

PRACTICE EXAM 13: NCE SIMULATION (200 QUESTIONS)

This standalone practice exam contains 200 four-option questions aligned to the current National Counselor Examination format: 160 scored items and 40 unscored field-test items. Allow 3 hours 45 minutes. Select the single best answer for every question. NBCC uses form-specific scoring; this simulation does not assign an official passing score.

1. For Parker, the counselor elects to explore worry breadth duration physical tension sleep and impairment. Which counseling principle most directly justifies this intervention?
 - A. Generalized anxiety involves persistent excessive worry across domains rather than fear limited to one cue
 - B. Depressive presentations require attention to mood anhedonia cognition vegetative changes functioning and suicide risk
 - C. Emotion regulation improves when clients identify prompting events body cues meanings urges and effective alternatives
 - D. Psychotic symptoms require careful evaluation of risk functioning context and possible medical or substance causes
2. A counselor responds to Quinn's situation by choosing to map relationships roles events and recurring patterns across the family system. Which principle best supports this response?
 - A. Summaries integrate material support transitions and create a shared understanding of the session
 - B. Person-centered conditions support growth by creating a relationship marked by genuineness acceptance and empathic understanding
 - C. Cognitive restructuring examines interpretations and evidence rather than simply replacing negative thoughts with optimism
 - D. A genogram organizes multigenerational structure and themes while remaining a hypothesis-building tool
3. Morgan, age 57, meets with a counselor. A client says the problem is always equally terrible and nothing ever helps. What is the counselor's best next response?
 - A. use culturally responsive eye contact posture presence and minimal encouragers
 - B. respectfully present the discrepancy and explore it without accusation
 - C. use a scale to identify exceptions existing resources and the next small change
 - D. explore freedom responsibility isolation mortality and personally chosen meaning

4. The counselor's plan for Cameron is to review services risks benefits fees records and confidentiality before treatment begins. Which statement best explains why this approach is appropriate?

- A. A subpoena should not be treated automatically as permission to disclose the complete record
- B. Valid informed consent requires understandable information and a genuine opportunity for questions
- C. Counselors monitor impairment and act before personal functioning compromises professional services
- D. Ending services requires attention to abandonment risk records emergencies and reasonable transition support

5. For Parker, the counselor elects to write a prioritized plan of coping contacts professional resources and means-safety steps. Which counseling principle most directly justifies this intervention?

- A. Therapeutic silence can support emotion and meaning when it is responsive rather than avoidant or abandoning
- B. Accurate feeling reflections deepen awareness without claiming certainty about the client's internal experience
- C. A collaborative safety plan provides concrete actions and differs from an unsupported promise not to self-harm
- D. Regulation skills work best when practiced repeatedly and used as tools rather than guarantees that anxiety disappears

6. In a session with Quinn, age 17, this concern becomes clear: A client describes difficult-to-control worry across finances health and work for many months. What is the best counseling response?

- A. explore worry breadth duration physical tension sleep and impairment
- B. assess immediate danger privately and collaborate on an individualized safety plan
- C. use nonjudgmental assessment of pattern consequences tolerance withdrawal motivation and risk
- D. use a trauma-informed assessment that prioritizes safety choice pacing and current functioning

7. Morgan, age 24, meets with a counselor. Near the end of a complex session the client seems unsure what was accomplished. What is the counselor's best next response?

- A. provide structure clarify expectations and support gradual safety and participation
- B. state the central meaning concisely and check whether the understanding fits
- C. strengthen the caregiver subsystem and clarify boundaries through enacted interaction
- D. link major themes decisions and next steps and invite the client's additions

8. The counselor's plan for Cameron is to review results collaboratively in plain language and integrate them with other available evidence. Which statement best explains why this approach is appropriate?

- A. Screening identifies possible risk and need for evaluation but does not independently establish a disorder
- B. Assessment is an ongoing collaborative process and test scores are only one source of clinical information
- C. Level-of-care decisions match acuity safety medical risk functioning supports and treatment intensity
- D. Specificity access and imminence help determine the level of risk and the urgency of intervention

9. For Parker, the counselor elects to assess chasing losses financial harm control attempts risk and co-occurring concerns. Which counseling principle most directly justifies this intervention?

- A. Behavioral addictions can be maintained by intermittent reinforcement distorted beliefs and short-term emotional escape
- B. A history of mania or hypomania materially changes diagnosis risk assessment and treatment coