encouraging avoidance, financial focus, or ignoring behaviors hinders recovery.

223. **b) Adapting interventions to cognitive and developmental needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for developmental disabilities. Options a, c, and d are incorrect because ignoring history, academic focus, or standard interventions neglects client needs.

224. **b) Using exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD intrusive thoughts. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring thoughts hinders progress.

225. **b) Fatigue or loss of energy** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of major depressive disorder per DSM-5. Options a, c, and d are incorrect because elevated mood, intrusive thoughts, or risk-taking describe other disorders.

226. **b) Revising the relapse prevention plan** – Immediately, with the goal of resolution and improved relationships – Revising the plan addresses relapse in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring relapse is harmful or ineffective.

227. **b) Improving social confidence and skills** – Immediately, with the goal of resolution and improved relationships – Improving social confidence is a primary goal for social anxiety. Options a, c, and d are incorrect because avoidance, academic focus, or ignoring symptoms hinders progress.

228. **b) Odd beliefs or magical thinking** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of schizotypal personality disorder per DSM-5. Options a, c, and d are incorrect because social interaction, low mood, or panic attacks describe other conditions.

229. **b) Using grounding and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques manage hypervigilance in PTSD. Options a, c, and d are incorrect because avoidance, career focus, or ignoring symptoms hinders recovery.

230. **b) Teaching strategies for focus and organization** – Immediately, with the goal of resolution and improved relationships – These strategies help manage ADHD symptoms. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring symptoms is ineffective.

231. **b) Muscle tension due to worry** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of GAD per DSM-5. Options a, c, and d are incorrect because low mood, intrusive memories, or impulsivity describe other disorders.

232. **b) Using dialectical behavior therapy (DBT)** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD emotional dysregulation. Options a, c, and d are incorrect because suppression, academic focus, or ignoring dysregulation is ineffective or harmful.

233. **b) Supporting recovery and relapse prevention** – Immediately, with the goal of resolution and improved relationships – Recovery and relapse prevention are key goals for substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring history is harmful or irrelevant.

234. **b) Addressing cognitive distortions with CBT** – Immediately, with the goal of resolution and improved relationships – CBT addresses low self-esteem in depression. Options a, c, and d are incorrect because isolation, career focus, or ignoring self-esteem hinders recovery.

235. **b) Derealization during panic attacks** – Immediately, with the goal of resolution and improved relationships – Derealization is a core symptom of panic disorder per DSM-5. Options a, c, and d are incorrect because low mood, control, or emptiness describe other disorders.

236. **b) Adapting interventions to sensory and communication needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for ASD. Options a, c, and d are incorrect because ignoring sensitivities, financial focus, or standard interventions neglects client needs.

237. **b) Using eye movement desensitization and reprocessing (EMDR)** – Immediately, with the goal of resolution and improved relationships – EMDR is evidence-based for PTSD flashbacks. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring flashbacks hinders recovery.

238. **b) Hypersensitivity to criticism** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of avoidant personality disorder per DSM-5. Options a, c, and d are incorrect because confidence, intrusive thoughts, or hopelessness describe other conditions.

239. **b) Addressing body image with CBT** – Immediately, with the goal of resolution and improved relationships – CBT addresses body dissatisfaction in eating disorders. Options a, c, and d are incorrect because restrictive eating, academic focus, or ignoring dissatisfaction is harmful or irrelevant.

240. **b) Teaching coping strategies for anxiety symptoms** – Immediately, with the goal of resolution and improved relationships – Coping strategies reduce anxiety and improve

functioning. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms is ineffective.

241. **b) Using mood stabilization techniques** – Immediately, with the goal of resolution and improved relationships – Mood stabilization manages hypomanic episodes in bipolar disorder. Options a, c, and d are incorrect because high-energy activities, career focus, or ignoring symptoms risks escalation.

242. **b) Lack of empathy for others** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of narcissistic personality disorder per DSM-5. Options a, c, and d are incorrect because empathy, low self-esteem, or emptiness describe other conditions.

243. **b) Using trauma-focused cognitive-behavioral therapy** – Immediately, with the goal of resolution and improved relationships – Trauma-focused CBT addresses intrusive memories in PTSD. Options a, c, and d are incorrect because encouraging avoidance, financial focus, or ignoring memories hinders recovery.

244. **b) Adapting interventions to cognitive and developmental needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for developmental disabilities. Options a, c, and d are incorrect because ignoring history, academic focus, or standard interventions neglects client needs.

245. **b) Using exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD compulsive rituals. Options a, c, and d are incorrect because encouraging rituals, unrelated goals, or ignoring behaviors hinders progress.

246. **b) Significant weight loss or gain** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of major depressive disorder per DSM-5. Options a, c, and d are incorrect because elevated mood, intrusive thoughts, or risk-taking describe other disorders.

247. **b) Addressing isolation with social skills training** – Immediately, with the goal of resolution and improved relationships – Social skills training addresses isolation in substance use disorder. Options a, c, and d are incorrect because encouraging isolation, financial focus, or ignoring isolation is harmful or ineffective.

248. **b) Improving social confidence and skills** – Immediately, with the goal of resolution and improved relationships – Improving social confidence is a primary goal for social anxiety. Options a, c, and d are incorrect because avoidance, academic focus, or ignoring symptoms hinders progress.

249. **b) Lack of desire for close relationships** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of schizoid personality disorder per DSM-5.

Options a, c, and d are incorrect because social interaction, low mood, or panic attacks describe other conditions.

250. **b) Using trauma-focused therapy to process emotions** – Immediately, with the goal of resolution and improved relationships – Trauma-focused therapy addresses emotional numbness in trauma clients. Options a, c, and d are incorrect because avoidance, career focus, or ignoring numbness hinders recovery.

251. **b) Teaching strategies for focus and organization** – Immediately, with the goal of resolution and improved relationships – These strategies help manage ADHD symptoms. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring symptoms is ineffective.

252. **b) Irritability due to excessive worry** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of GAD per DSM-5. Options a, c, and d are incorrect because low mood, intrusive memories, or impulsivity describe other disorders.

253. **b) Using dialectical behavior therapy (DBT)** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD impulsivity. Options a, c, and d are incorrect because encouraging impulsivity, academic focus, or ignoring behaviors is harmful or ineffective.

254. **b) Supporting recovery and relapse prevention** – Immediately, with the goal of resolution and improved relationships – Recovery and relapse prevention are key goals for substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring history is harmful or irrelevant.

255. **b) Addressing concentration with cognitive-behavioral therapy** – Immediately, with the goal of resolution and improved relationships – CBT addresses concentration difficulties in depression. Options a, c, and d are incorrect because isolation, career focus, or ignoring difficulties hinders recovery.

256. **b) Fear of losing control during panic attacks** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of panic disorder per DSM-5. Options a, c, and d are incorrect because low mood, control, or emptiness describe other disorders.

257. **b) Adapting interventions to sensory and communication needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for ASD. Options a, c, and d are incorrect because ignoring sensitivities, financial focus, or standard interventions neglects client needs.

258. **b) Using grounding and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques manage hyperarousal in PTSD. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring symptoms hinders recovery.

259. **b) Social inhibition due to fear of rejection** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of avoidant personality disorder per DSM-5. Options a, c, and d are incorrect because confidence, intrusive thoughts, or hopelessness describe other conditions.

260. **b) Addressing binge eating with CBT** – Immediately, with the goal of resolution and improved relationships – CBT is effective for binge eating in eating disorders. Options a, c, and d are incorrect because restrictive eating, academic focus, or ignoring behaviors is harmful or irrelevant.

261. **b) Teaching coping strategies for anxiety symptoms** – Immediately, with the goal of resolution and improved relationships – Coping strategies reduce anxiety and improve functioning. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms is ineffective.

262. **b) Using mood stabilization and psychoeducation** – Immediately, with the goal of resolution and improved relationships – Mood stabilization and psychoeducation manage depressive episodes in bipolar disorder. Options a, c, and d are incorrect because high-energy activities, career focus, or ignoring symptoms risks escalation.

263. **b) Exaggerated sense of self-importance** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of narcissistic personality disorder per DSM-5. Options a, c, and d are incorrect because empathy, low self-esteem, or emptiness describe other conditions.

264. **b) Using imagery rehearsal therapy** – Immediately, with the goal of resolution and improved relationships – Imagery rehearsal therapy is effective for PTSD nightmares. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring nightmares hinders recovery.

265. **b) Adapting interventions to cognitive and developmental needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for developmental disabilities. Options a, c, and d are incorrect because ignoring history, academic focus, or standard interventions neglects client needs.

266. **b) Using exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD compulsive checking. Options a, c, and d are incorrect because encouraging checking, unrelated goals, or ignoring behaviors hinders progress.

267. **b) Feelings of worthlessness or guilt** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of major depressive disorder per DSM-5. Options a, c, and d are incorrect because elevated mood, intrusive thoughts, or risk-taking describe other disorders.

268. **b) Teaching coping strategies for cravings** – Immediately, with the goal of resolution and improved relationships – Coping strategies help manage cravings in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring cravings is harmful or ineffective.

269. **b) Improving social confidence and skills** – Immediately, with the goal of resolution and improved relationships – Improving social confidence is a primary goal for social anxiety. Options a, c, and d are incorrect because avoidance, academic focus, or ignoring symptoms hinders progress.

270. **b) Eccentric behavior and odd beliefs** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of schizotypal personality disorder per DSM-5. Options a, c, and d are incorrect because social interaction, low mood, or panic attacks describe other conditions.

271. **b) Using trauma-focused therapy to process emotions** – Immediately, with the goal of resolution and improved relationships – Trauma-focused therapy addresses emotional numbness in trauma clients. Options a, c, and d are incorrect because avoidance, career focus, or ignoring numbness hinders recovery.

272. **b) Teaching strategies for focus and organization** – Immediately, with the goal of resolution and improved relationships – These strategies help manage ADHD symptoms. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring symptoms is ineffective.

273. **b) Sleep disturbances due to worry** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of GAD per DSM-5. Options a, c, and d are incorrect because low mood, intrusive memories, or impulsivity describe other disorders.

274. **b) Using dialectical behavior therapy (DBT)** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD's unstable relationships. Options a, c, and d are incorrect because isolation, academic focus, or ignoring issues is ineffective or harmful.

275. **b) Supporting recovery and relapse prevention** – Immediately, with the goal of resolution and improved relationships – Recovery and relapse prevention are key goals for substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring history is harmful or irrelevant.

276. **b) Using behavioral activation techniques** – Immediately, with the goal of resolution and improved relationships – Behavioral activation addresses low motivation in depression. Options a, c, and d are incorrect because isolation, career focus, or ignoring motivation hinders recovery.

277. **b) Physical symptoms during panic attacks** – Immediately, with the goal of resolution and improved relationships – Physical symptoms are core to panic disorder per DSM-5. Options a, c, and d are incorrect because low mood, control, or emptiness describe other disorders.

278. **b) Adapting interventions to sensory and communication needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for ASD. Options a, c, and d are incorrect because ignoring sensitivities, financial focus, or standard interventions neglects client needs.

279. **b) Using eye movement desensitization and reprocessing (EMDR)** – Immediately, with the goal of resolution and improved relationships – EMDR is evidence-based for PTSD flashbacks. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring flashbacks hinders recovery.

280. **b) Reluctance to engage due to fear of criticism** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of avoidant personality disorder per DSM-5. Options a, c, and d are incorrect because confidence, intrusive thoughts, or hopelessness describe other conditions.

281. **b) Addressing body image with CBT** – Immediately, with the goal of resolution and improved relationships – CBT addresses body dissatisfaction in eating disorders. Options a, c, and d are incorrect because restrictive eating, academic focus, or ignoring dissatisfaction is harmful or irrelevant.

282. **b) Teaching coping strategies for anxiety symptoms** – Immediately, with the goal of resolution and improved relationships – Coping strategies reduce anxiety and improve functioning. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms is ineffective.

283. **b) Using mood stabilization techniques** – Immediately, with the goal of resolution and improved relationships – Mood stabilization manages hypomanic episodes in bipolar disorder. Options a, c, and d are incorrect because high-energy activities, career focus, or ignoring symptoms risks escalation.

284. **b) Arrogant or haughty behaviors** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of narcissistic personality disorder per DSM-5. Options a, c, and d are incorrect because empathy, low self-esteem, or emptiness describe other conditions.

285. **b) Using trauma-focused cognitive-behavioral therapy** – Immediately, with the goal of resolution and improved relationships – Trauma-focused CBT addresses intrusive memories in PTSD. Options a, c, and d are incorrect because encouraging avoidance, financial focus, or ignoring memories hinders recovery.

286.	**b) Adapting interventions to cognitive and developmental needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for developmental disabilities. Options a, c, and d are incorrect because ignoring history, academic focus, or standard interventions neglects client needs.

287.	**b) Using exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD compulsive rituals. Options a, c, and d are incorrect because encouraging rituals, unrelated goals, or ignoring behaviors hinders progress.

288.	**b) Difficulty concentrating** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of major depressive disorder per DSM-5. Options a, c, and d are incorrect because elevated mood, intrusive thoughts, or risk-taking describe other disorders.

289.	**b) Addressing isolation with social skills training** – Immediately, with the goal of resolution and improved relationships – Social skills training addresses isolation in substance use disorder. Options a, c, and d are incorrect because encouraging isolation, financial focus, or ignoring isolation is harmful or ineffective.

290.	**b) Improving social confidence and skills** – Immediately, with the goal of resolution and improved relationships – Improving social confidence is a primary goal for social anxiety. Options a, c, and d are incorrect because avoidance, academic focus, or ignoring symptoms hinders progress.

291.	**b) Emotional coldness and detachment** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of schizoid personality disorder per DSM-5. Options a, c, and d are incorrect because social interaction, low mood, or panic attacks describe other conditions.

292.	**b) Using grounding and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques manage hypervigilance in PTSD. Options a, c, and d are incorrect because avoidance, career focus, or ignoring symptoms hinders recovery.

293.	**b) Teaching strategies for focus and organization** – Immediately, with the goal of resolution and improved relationships – These strategies help manage ADHD symptoms. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring symptoms is ineffective.

294.	**b) Fatigue due to excessive worry** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of GAD per DSM-5. Options a, c, and d are incorrect because low mood, intrusive memories, or impulsivity describe other disorders.

295. **b) Using dialectical behavior therapy (DBT)** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD self-harm. Options a, c, and d are incorrect because encouraging self-harm, academic focus, or ignoring behaviors is harmful or ineffective.

296. **b) Supporting recovery and relapse prevention** – Immediately, with the goal of resolution and improved relationships – Recovery and relapse prevention are key goals for substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring history is harmful or irrelevant.

297. **b) Conducting a suicide risk assessment and safety planning** – Immediately, with the goal of resolution and improved relationships – Assessing risk and creating a safety plan ensures client safety in depression. Options a, c, and d are incorrect because isolation, career focus, or ignoring suicidal thoughts risks harm.

298. **b) Chest pain during panic attacks** – Immediately, with the goal of resolution and improved relationships – Chest pain is a core symptom of panic disorder per DSM-5. Options a, c, and d are incorrect because low mood, control, or emptiness describe other disorders.

299. **b) Adapting interventions to sensory and communication needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for ASD. Options a, c, and d are incorrect because ignoring sensitivities, financial focus, or standard interventions neglects client needs.

300. **b) Using imagery rehearsal therapy** – Immediately, with the goal of resolution and improved relationships – Imagery rehearsal therapy is effective for PTSD nightmares. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring nightmares hinders recovery.

301. **b) Fear of disapproval and social avoidance** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of avoidant personality disorder per DSM-5. Options a, c, and d are incorrect because confidence, intrusive thoughts, or hopelessness describe other conditions.

302. **b) Addressing eating patterns with nutritional counseling** – Immediately, with the goal of resolution and improved relationships – Nutritional counseling and CBT address restrictive eating in eating disorders. Options a, c, and d are incorrect because encouraging restriction, academic focus, or ignoring behaviors is harmful or irrelevant.

303. **b) Teaching coping strategies for anxiety symptoms** – Immediately, with the goal of resolution and improved relationships – Coping strategies reduce anxiety and improve functioning. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms is ineffective.

304. **b) Using mood stabilization techniques** – Immediately, with the goal of resolution and improved relationships – Mood stabilization manages manic episodes in bipolar disorder. Options a, c, and d are incorrect because high-energy activities, career focus, or ignoring symptoms risks escalation.

305. **b) Envy of others or belief others envy them** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of narcissistic personality disorder per DSM-5. Options a, c, and d are incorrect because empathy, low self-esteem, or emptiness describe other conditions.

306. **b) Using trauma-focused cognitive-behavioral therapy** – Immediately, with the goal of resolution and improved relationships – Trauma-focused CBT addresses avoidance in PTSD. Options a, c, and d are incorrect because encouraging avoidance, financial focus, or ignoring behaviors hinders recovery.

307. **b) Adapting interventions to cognitive and developmental needs** – Immediately, with the goal of resolution and improved relationships – Tailoring interventions ensures effective care for developmental disabilities. Options a, c, and d are incorrect because ignoring history, academic focus, or standard interventions neglects client needs.

308. **b) Using exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD intrusive thoughts. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring thoughts hinders progress.

309. **b) Recurrent thoughts of death** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of major depressive disorder per DSM-5. Options a, c, and d are incorrect because elevated mood, intrusive thoughts, or risk-taking describe other disorders.

310. **b) Revising the relapse prevention plan** – Immediately, with the goal of resolution and improved relationships – Revising the plan addresses relapse in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring relapse is harmful or ineffective.

311. **b) Improving social confidence and skills** – Immediately, with the goal of resolution and improved relationships – Improving social confidence is a primary goal for social anxiety. Options a, c, and d are incorrect because avoidance, academic focus, or ignoring symptoms hinders progress.

312. **b) Social anxiety with paranoid ideation** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of schizotypal personality disorder per DSM-5. Options a, c, and d are incorrect because social interaction, low mood, or panic attacks describe other conditions.

313.   **b) Using grounding and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques manage hypervigilance in PTSD. Options a, c, and d are incorrect because avoidance, career focus, or ignoring symptoms hinders recovery.

314.   **b) Teaching strategies for focus and organization** – Immediately, with the goal of resolution and improved relationships – These strategies help manage ADHD symptoms. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring symptoms is ineffective.

315.   **b) Excessive worry about health or safety** – Immediately, with the goal of resolution and improved relationships – This is a core symptom of GAD per DSM-5. Options a, c, and d are incorrect because low mood, intrusive memories, or impulsivity describe other disorders.

316.   **b) Using dialectical behavior therapy (DBT)** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD emotional dysregulation. Options a, c, and d are incorrect because suppression, academic focus, or ignoring dysregulation is ineffective or harmful.

317.   **b) Supporting recovery and relapse prevention** – Immediately, with the goal of resolution and improved relationships – Recovery and relapse prevention are key goals for substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring history is harmful or irrelevant.

318.   **b) Addressing cognitive distortions with CBT** – Immediately, with the goal of resolution and improved relationships – CBT addresses low self-esteem in depression. Options a, c, and d are incorrect because isolation, career focus, or ignoring self-esteem hinders recovery.

319.   **b) To outline measurable goals and interventions** – Immediately, with the goal of resolution and improved relationships – A treatment plan provides a structured roadmap with measurable goals and evidence-based interventions to guide therapy. Options a, c, and d are incorrect because assigning diagnoses without input, focusing on finances, or prioritizing the counselor's approach violates client-centered principles.

320.   **b) Specific, measurable objectives** – Immediately, with the goal of resolution and improved relationships – Measurable objectives ensure the treatment plan is clear and trackable, promoting effective therapy. Options a, c, and d are incorrect because academic history, counselor goals, or social media activity are not core components of a treatment plan.

321.   **b) Addressing depressive symptoms and coping strategies** – Immediately, with the goal of resolution and improved relationships – Prioritizing depressive symptoms and coping strategies ensures targeted treatment for depression. Options a, c, and d are incorrect because unrealistic goals, financial focus, or ignoring preferences hinder effective planning.

322. **b) Incorporating cognitive-behavioral therapy (CBT)** – Immediately, with the goal of resolution and improved relationships – CBT is an evidence-based, non-medication intervention for GAD, respecting client preferences. Options a, c, and d are incorrect because prescribing medication, academic focus, or avoiding interventions disregards client needs or scope of practice.

323. **b) Collaborating with the client to set goals** – Immediately, with the goal of resolution and improved relationships – Collaboration ensures the plan is client-centered, promoting engagement and efficacy. Options a, c, and d are incorrect because excluding the client, using standardized plans, or prioritizing counselor expertise violates ethical standards.

324. **b) Ensuring goals align with client values and needs** – Immediately, with the goal of resolution and improved relationships – Ethical treatment planning respects client values and needs for effective outcomes. Options a, c, and d are incorrect because lack of consent, prioritizing reimbursement, or ignoring cultural background violates ethical principles.

325. **b) Evidence-based approaches like EMDR or CPT** – Immediately, with the goal of resolution and improved relationships – EMDR and CPT are evidence-based for PTSD, aligning with the client's request. Options a, c, and d are incorrect because avoiding trauma interventions, career focus, or ignoring the request hinders recovery.

326. **b) Periodically, based on client progress** – Immediately, with the goal of resolution and improved relationships – Regular review ensures the plan remains relevant to client progress. Options a, c, and d are incorrect because never reviewing, limiting to initial creation, or tying to insurance neglects client needs.

327. **b) Revising relapse prevention strategies** – Immediately, with the goal of resolution and improved relationships – Revising strategies addresses relapse and supports recovery in substance use disorder. Options a, c, and d are incorrect because ignoring relapse, financial focus, or encouraging use is harmful or ineffective.

328. **b) Reduce panic attacks to once per month** – Immediately, with the goal of resolution and improved relationships – This is a specific, measurable goal for anxiety, promoting trackable progress. Options a, c, and d are incorrect because vague goals like "feel better" or eliminating all stress are not measurable or realistic.

329. **b) Incorporating dialectical behavior therapy (DBT)** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD, addressing emotional instability. Options a, c, and d are incorrect because avoiding strategies, academic focus, or ignoring instability hinders treatment.

330. **b) Integrating client's cultural values and beliefs** – Immediately, with the goal of resolution and improved relationships – Cultural competence ensures the plan is relevant and

respectful, enhancing outcomes. Options a, c, and d are incorrect because uniform plans, ignoring culture, or imposing the counselor's framework disregards client needs.

331. **b) Exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD compulsive behaviors. Options a, c, and d are incorrect because encouraging compulsions, unrelated goals, or ignoring behaviors hinders progress.

332. **b) Selecting interventions based on empirical evidence** – Immediately, with the goal of resolution and improved relationships – Evidence-based interventions ensure effective, ethical treatment planning. Options a, c, and d are incorrect because unsupported interventions, intuition alone, or ignoring preferences violate standards.

333. **b) Delivering a presentation with reduced anxiety** – Immediately, with the goal of resolution and improved relationships – This measurable goal targets social anxiety in public speaking. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring fears hinders progress.

334. **b) Strategies for improving focus and organization** – Immediately, with the goal of resolution and improved relationships – These strategies address core ADHD symptoms, enhancing functioning. Options a, c, and d are incorrect because encouraging disorganization, career focus, or ignoring symptoms is ineffective.

335. **b) Using trauma-informed care principles** – Immediately, with the goal of resolution and improved relationships – Trauma-informed care creates a safe environment for trauma clients. Options a, c, and d are incorrect because ignoring trauma, academic focus, or avoiding collaboration hinders recovery.

336. **b) Reduce depressive symptoms by 50% in 8 weeks** – Immediately, with the goal of resolution and improved relationships – This is a SMART (Specific, Measurable, Achievable, Relevant, Time-bound) goal for depression. Options a, c, and d are incorrect because vague or unrealistic goals are not trackable or effective.

337. **b) Nutritional counseling and CBT** – Immediately, with the goal of resolution and improved relationships – These interventions address eating behaviors in eating disorders. Options a, c, and d are incorrect because encouraging restriction, financial focus, or ignoring behaviors is harmful or irrelevant.

338. **b) Mood stabilization and psychoeducation** – Immediately, with the goal of resolution and improved relationships – These interventions manage manic episodes in bipolar disorder. Options a, c, and d are incorrect because high-energy activities, career focus, or ignoring symptoms risks escalation.

339. **b) To provide support and improve outcomes** – Immediately, with the goal of resolution and improved relationships – Family involvement enhances support and treatment efficacy.

Options a, c, and d are incorrect because replacing client input, financial focus, or excluding the client violates ethical standards.

340. **b) Behavioral activation techniques** – Immediately, with the goal of resolution and improved relationships – Behavioral activation addresses low motivation in depression. Options a, c, and d are incorrect because isolation, academic focus, or ignoring motivation hinders recovery.

341. **b) Documenting goals and interventions clearly** – Immediately, with the goal of resolution and improved relationships – Clear documentation ensures ethical, trackable treatment planning. Options a, c, and d are incorrect because lack of consent, counselor convenience, or ignoring progress violates standards.

342. **b) Relapse prevention and coping strategies** – Immediately, with the goal of resolution and improved relationships – These strategies support recovery in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring recovery is harmful or ineffective.

343. **b) Tailoring interventions to sensory and communication needs** – Immediately, with the goal of resolution and improved relationships – Tailoring ensures effective care for ASD clients. Options a, c, and d are incorrect because ignoring sensitivities, academic focus, or standard interventions neglects client needs.

344. **b) CBT and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – These evidence-based interventions reduce panic attacks. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring panic attacks hinders progress.

345. **b) To ensure the plan aligns with client needs** – Immediately, with the goal of resolution and improved relationships – Client feedback ensures a client-centered, effective plan. Options a, c, and d are incorrect because ignoring preferences, counselor goals, or excluding input violates ethical standards.

346. **b) DBT and distress tolerance skills** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for self-harm, addressing coping needs. Options a, c, and d are incorrect because encouraging self-harm, career focus, or ignoring behaviors is harmful or ineffective.

347. **b) Trauma-focused therapies like EMDR** – Immediately, with the goal of resolution and improved relationships – EMDR is evidence-based for PTSD symptoms. Options a, c, and d are incorrect because avoiding trauma, financial focus, or ignoring symptoms hinders recovery.

348. **b) Body image and nutritional counseling** – Immediately, with the goal of resolution and improved relationships – These interventions address body dissatisfaction in eating disorders.

Options a, c, and d are incorrect because encouraging restriction, academic focus, or ignoring dissatisfaction is harmful or irrelevant.

349.   **b) To provide achievable steps toward recovery** – Immediately, with the goal of resolution and improved relationships – Short-term goals promote progress and motivation. Options a, c, and d are incorrect because overwhelming clients, unrelated goals, or replacing long-term goals is ineffective.

350.   **b) Gradual exposure and social skills training** – Immediately, with the goal of resolution and improved relationships – These interventions reduce social anxiety and improve functioning. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms hinders progress.

351.   **b) Ensuring client autonomy and collaboration** – Immediately, with the goal of resolution and improved relationships – Autonomy and collaboration are ethical principles in treatment planning. Options a, c, and d are incorrect because ignoring culture, using unproven interventions, or prioritizing insurance violates standards.

352.   **b) Mood stabilization and CBT** – Immediately, with the goal of resolution and improved relationships – These interventions manage depressive episodes in bipolar disorder. Options a, c, and d are incorrect because high-energy activities, career focus, or ignoring symptoms risks escalation.

353.   **b) Adapting interventions to cognitive needs** – Immediately, with the goal of resolution and improved relationships – Tailoring ensures effective care for developmental disabilities. Options a, c, and d are incorrect because ignoring history, academic focus, or standard interventions neglects client needs.

354.   **b) Exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD intrusive thoughts. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring thoughts hinders progress.

355.   **b) To track progress and evaluate effectiveness** – Immediately, with the goal of resolution and improved relationships – Measurable outcomes ensure the plan's effectiveness can be evaluated. Options a, c, and d are incorrect because vague plans, counselor preferences, or excluding input reduces efficacy.

356.   **b) Coping strategies for managing cravings** – Immediately, with the goal of resolution and improved relationships – Coping strategies support recovery in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring cravings is harmful or ineffective.

357.   **b) Suicide risk assessment and safety planning** – Immediately, with the goal of resolution and improved relationships – Assessing risk and planning ensures client safety in depression.

Options a, c, and d are incorrect because isolation, career focus, or ignoring suicidal thoughts risks harm.

358. **b) CBT and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – These evidence-based interventions reduce anxiety symptoms. Options a, c, and d are incorrect because avoidance, academic focus, or ignoring symptoms hinders progress.

359. **b) Grounding and trauma-focused interventions** – Immediately, with the goal of resolution and improved relationships – These interventions address hypervigilance in PTSD. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring symptoms hinders recovery.

360. **b) To provide comprehensive care and expertise** – Immediately, with the goal of resolution and improved relationships – A multidisciplinary team enhances treatment efficacy with diverse expertise. Options a, c, and d are incorrect because excluding clients, financial focus, or replacing the counselor's role is ineffective or unethical.

361. **b) CBT and nutritional counseling** – Immediately, with the goal of resolution and improved relationships – These interventions address binge eating in eating disorders. Options a, c, and d are incorrect because encouraging restriction, academic focus, or ignoring behaviors is harmful or irrelevant.

362. **b) Strategies for improving focus and organization** – Immediately, with the goal of resolution and improved relationships – These strategies address core ADHD symptoms, enhancing functioning. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring symptoms is ineffective.

363. **b) DBT and impulse control strategies** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD impulsivity. Options a, c, and d are incorrect because encouraging impulsivity, career focus, or ignoring behaviors is harmful or ineffective.

364. **b) Addressing co-occurring mental health conditions** – Immediately, with the goal of resolution and improved relationships – Co-occurring conditions are common in substance use disorders and require attention. Options a, c, and d are incorrect because ignoring history, academic focus, or encouraging use is harmful or ineffective.

365. **b) Gradual exposure and social skills training** – Immediately, with the goal of resolution and improved relationships – These interventions reduce public speaking fears in social anxiety. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring fears hinders progress.

366. **b) To leverage strengths for goal achievement** – Immediately, with the goal of resolution and improved relationships – Using client strengths enhances motivation and plan efficacy.

Options a, c, and d are incorrect because ignoring strengths, focusing on weaknesses, or excluding input reduces effectiveness.

367.   **b) CBT to address cognitive distortions** – Immediately, with the goal of resolution and improved relationships – CBT addresses low self-esteem in depression. Options a, c, and d are incorrect because isolation, academic focus, or ignoring self-esteem hinders recovery.

368.   **b) Tailoring interventions to sensory and communication needs** – Immediately, with the goal of resolution and improved relationships – Tailoring ensures effective care for ASD clients. Options a, c, and d are incorrect because ignoring sensitivities, financial focus, or standard interventions neglects client needs.

369.   **b) Imagery rehearsal therapy** – Immediately, with the goal of resolution and improved relationships – Imagery rehearsal therapy is effective for PTSD nightmares. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring nightmares hinders recovery.

370.   **b) To provide a clear roadmap for therapy** – Immediately, with the goal of resolution and improved relationships – Documentation ensures clarity and accountability in treatment. Options a, c, and d are incorrect because counselor preferences, excluding input, or prioritizing insurance reduces efficacy.

371.   **b) Relapse prevention and coping strategies** – Immediately, with the goal of resolution and improved relationships – These strategies support recovery in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring recovery is harmful or ineffective.

372.   **b) Evidence-based interventions like ERP** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD symptoms. Options a, c, and d are incorrect because encouraging compulsions, academic focus, or ignoring symptoms hinders progress.

373.   **b) To understand the client's perspective and emotions** – Immediately, with the goal of resolution and improved relationships – Active listening fosters empathy and builds trust by prioritizing the client's perspective. Options a, c, and d are incorrect because providing solutions, directing decisions, or focusing on the counselor's agenda undermines client-centered practice.

374.   **b) Reflect the client's feelings to validate them** – Immediately, with the goal of resolution and improved relationships – Reflecting validates the client's emotions, promoting trust and engagement. Options a, c, and d are incorrect because ignoring, avoiding, or suppressing emotions hinders therapeutic progress.

375.   **b) Displaying empathy and warmth** – Immediately, with the goal of resolution and improved relationships – Empathy and warmth build rapport, essential for a therapeutic

alliance. Options a, c, and d are incorrect because directive questioning, diagnostic focus, or neutrality may alienate the client.

376. **b) To encourage detailed exploration of thoughts** – Immediately, with the goal of resolution and improved relationships – Open-ended questions promote deeper client insight and engagement. Options a, c, and d are incorrect because limiting responses, confirming assumptions, or controlling the session restricts exploration.

377. **b) Teach grounding techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques help manage anxiety and racing thoughts effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring concerns exacerbates anxiety.

378. **b) Eliciting client motivation for change** – Immediately, with the goal of resolution and improved relationships – Motivational interviewing fosters client-driven change by exploring ambivalence. Options a, c, and d are incorrect because confrontation, directing decisions, or focusing on failures undermines motivation.

379. **b) Using reflective listening to validate emotions** – Immediately, with the goal of resolution and improved relationships – Reflective listening validates hopelessness, promoting trust in depression treatment. Options a, c, and d are incorrect because minimizing, advising quick fixes, or ignoring emotions hinders progress.

380. **b) Acknowledging the client's emotional experience** – Immediately, with the goal of resolution and improved relationships – Acknowledging emotions demonstrates empathy, strengthening the therapeutic alliance. Options a, c, and d are incorrect because unsolicited advice, diagnostic focus, or redirection alienates the client.

381. **b) Conduct a suicide risk assessment** – Immediately, with the goal of resolution and improved relationships – Assessing risk ensures client safety and guides intervention. Options a, c, and d are incorrect because ignoring, redirecting, or encouraging positive thinking risks harm.

382. **b) To allow the client to process thoughts** – Immediately, with the goal of resolution and improved relationships – Silence provides space for reflection, enhancing client insight. Options a, c, and d are incorrect because disengaging, speeding up, or asserting authority disrupts the process.

383. **b) Use trauma-focused CBT** – Immediately, with the goal of resolution and improved relationships – Trauma-focused CBT addresses PTSD flashbacks effectively. Options a, c, and d are incorrect because avoidance, career focus, or ignoring flashbacks hinders recovery.

384. **b) Demonstrating genuineness and trust** – Immediately, with the goal of resolution and improved relationships – Genuineness and trust foster a strong therapeutic alliance. Options a

c, and d are incorrect because rigidity, counselor expertise, or avoiding input undermines rapport.

385. **b) Apply motivational interviewing** – Immediately, with the goal of resolution and improved relationships – Motivational interviewing addresses resistance in substance use disorder respectfully. Options a, c, and d are incorrect because confrontation, academic focus, or ignoring resistance is ineffective or harmful.

386. **b) To confirm understanding of client's statements** – Immediately, with the goal of resolution and improved relationships – Paraphrasing ensures accurate understanding, promoting trust. Options a, c, and d are incorrect because challenging, redirecting, or minimizing emotions disrupts communication.

387. **b) Use gradual exposure techniques** – Immediately, with the goal of resolution and improved relationships – Gradual exposure reduces fear in social anxiety effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring fears hinders progress.

388. **b) Ensuring immediate safety and stabilization** – Immediately, with the goal of resolution and improved relationships – Safety and stabilization are critical in crisis intervention. Options a, c, and d are incorrect because long-term goals, past events, or avoiding input delays critical response.

389. **b) Implement exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD compulsive checking. Options a, c, and d are incorrect because encouraging checking, unrelated goals, or ignoring behaviors hinders progress.

390. **b) Adapting interventions to client's cultural context** – Immediately, with the goal of resolution and improved relationships – Cultural competence ensures relevant, respectful interventions. Options a, c, and d are incorrect because uniform interventions, ignoring culture, or counselor frameworks disregard client needs.

391. **b) Use dialectical behavior therapy (DBT)** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD emotional dysregulation. Options a, c, and d are incorrect because suppression, academic focus, or ignoring dysregulation is ineffective or harmful.

392. **b) Acknowledge and validate the client's emotions** – Immediately, with the goal of resolution and improved relationships – Validation supports emotional expression and trust. Options a, c, and d are incorrect because changing topics, advising to stop, or ignoring emotions disrupts the process.

393. **b) Teaching de-escalation strategies** – Immediately, with the goal of resolution and improved relationships – De-escalation strategies manage anger effectively, promoting safety. Options a, c, and d are incorrect because ignoring, redirecting, or suppressing anger escalates tension.

394. **b) Teach impulse control strategies** – Immediately, with the goal of resolution and improved relationships – Impulse control strategies address ADHD impulsivity effectively. Options a, c, and d are incorrect because encouraging impulsivity, financial focus, or ignoring symptoms is ineffective.

395. **b) To clarify and consolidate key points** – Immediately, with the goal of resolution and improved relationships – Summarizing reinforces understanding and session focus. Options a, c, and d are incorrect because interrupting, redirecting, or avoiding emotions disrupts communication.

396. **b) Use grounding and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques manage PTSD hypervigilance effectively. Options a, c, and d are incorrect because avoidance, career focus, or ignoring symptoms hinders recovery.

397. **b) Addressing cognitive distortions** – Immediately, with the goal of resolution and improved relationships – Addressing distortions is central to CBT, promoting healthier thinking. Options a, c, and d are incorrect because unconscious conflicts, past focus, or avoiding structure are not CBT principles.

398. **b) Using CBT to challenge negative thoughts** – Immediately, with the goal of resolution and improved relationships – CBT addresses low self-esteem in depression effectively. Options a, c, and d are incorrect because minimizing, quick fixes, or ignoring issues hinders recovery.

399. **b) Use motivational interviewing** – Immediately, with the goal of resolution and improved relationships – Motivational interviewing explores ambivalence respectfully, fostering change. Options a, c, and d are incorrect because confrontation, unrelated goals, or ignoring ambivalence is ineffective.

400. **b) Use CBT and nutritional counseling** – Immediately, with the goal of resolution and improved relationships – These interventions address binge eating in eating disorders effectively. Options a, c, and d are incorrect because restriction, academic focus, or ignoring behaviors is harmful or irrelevant.

401. **b) To convey empathy and attentiveness** – Immediately, with the goal of resolution and improved relationships – Nonverbal communication fosters trust and engagement. Options a, c, and d are incorrect because distracting, asserting authority, or minimizing emotions disrupts rapport.

402. **b) Use CBT and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – These interventions reduce fear in panic disorder effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring panic attacks hinders progress.

403. **b) Respecting client confidentiality** – Immediately, with the goal of resolution and improved relationships – Confidentiality is a core ethical principle, fostering trust. Options a, c, and d are incorrect because ignoring autonomy, counselor convenience, or untested interventions violates ethics.

404. **b) Use social skills training** – Immediately, with the goal of resolution and improved relationships – Social skills training addresses ASD communication challenges effectively. Options a, c, and d are incorrect because ignoring challenges, academic focus, or standard interventions neglects client needs.

405. **b) Explore underlying emotions and coping strategies** – Immediately, with the goal of resolution and improved relationships – Exploring self-harm promotes understanding and safer coping. Options a, c, and d are incorrect because ignoring, redirecting, or advising to stop risks harm.

406. **b) To validate the client's feelings and thoughts** – Immediately, with the goal of resolution and improved relationships – Reflective listening builds trust and validates the client. Options a, c, and d are incorrect because directing, redirecting, or avoiding emotions disrupts rapport.

407. **b) Teach coping strategies for cravings** – Immediately, with the goal of resolution and improved relationships – Coping strategies support recovery in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring cravings is harmful or ineffective.

408. **b) Using behavioral activation techniques** – Immediately, with the goal of resolution and improved relationships – Behavioral activation addresses low motivation effectively. Options a, c, and d are incorrect because ignoring, redirecting, or quick fixes hinders progress.

409. **b) Use imagery rehearsal therapy** – Immediately, with the goal of resolution and improved relationships – Imagery rehearsal therapy is effective for PTSD nightmares. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring nightmares hinders recovery.

410. **b) To address the here-and-now relationship** – Immediately, with the goal of resolution and improved relationships – Immediacy strengthens the therapeutic alliance by addressing dynamics. Options a, c, and d are incorrect because avoiding dynamics, past focus, or asserting authority disrupts rapport.

411. **b) Use gradual exposure and CBT** – Immediately, with the goal of resolution and improved relationships – These interventions reduce fear of judgment in social anxiety. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring fears hinders progress.

412. **b) Focusing on client strengths and solutions** – Immediately, with the goal of resolution and improved relationships – Solution-focused brief therapy emphasizes strengths and goals. Options a, c, and d are incorrect because trauma, unconscious conflicts, or avoiding goals are not its focus.

413. **b) Use behavioral activation to increase engagement** – Immediately, with the goal of resolution and improved relationships – Behavioral activation reduces isolation in depression. Options a, c, and d are incorrect because encouraging isolation, career focus, or ignoring issues hinders recovery.

414. **b) Acknowledge and explore resistance empathetically** – Immediately, with the goal of resolution and improved relationships – Empathetic exploration reduces defensiveness and builds trust. Options a, c, and d are incorrect because confrontation, topic changes, or ignoring defensiveness escalates tension.

415. **b) Use exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD intrusive thoughts. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring thoughts hinders progress.

416. **b) To assess client progress and motivation** – Immediately, with the goal of resolution and improved relationships – Scaling questions track progress and engage clients. Options a, c, and d are incorrect because limiting responses, asserting control, or avoiding emotions is ineffective.

417. **b) Use DBT and distress tolerance skills** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD self-harm. Options a, c, and d are incorrect because encouraging self-harm, academic focus, or ignoring behaviors is harmful or ineffective.

418. **b) Prioritizing safety and empowerment** – Immediately, with the goal of resolution and improved relationships – Trauma-informed care prioritizes safety and empowerment for trauma clients. Options a, c, and d are incorrect because ignoring trauma, financial focus, or confrontation risks harm.

419. **b) Teach focus-enhancing strategies** – Immediately, with the goal of resolution and improved relationships – Focus-enhancing strategies address ADHD symptoms effectively. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring symptoms is ineffective.

420. **b) Explore the source of guilt empathetically** – Immediately, with the goal of resolution and improved relationships – Empathetic exploration validates guilt and promotes insight. Options a, c, and d are incorrect because minimizing, quick fixes, or changing topics hinders progress.

421. **b) Use motivational interviewing** – Immediately, with the goal of resolution and improved relationships – Motivational interviewing addresses denial in substance use disorder respectfully. Options a, c, and d are incorrect because confrontation, academic focus, or ignoring denial is ineffective or harmful.

422. **b) Exploring pros and cons of change** – Immediately, with the goal of resolution and improved relationships – Exploring ambivalence fosters client-driven change. Options a, c, and d are incorrect because directing, unrelated goals, or ignoring ambivalence is ineffective.

423. **b) Use CBT to address body image** – Immediately, with the goal of resolution and improved relationships – CBT addresses body dissatisfaction in eating disorders effectively. Options a, c, and d are incorrect because restriction, financial focus, or ignoring dissatisfaction is harmful or irrelevant.

424. **b) To affirm client feelings and experiences** – Immediately, with the goal of resolution and improved relationships – Validation builds trust and engagement. Options a, c, and d are incorrect because challenging, redirecting, or minimizing emotions disrupts rapport.

425. **b) Use grounding techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques manage derealization in panic disorder effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms hinders progress.

426. **b) Helping clients reframe their stories** – Immediately, with the goal of resolution and improved relationships – Narrative therapy empowers clients to reframe experiences. Options a, c, and d are incorrect because diagnostic labels, avoiding input, or confrontation are not its focus.

427. **b) Use behavioral activation techniques** – Immediately, with the goal of resolution and improved relationships – Behavioral activation addresses low energy in depression effectively. Options a, c, and d are incorrect because isolation, career focus, or ignoring energy issues hinders recovery.

428. **b) Acknowledge and explore with sensitivity** – Immediately, with the goal of resolution and improved relationships – Sensitive exploration validates trauma and builds trust. Options a, c, and d are incorrect because ignoring, redirecting, or quick fixes risks harm.

429. **b) Use gradual exposure and social skills training** – Immediately, with the goal of resolution and improved relationships – These interventions reduce fear in social anxiety

effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring anxiety hinders progress.

430.   **b) To address discrepancies respectfully** – Immediately, with the goal of resolution and improved relationships – Respectful confrontation promotes insight and growth. Options a, c, and d are incorrect because aggressive challenges, avoiding input, or asserting authority disrupts rapport.

431.   **b) Use trauma-focused CBT** – Immediately, with the goal of resolution and improved relationships – Trauma-focused CBT addresses PTSD avoidance behaviors effectively. Options a, c, and d are incorrect because encouraging avoidance, career focus, or ignoring behaviors hinders recovery.

432.   **b) Obtaining informed consent for interventions** – Immediately, with the goal of resolution and improved relationships – Informed consent is a core ethical principle, ensuring client autonomy. Options a, c, and d are incorrect because ignoring culture, counselor convenience, or untested interventions violates ethics.

433.   **b) Teach organizational strategies** – Immediately, with the goal of resolution and improved relationships – Organizational strategies address ADHD disorganization effectively. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring symptoms is ineffective.

434.   **b) Validate and explore hopelessness empathetically** – Immediately, with the goal of resolution and improved relationships – Validation promotes trust and insight in addressing hopelessness. Options a, c, and d are incorrect because minimizing, quick fixes, or changing topics hinders progress.

435.   **b) Revise relapse prevention strategies** – Immediately, with the goal of resolution and improved relationships – Revising strategies supports recovery in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring relapse is harmful or ineffective.

436.   **b) Using CBT to challenge negative beliefs** – Immediately, with the goal of resolution and improved relationships – CBT addresses low self-esteem in depression effectively. Options a, c, and d are incorrect because ignoring, redirecting, or quick fixes hinders recovery.

437.   **b) Use exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD compulsive rituals. Options a, c, and d are incorrect because encouraging rituals, unrelated goals, or ignoring behaviors hinders progress.

438.   **b) To foster trust and understanding** – Immediately, with the goal of resolution and improved relationships – Empathy builds a strong therapeutic alliance. Options a, c, and d are incorrect because asserting authority, redirecting, or minimizing emotions disrupts rapport.

439. **b) Use DBT to address relationship patterns** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD unstable relationships. Options a, c, and d are incorrect because isolation, academic focus, or ignoring issues is ineffective or harmful.

440. **b) Teach relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Relaxation techniques manage in-session anxiety effectively. Options a, c, and d are incorrect because ignoring, changing topics, or suppressing anxiety hinders progress.

441. **b) Use CBT and nutritional counseling** – Immediately, with the goal of resolution and improved relationships – These interventions address purging in eating disorders effectively. Options a, c, and d are incorrect because restriction, career focus, or ignoring behaviors is harmful or irrelevant.

442. **b) Providing unconditional positive regard** – Immediately, with the goal of resolution and improved relationships – Unconditional positive regard is central to client-centered therapy, fostering trust. Options a, c, and d are incorrect because directing, diagnostic labels, or confrontation undermines the approach.

443. **b) Conduct a suicide risk assessment** – Immediately, with the goal of resolution and improved relationships – Assessing risk ensures client safety in depression. Options a, c, and d are incorrect because ignoring, redirecting, or encouraging positive thinking risks harm.

444. **b) To encourage exploration of thoughts and feelings** – Immediately, with the goal of resolution and improved relationships – Open-ended questions promote client insight and engagement. Options a, c, and d are incorrect because limiting responses, asserting control, or avoiding emotions is ineffective.

445. **b) Use grounding and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques manage PTSD hyperarousal effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms hinders recovery.

446. **b) Exploring resistance empathetically** – Immediately, with the goal of resolution and improved relationships – Empathetic exploration reduces resistance and builds trust. Options a, c, and d are incorrect because confrontation, unrelated goals, or ignoring resistance is ineffective.

447. **b) Use gradual exposure and CBT** – Immediately, with the goal of resolution and improved relationships – These interventions reduce fear of rejection in social anxiety. Options a, c, and d are incorrect because avoidance, academic focus, or ignoring fears hinders progress.

448. **b) To build rapport when used judiciously** – Immediately, with the goal of resolution and improved relationships – Judicious self-disclosure fosters trust and connection. Options a,

c, and d are incorrect because dominating, focusing on counselor experiences, or avoiding emotions disrupts rapport.

449.   **b) Use social skills training** – Immediately, with the goal of resolution and improved relationships – Social skills training reduces isolation in substance use disorder. Options a, c, and d are incorrect because encouraging isolation, financial focus, or ignoring isolation is harmful or ineffective.

450.   **b) Promoting present-moment awareness** – Immediately, with the goal of resolution and improved relationships – Mindfulness-based interventions focus on present awareness, reducing distress. Options a, c, and d are incorrect because past focus, avoiding input, or confrontation is not their focus.

451.   **b) Use behavioral activation techniques** – Immediately, with the goal of resolution and improved relationships – Behavioral activation addresses low motivation in depression effectively. Options a, c, and d are incorrect because isolation, career focus, or ignoring motivation hinders recovery.

452.   **b) Acknowledge and explore the anger respectfully** – Immediately, with the goal of resolution and improved relationships – Respectful exploration validates anger and promotes trust. Options a, c, and d are incorrect because ignoring, changing topics, or suppressing anger escalates tension.

453.   **b) Use exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD intrusive thoughts. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring thoughts hinders progress.

454.   **b) To help clients view situations differently** – Immediately, with the goal of resolution and improved relationships – Reframing promotes new perspectives, enhancing insight. Options a, c, and d are incorrect because aggressive challenges, asserting authority, or minimizing concerns disrupts progress.

455.   **b) Use DBT and impulse control strategies** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD impulsivity. Options a, c, and d are incorrect because encouraging impulsivity, academic focus, or ignoring behaviors is harmful or ineffective.

456.   **b) Maintaining professional boundaries** – Immediately, with the goal of resolution and improved relationships – Boundaries ensure ethical, safe counseling practice. Options a, c, and d are incorrect because ignoring confidentiality, counselor convenience, or untested interventions violates ethics.

457.   **b) Use CBT and nutritional counseling** – Immediately, with the goal of resolution and improved relationships – These interventions address restrictive eating in eating disorders

effectively. Options a, c, and d are incorrect because encouraging restriction, financial focus, or ignoring behaviors is harmful or irrelevant.

458. **b) Acknowledge and explore with trauma-informed care** – Immediately, with the goal of resolution and improved relationships – Trauma-informed care validates trauma and promotes safety. Options a, c, and d are incorrect because ignoring, redirecting, or quick fixes risks harm.

459. **b) Teach time management strategies** – Immediately, with the goal of resolution and improved relationships – Time management strategies address ADHD challenges effectively. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring difficulties is ineffective.

460. **b) To understand and validate client distress** – Immediately, with the goal of resolution and improved relationships – Active listening validates distress in crisis, promoting trust. Options a, c, and d are incorrect because asserting authority, redirecting, or minimizing emotions disrupts intervention.

461. **b) Use gradual exposure and social skills training** – Immediately, with the goal of resolution and improved relationships – These interventions reduce social anxiety effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring anxiety hinders progress.

462. **b) Exploring guilt empathetically** – Immediately, with the goal of resolution and improved relationships – Empathetic exploration validates guilt and promotes insight. Options a, c, and d are incorrect because minimizing, quick fixes, or ignoring guilt hinders progress.

463. **b) Use trauma-focused CBT** – Immediately, with the goal of resolution and improved relationships – Trauma-focused CBT addresses PTSD intrusive memories effectively. Options a, c, and d are incorrect because avoidance, career focus, or ignoring memories hinders recovery.

464. **b) To encourage desired behaviors** – Immediately, with the goal of resolution and improved relationships – Positive reinforcement promotes client progress and motivation. Options a, c, and d are incorrect because aggressive challenges, asserting authority, or minimizing progress is ineffective.

465. **b) Revise relapse prevention strategies** – Immediately, with the goal of resolution and improved relationships – Revising strategies supports recovery in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring relapse is harmful or ineffective.

466. **b) Providing empathy and unconditional positive regard** – Immediately, with the goal of resolution and improved relationships – These are core to person-centered therapy, fostering

trust. Options a, c, and d are incorrect because directing, diagnostic labels, or confrontation undermines the approach.

467. **b) Use CBT to challenge negative thoughts** – Immediately, with the goal of resolution and improved relationships – CBT addresses worthlessness in depression effectively. Options a, c, and d are incorrect because minimizing, redirecting, or ignoring feelings hinders recovery.

468. **b) Acknowledge and validate the client's emotions** – Immediately, with the goal of resolution and improved relationships – Validation supports emotional expression and trust. Options a, c, and d are incorrect because changing topics, advising to stop, or ignoring emotions disrupts the process.

469. **b) Use exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD compulsive checking. Options a, c, and d are incorrect because encouraging checking, unrelated goals, or ignoring behaviors hinders progress.

470. **b) Adapting interventions to client's cultural context** – Immediately, with the goal of resolution and improved relationships – Cultural sensitivity ensures relevant, respectful interventions. Options a, c, and d are incorrect because uniform interventions, ignoring culture, or counselor frameworks disregard client needs.

471. **b) Use DBT to address emotional regulation** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD emotional instability. Options a, c, and d are incorrect because suppression, academic focus, or ignoring instability is ineffective or harmful.

472. **b) Using motivational interviewing** – Immediately, with the goal of resolution and improved relationships – Motivational interviewing addresses low motivation respectfully. Options a, c, and d are incorrect because ignoring, redirecting, or quick fixes hinders progress.

473. **b) Use CBT to address body image** – Immediately, with the goal of resolution and improved relationships – CBT addresses body dissatisfaction in eating disorders effectively. Options a, c, and d are incorrect because restriction, financial focus, or ignoring dissatisfaction is harmful or irrelevant.

474. **b) Explore fear empathetically and reframe thoughts** – Immediately, with the goal of resolution and improved relationships – Empathetic exploration and reframing reduce fear of failure. Options a, c, and d are incorrect because minimizing, quick fixes, or changing topics hinders progress.

475. **b) Use trauma-focused CBT** – Immediately, with the goal of resolution and improved relationships – Trauma-focused CBT addresses PTSD avoidance behaviors effectively. Options a, c, and d are incorrect because encouraging avoidance, financial focus, or ignoring behaviors hinders recovery.

476. **b) Prioritizing immediate stabilization** – Immediately, with the goal of resolution and improved relationships – Stabilization is critical in ethical crisis intervention. Options a, c, and d are incorrect because ignoring safety, unrelated goals, or untested interventions risks harm.

477. **b) Teach impulse control strategies** – Immediately, with the goal of resolution and improved relationships – Impulse control strategies address ADHD impulsivity effectively. Options a, c, and d are incorrect because encouraging impulsivity, academic focus, or ignoring symptoms is ineffective.

478. **b) To reflect client feelings and build rapport** – Immediately, with the goal of resolution and improved relationships – Mirroring fosters trust and connection. Options a, c, and d are incorrect because challenging, asserting authority, or minimizing concerns disrupts rapport.

479. **b) Teach coping strategies for cravings** – Immediately, with the goal of resolution and improved relationships – Coping strategies support recovery in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring cravings is harmful or ineffective.

480. **b) Using CBT to challenge negative thoughts** – Immediately, with the goal of resolution and improved relationships – CBT addresses hopelessness in depression effectively. Options a, c, and d are incorrect because minimizing, quick fixes, or ignoring hopelessness hinders recovery.

481. **b) Use gradual exposure and CBT** – Immediately, with the goal of resolution and improved relationships – These interventions reduce public speaking fears in social anxiety. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring fears hinders progress.

482. **b) To demonstrate understanding and empathy** – Immediately, with the goal of resolution and improved relationships – Active listening builds trust and validates clients. Options a, c, and d are incorrect because asserting authority, redirecting, or minimizing emotions disrupts rapport.

483. **b) Use behavioral activation techniques** – Immediately, with the goal of resolution and improved relationships – Behavioral activation addresses low energy in depression effectively. Options a, c, and d are incorrect because isolation, career focus, or ignoring energy issues hinders recovery.

484. **b) Acknowledge and explore with trauma-informed care** – Immediately, with the goal of resolution and improved relationships – Trauma-informed care validates trauma and promotes safety. Options a, c, and d are incorrect because ignoring, redirecting, or quick fixes risks harm.

485. **b) Use exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD compulsive rituals.

Options a, c, and d are incorrect because encouraging rituals, unrelated goals, or ignoring behaviors hinders progress.

486. **b) Eliciting client motivation for change** – Immediately, with the goal of resolution and improved relationships – Motivational interviewing fosters client-driven change. Options a, c, and d are incorrect because confrontation, directing, or past failures undermines motivation.

487. **b) Use DBT and distress tolerance skills** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD self-harm. Options a, c, and d are incorrect because encouraging self-harm, academic focus, or ignoring behaviors is harmful or ineffective.

488. **b) To assess client progress and motivation** – Immediately, with the goal of resolution and improved relationships – Scaling questions track progress and engage clients. Options a, c, and d are incorrect because limiting responses, asserting control, or avoiding emotions is ineffective.

489. **b) Use CBT and nutritional counseling** – Immediately, with the goal of resolution and improved relationships – These interventions address purging in eating disorders effectively. Options a, c, and d are incorrect because restriction, career focus, or ignoring behaviors is harmful or irrelevant.

490. **b) Acknowledge and explore anger empathetically** – Immediately, with the goal of resolution and improved relationships – Empathetic exploration validates anger and promotes trust. Options a, c, and d are incorrect because ignoring, suppressing, or changing topics escalates tension.

491. **b) Use imagery rehearsal therapy** – Immediately, with the goal of resolution and improved relationships – Imagery rehearsal therapy is effective for PTSD nightmares. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring nightmares hinders recovery.

492. **b) Using CBT to challenge negative beliefs** – Immediately, with the goal of resolution and improved relationships – CBT addresses low self-esteem in depression effectively. Options a, c, and d are incorrect because ignoring, redirecting, or quick fixes hinders recovery.

493. **b) Use gradual exposure and social skills training** – Immediately, with the goal of resolution and improved relationships – These interventions reduce social anxiety effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring anxiety hinders progress.

494. **b) To affirm client feelings and experiences** – Immediately, with the goal of resolution and improved relationships – Validation builds trust and engagement. Options a, c, and d are incorrect because challenging, redirecting, or minimizing emotions disrupts rapport.

495. **b) Revise relapse prevention strategies** – Immediately, with the goal of resolution and improved relationships – Revising strategies supports recovery in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring relapse is harmful or ineffective.

496. **b) Prioritizing safety and empowerment** – Immediately, with the goal of resolution and improved relationships – Trauma-informed care prioritizes safety and empowerment for trauma clients. Options a, c, and d are incorrect because ignoring trauma, financial focus, or confrontation risks harm.

497. **b) Teach focus-enhancing strategies** – Immediately, with the goal of resolution and improved relationships – Focus-enhancing strategies address ADHD symptoms effectively. Options a, c, and d are incorrect because encouraging disorganization, academic focus, or ignoring symptoms is ineffective.

498. **b) Explore the source of guilt empathetically** – Immediately, with the goal of resolution and improved relationships – Empathetic exploration validates guilt and promotes insight. Options a, c, and d are incorrect because minimizing, quick fixes, or changing topics hinders progress.

499. **b) Use exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD intrusive thoughts. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring thoughts hinders progress.

500. **b) To help clients view situations differently** – Immediately, with the goal of resolution and improved relationships – Reframing promotes new perspectives, enhancing insight. Options a, c, and d are incorrect because aggressive challenges, asserting authority, or minimizing concerns disrupts progress.

501. **b) Use DBT to address emotional regulation** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD emotional instability. Options a, c, and d are incorrect because suppression, academic focus, or ignoring instability is ineffective or harmful.

502. **b) Exploring pros and cons of change** – Immediately, with the goal of resolution and improved relationships – Exploring ambivalence fosters client-driven change. Options a, c, and d are incorrect because directing, unrelated goals, or ignoring ambivalence is ineffective.

503. **b) Use CBT to address body image** – Immediately, with the goal of resolution and improved relationships – CBT addresses body dissatisfaction in eating disorders effectively. Options a, c, and d are incorrect because restriction, financial focus, or ignoring dissatisfaction is harmful or irrelevant.

504. **b) Teach relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Relaxation techniques manage in-session anxiety effectively. Options a, c, and d are incorrect because ignoring, changing topics, or suppressing anxiety hinders progress.

505. **b) Use grounding and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques manage PTSD hyperarousal effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms hinders recovery.

506. **b) Focusing on client strengths and solutions** – Immediately, with the goal of resolution and improved relationships – Solution-focused brief therapy emphasizes strengths and goals. Options a, c, and d are incorrect because trauma, unconscious conflicts, or avoiding goals are not its focus.

507. **b) Use CBT to challenge negative thoughts** – Immediately, with the goal of resolution and improved relationships – CBT addresses worthlessness in depression effectively. Options a, c, and d are incorrect because minimizing, redirecting, or ignoring feelings hinders recovery.

508. **b) To demonstrate understanding and empathy** – Immediately, with the goal of resolution and improved relationships – Active listening builds trust and validates clients. Options a, c, and d are incorrect because asserting authority, redirecting, or minimizing emotions disrupts rapport.

509. **b) Use gradual exposure and CBT** – Immediately, with the goal of resolution and improved relationships – These interventions reduce fear of rejection in social anxiety. Options a, c, and d are incorrect because avoidance, academic focus, or ignoring fears hinders progress.

510. **b) Acknowledge and explore with trauma-informed care** – Immediately, with the goal of resolution and improved relationships – Trauma-informed care validates trauma and promotes safety. Options a, c, and d are incorrect because ignoring, redirecting, or quick fixes risks harm.

511. **b) Use social skills training** – Immediately, with the goal of resolution and improved relationships – Social skills training reduces isolation in substance use disorder. Options a, c, and d are incorrect because encouraging isolation, financial focus, or ignoring isolation is harmful or ineffective.

512. **b) Using motivational interviewing** – Immediately, with the goal of resolution and improved relationships – Motivational interviewing addresses low motivation respectfully. Options a, c, and d are incorrect because ignoring, redirecting, or quick fixes hinders progress.

513. **b) Use exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD compulsive rituals. Options a, c, and d are incorrect because encouraging rituals, unrelated goals, or ignoring behaviors hinders progress.

514.   **b) To address the here-and-now relationship** – Immediately, with the goal of resolution and improved relationships – Immediacy strengthens the therapeutic alliance by addressing dynamics. Options a, c, and d are incorrect because avoiding dynamics, past focus, or asserting authority disrupts rapport.

515.   **b) Use DBT to address relationship patterns** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD unstable relationships. Options a, c, and d are incorrect because isolation, academic focus, or ignoring issues is ineffective or harmful.

516.   **b) Validate and explore hopelessness empathetically** – Immediately, with the goal of resolution and improved relationships – Validation promotes trust and insight in addressing hopelessness. Options a, c, and d are incorrect because minimizing, quick fixes, or changing topics hinders progress.

517.   **b) Use CBT and nutritional counseling** – Immediately, with the goal of resolution and improved relationships – These interventions address purging in eating disorders effectively. Options a, c, and d are incorrect because restriction, career focus, or ignoring behaviors is harmful or irrelevant.

518.   **b) Maintaining professional boundaries** – Immediately, with the goal of resolution and improved relationships – Boundaries ensure ethical, safe counseling practice. Options a, c, and d are incorrect because ignoring confidentiality, counselor convenience, or untested interventions violates ethics.

519.   **b) Use trauma-focused CBT** – Immediately, with the goal of resolution and improved relationships – Trauma-focused CBT addresses PTSD intrusive memories effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring memories hinders recovery.

520.   **b) To foster trust and understanding** – Immediately, with the goal of resolution and improved relationships – Empathy builds a strong therapeutic alliance. Options a, c, and d are incorrect because asserting authority, redirecting, or minimizing emotions disrupts rapport.

521.   **b) Teach time management strategies** – Immediately, with the goal of resolution and improved relationships – Time management strategies address ADHD challenges effectively. Options a, c, and d are incorrect because encouraging disorganization, financial focus, or ignoring difficulties is ineffective.

522.   **b) Explore the source of guilt empathetically** – Immediately, with the goal of resolution and improved relationships – Empathetic exploration validates guilt and promotes insight. Options a, c, and d are incorrect because minimizing, quick fixes, or changing topics hinders progress.

523. **b) Use gradual exposure and social skills training** – Immediately, with the goal of resolution and improved relationships – These interventions reduce social anxiety effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring anxiety hinders progress.

524. **b) Exploring resistance empathetically** – Immediately, with the goal of resolution and improved relationships – Empathetic exploration reduces resistance and builds trust. Options a, c, and d are incorrect because confrontation, unrelated goals, or ignoring resistance is ineffective.

525. **b) Teach coping strategies for cravings** – Immediately, with the goal of resolution and improved relationships – Coping strategies support recovery in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring cravings is harmful or ineffective.

526. **b) To encourage desired behaviors** – Immediately, with the goal of resolution and improved relationships – Positive reinforcement promotes client progress and motivation. Options a, c, and d are incorrect because aggressive challenges, asserting authority, or minimizing progress is ineffective.

527. **b) Use behavioral activation techniques** – Immediately, with the goal of resolution and improved relationships – Behavioral activation addresses low energy in depression effectively. Options a, c, and d are incorrect because isolation, career focus, or ignoring energy issues hinders recovery.

528. **b) Acknowledge and validate the client's emotions** – Immediately, with the goal of resolution and improved relationships – Validation supports emotional expression and trust. Options a, c, and d are incorrect because changing topics, advising to stop, or ignoring emotions disrupts the process.

529. **b) Use exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD intrusive thoughts. Options a, c, and d are incorrect because avoidance, unrelated goals, or ignoring thoughts hinders progress.

530. **b) Helping clients reframe their stories** – Immediately, with the goal of resolution and improved relationships – Narrative therapy empowers clients to reframe experiences. Options a, c, and d are incorrect because diagnostic labels, avoiding input, or confrontation are not its focus.

531. **b) Use DBT and distress tolerance skills** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD self-harm. Options a, c, and d are incorrect because encouraging self-harm, academic focus, or ignoring behaviors is harmful or ineffective.

532. **b) Adapting interventions to client's cultural context** – Immediately, with the goal of resolution and improved relationships – Cultural sensitivity ensures relevant, respectful interventions. Options a, c, and d are incorrect because uniform interventions, ignoring culture, or counselor frameworks disregard client needs.

533. **b) Use grounding and relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Grounding techniques manage PTSD hyperarousal effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring symptoms hinders recovery.

534. **b) Acknowledge and explore the anger respectfully** – Immediately, with the goal of resolution and improved relationships – Respectful exploration validates anger and promotes trust. Options a, c, and d are incorrect because ignoring, suppressing, or changing topics escalates tension.

535. **b) Use CBT to address body image** – Immediately, with the goal of resolution and improved relationships – CBT addresses body dissatisfaction in eating disorders effectively. Options a, c, and d are incorrect because restriction, financial focus, or ignoring dissatisfaction is harmful or irrelevant.

536. **b) Using CBT to challenge negative thoughts** – Immediately, with the goal of resolution and improved relationships – CBT addresses hopelessness in depression effectively. Options a, c, and d are incorrect because minimizing, quick fixes, or ignoring hopelessness hinders recovery.

537. **b) Use gradual exposure and CBT** – Immediately, with the goal of resolution and improved relationships – These interventions reduce public speaking fears in social anxiety. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring fears hinders progress.

538. **b) To understand and validate client distress** – Immediately, with the goal of resolution and improved relationships – Active listening validates distress in crisis, promoting trust. Options a, c, and d are incorrect because asserting authority, redirecting, or minimizing emotions disrupts intervention.

539. **b) Teach impulse control strategies** – Immediately, with the goal of resolution and improved relationships – Impulse control strategies address ADHD impulsivity effectively. Options a, c, and d are incorrect because encouraging impulsivity, academic focus, or ignoring symptoms is ineffective.

540. **b) Acknowledge and explore with trauma-informed care** – Immediately, with the goal of resolution and improved relationships – Trauma-informed care validates trauma and promotes safety. Options a, c, and d are incorrect because ignoring, redirecting, or quick fixes risks harm.

541. **b) Revise relapse prevention strategies** – Immediately, with the goal of resolution and improved relationships – Revising strategies supports recovery in substance use disorder. Options a, c, and d are incorrect because encouraging use, financial focus, or ignoring relapse is harmful or ineffective.

542. **b) Providing empathy and unconditional positive regard** – Immediately, with the goal of resolution and improved relationships – These are core to person-centered therapy, fostering trust. Options a, c, and d are incorrect because directing, diagnostic labels, or confrontation undermines the approach.

543. **b) Use CBT to challenge negative thoughts** – Immediately, with the goal of resolution and improved relationships – CBT addresses worthlessness in depression effectively. Options a, c, and d are incorrect because minimizing, redirecting, or ignoring feelings hinders recovery.

544. **b) To reflect client feelings and build rapport** – Immediately, with the goal of resolution and improved relationships – Mirroring fosters trust and connection. Options a, c, and d are incorrect because challenging, asserting authority, or minimizing concerns disrupts rapport.

545. **b) Use exposure and response prevention (ERP)** – Immediately, with the goal of resolution and improved relationships – ERP is evidence-based for OCD compulsive checking. Options a, c, and d are incorrect because encouraging checking, unrelated goals, or ignoring behaviors hinders progress.

546. **b) Explore the source of guilt empathetically** – Immediately, with the goal of resolution and improved relationships – Empathetic exploration validates guilt and promotes insight. Options a, c, and d are incorrect because minimizing, quick fixes, or changing topics hinders progress.

547. **b) Use DBT to address relationship patterns** – Immediately, with the goal of resolution and improved relationships – DBT is evidence-based for BPD unstable relationships. Options a, c, and d are incorrect because isolation, academic focus, or ignoring issues is ineffective or harmful.

548. **b) Using CBT to challenge negative beliefs** – Immediately, with the goal of resolution and improved relationships – CBT addresses low self-esteem in depression effectively. Options a, c, and d are incorrect because ignoring, redirecting, or quick fixes hinders recovery.

549. **b) Use gradual exposure and social skills training** – Immediately, with the goal of resolution and improved relationships – These interventions reduce social anxiety effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring anxiety hinders progress.

550. **b) To affirm client feelings and experiences** – Immediately, with the goal of resolution and improved relationships – Validation builds trust and engagement. Options a, c, and d are incorrect because challenging, redirecting, or minimizing emotions disrupts rapport.

551. **b) Use trauma-focused CBT** – Immediately, with the goal of resolution and improved relationships – Trauma-focused CBT addresses PTSD intrusive memories effectively. Options a, c, and d are incorrect because avoidance, financial focus, or ignoring memories hinders recovery.

552. **b) Teach relaxation techniques** – Immediately, with the goal of resolution and improved relationships – Relaxation techniques manage in-session anxiety effectively. Options a, c, and d are incorrect because ignoring, changing topics, or suppressing anxiety hinders progress.

553. **b) To understand and share the client's feelings** – Immediately, with the goal of resolution and improved relationships – Empathy fosters connection by understanding and validating the client's emotions, building trust. Options a, c, and d are incorrect because asserting authority, focusing on diagnostics, or redirecting emotions undermines client-centered care.

554. **b) Demonstrating genuineness** – Immediately, with the goal of resolution and improved relationships – Genuineness promotes authenticity, strengthening the therapeutic alliance. Options a, c, and d are incorrect because rigidity, prioritizing counselor goals, or avoiding input hinders rapport and trust.

555. **a) Unconditional positive regard** – Immediately, with the goal of resolution and improved relationships – Unconditional positive regard ensures the client feels accepted, reducing feelings of judgment. Options b, c, and d are incorrect because diagnostic focus, counselor-driven decisions, or detachment alienates the client.

556. **b) By respecting and integrating client cultural values** – Immediately, with the goal of resolution and improved relationships – Cultural competence ensures interventions are relevant and respectful, enhancing outcomes. Options a, c, and d are incorrect because uniform approaches, ignoring culture, or counselor perspectives disregard client needs.

557. **b) To ensure a safe and ethical therapeutic environment** – Immediately, with the goal of resolution and improved relationships – Professional boundaries maintain safety and ethics, protecting the therapeutic relationship. Options a, c, and d are incorrect because blurring roles, prioritizing convenience, or limiting autonomy violates ethical standards.

558. **b) Confidentiality** – Immediately, with the goal of resolution and improved relationships – Confidentiality fosters trust, encouraging open disclosure. Options a, c, and d are incorrect because curiosity, judgment, or directive interventions breach trust and ethics.

559. **b) Being authentic and transparent** – Immediately, with the goal of resolution and improved relationships – Genuineness promotes trust and connection through authenticity. Options a, c, and d are incorrect because superiority, diagnostic focus, or emotional avoidance hinders rapport.

560. **b) Cultural sensitivity** – Immediately, with the goal of resolution and improved relationships – Cultural sensitivity ensures the client feels understood by respecting their beliefs. Options a, c, and d are incorrect because standardized interventions, counselor goals, or detachment disregard cultural needs.

561. **b) To accept the client without conditions** – Immediately, with the goal of resolution and improved relationships – Unconditional positive regard fosters a nonjudgmental environment, promoting growth. Options a, c, and d are incorrect because judging, prioritizing counselor values, or limiting expression undermines client-centered care.

562. **b) Active listening** – Immediately, with the goal of resolution and improved relationships – Active listening validates client frustration, fostering trust and collaboration. Options a, c, and d are incorrect because defensiveness, directive approaches, or detachment escalates tension.

563. **b) Duty to protect** – Immediately, with the goal of resolution and improved relationships – Duty to protect ensures client safety in response to suicidal thoughts, adhering to ethical standards. Options a, c, and d are incorrect because ignoring, redirecting, or minimizing concerns risks harm.

564. **b) By recognizing and managing personal biases** – Immediately, with the goal of resolution and improved relationships – Self-awareness prevents biases from interfering with client care. Options a, c, and d are incorrect because focusing on biases, prioritizing comfort, or avoiding feedback undermines effectiveness.

565. **a) Empathy** – Immediately, with the goal of resolution and improved relationships – Empathy validates the client's experience, reducing feelings of dismissal. Options b, c, and d are incorrect because diagnostic focus, asserting authority, or neutrality alienates the client.

566. **b) To value the client's dignity and autonomy** – Immediately, with the goal of resolution and improved relationships – Respect ensures the client feels valued, fostering trust. Options a, c, and d are incorrect because enforcing rules, prioritizing expertise, or limiting input undermines autonomy.

567. **b) Cultural humility** – Immediately, with the goal of resolution and improved relationships – Cultural humility acknowledges and learns from the client's perspective, reducing stereotyping. Options a, c, and d are incorrect because standardized approaches, assumptions, or detachment disregard client needs.

568. **b) Openness to feedback** – Immediately, with the goal of resolution and improved relationships – Openness fosters collaboration and improves the therapeutic process. Options a, c, and d are incorrect because defensiveness, control, or ignoring concerns hinders trust.

569. **b) To protect client privacy and trust** – Immediately, with the goal of resolution and improved relationships – Confidentiality ensures a safe space for disclosure, building trust.

Options a, c, and d are incorrect because sharing information, prioritizing convenience, or limiting disclosures breaches ethics.

570. **b) Creating a safe environment** – Immediately, with the goal of resolution and improved relationships – A safe environment fosters trust and encourages openness. Options a, c, and d are incorrect because detachment, diagnostic focus, or directive interventions alienates the client.

571. **b) Collaborative decision-making** – Immediately, with the goal of resolution and improved relationships – Collaboration respects client autonomy, promoting empowerment. Options a, c, and d are incorrect because imposing values, diagnostic focus, or limiting choices undermines autonomy.

572. **b) Building trust through empathy** – Immediately, with the goal of resolution and improved relationships – Empathy addresses distrust by validating client concerns. Options a, c, and d are incorrect because defensiveness, redirection, or asserting authority escalates distrust.

573. **b) To demonstrate understanding and validation** – Immediately, with the goal of resolution and improved relationships – Active listening fosters trust by validating the client's perspective. Options a, c, and d are incorrect because controlling, prioritizing counselor goals, or minimizing emotions disrupts rapport.

574. **b) Validation of client feelings** – Immediately, with the goal of resolution and improved relationships – Validation ensures the client feels heard, fostering trust. Options a, c, and d are incorrect because judgment, counselor solutions, or detachment invalidates the client.

575. **b) Adherence to ethical guidelines** – Immediately, with the goal of resolution and improved relationships – Ethical guidelines ensure client-centered, safe practice. Options a, c, and d are incorrect because ignoring needs, prioritizing preferences, or avoiding feedback violates ethics.

576. **b) Trauma-informed care** – Immediately, with the goal of resolution and improved relationships – Trauma-informed care prioritizes safety for trauma clients. Options a, c, and d are incorrect because detachment, unrelated goals, or directive interventions risks harm.

577. **b) To foster authenticity and connection** – Immediately, with the goal of resolution and improved relationships – Genuineness builds trust through authentic engagement. Options a, c, and d are incorrect because facades, prioritizing expertise, or limiting engagement hinders rapport.

578. **b) Cultural competence** – Immediately, with the goal of resolution and improved relationships – Cultural competence ensures the client feels understood by respecting their background. Options a, c, and d are incorrect because standardized approaches, assumptions, or detachment disregard cultural needs.

579. **b) Empathetic responding** – Immediately, with the goal of resolution and improved relationships – Empathetic responding validates distress, fostering trust. Options a, c, and d are incorrect because minimizing, diagnostic focus, or redirection alienates the client.

580. **b) To enhance counselor self-awareness** – Immediately, with the goal of resolution and improved relationships – Self-reflection improves counselor effectiveness by managing biases. Options a, c, and d are incorrect because focusing on comfort, diagnostics, or avoiding feedback undermines practice.

581. **a) Unconditional positive regard** – Immediately, with the goal of resolution and improved relationships – Unconditional positive regard ensures the client feels accepted, reducing judgment. Options b, c, and d are incorrect because counselor values, diagnostic focus, or detachment alienates the client.

582. **b) Active listening** – Immediately, with the goal of resolution and improved relationships – Active listening ensures the client feels heard, building trust. Options a, c, and d are incorrect because directive questioning, asserting authority, or detachment disrupts rapport.

583. **b) Cultural sensitivity** – Immediately, with the goal of resolution and improved relationships – Cultural sensitivity validates experiences of discrimination, fostering trust. Options a, c, and d are incorrect because ignoring, redirecting, or asserting expertise disregards client needs.

584. **b) To understand and validate client concerns** – Immediately, with the goal of resolution and improved relationships – Empathy reduces resistance by validating concerns, promoting collaboration. Options a, c, and d are incorrect because confrontation, redirection, or minimizing resistance escalates tension.

585. **b) Building rapport through genuineness** – Immediately, with the goal of resolution and improved relationships – Genuineness fosters connection, addressing disconnection. Options a, c, and d are incorrect because detachment, diagnostic focus, or directive interventions alienates the client.

586. **b) Professional boundary maintenance** – Immediately, with the goal of resolution and improved relationships – Boundaries ensure ethical, safe therapeutic relationships. Options a, c, and d are incorrect because blurring roles, prioritizing comfort, or limiting autonomy violates ethics.

587. **b) Empathetic exploration** – Immediately, with the goal of resolution and improved relationships – Empathetic exploration validates anger, promoting trust and resolution. Options a, c, and d are incorrect because defensiveness, redirection, or asserting authority escalates tension.

588. **b) To acknowledge and learn from client cultural perspectives** – Immediately, with the goal of resolution and improved relationships – Cultural humility fosters respect and understanding of client perspectives. Options a, c, and d are incorrect because standardized approaches, assumptions, or avoiding cultural discussions disregard client needs.

589. **b) Creating a safe therapeutic environment** – Immediately, with the goal of resolution and improved relationships – A safe environment encourages emotional sharing and trust. Options a, c, and d are incorrect because detachment, diagnostic focus, or directive interventions alienates the client.

590. **b) Collaborative goal-setting** – Immediately, with the goal of resolution and improved relationships – Collaboration empowers clients by respecting their autonomy. Options a, c, and d are incorrect because imposing solutions, diagnostic focus, or limiting input undermines empowerment.

591. **b) Active listening and validation** – Immediately, with the goal of resolution and improved relationships – Active listening and validation ensure the client feels understood, fostering trust. Options a, c, and d are incorrect because judgment, counselor solutions, or detachment invalidates the client.

592. **b) To foster trust and safety** – Immediately, with the goal of resolution and improved relationships – Confidentiality builds trust by protecting client privacy. Options a, c, and d are incorrect because sharing information, prioritizing convenience, or limiting disclosures breaches ethics.

593. **b) Trauma-informed empathy** – Immediately, with the goal of resolution and improved relationships – Trauma-informed empathy validates trauma and promotes safety. Options a, c, and d are incorrect because detachment, unrelated goals, or directive interventions risks harm.

594. **b) Cultural competence** – Immediately, with the goal of resolution and improved relationships – Cultural competence ensures interventions respect client cultural needs. Options a, c, and d are incorrect because ignoring culture, assumptions, or standardized interventions disregards client needs.

595. **b) Building trust through empathy** – Immediately, with the goal of resolution and improved relationships – Empathy addresses distrust by validating client concerns. Options a, c, and d are incorrect because defensiveness, redirection, or asserting authority escalates distrust.

596. **b) To accept the client without conditions** – Immediately, with the goal of resolution and improved relationships – Unconditional positive regard fosters a nonjudgmental environment, promoting growth. Options a, c, and d are incorrect because judging, prioritizing counselor values, or limiting expression undermines client-centered care.

597.	**b) Validation of client experiences** – Immediately, with the goal of resolution and improved relationships – Validation ensures the client feels heard, fostering trust. Options a, c, and d are incorrect because judgment, counselor solutions, or detachment invalidates the client.

598.	**b) Duty to protect** – Immediately, with the goal of resolution and improved relationships – Duty to protect ensures client safety in response to suicidal ideation, adhering to ethics. Options a, c, and d are incorrect because ignoring, redirecting, or minimizing concerns risks harm.

599.	**b) Cultural humility** – Immediately, with the goal of resolution and improved relationships – Cultural humility acknowledges and learns from the client's perspective, reducing stereotyping. Options a, c, and d are incorrect because standardized approaches, assumptions, or detachment disregard client needs.

600.	**b) To recognize and manage personal biases** – Immediately, with the goal of resolution and improved relationships – Self-awareness prevents biases from interfering with client care, ensuring ethical practice. Options a, c, and d are incorrect because focusing on comfort, diagnostics, or avoiding feedback undermines effectiveness.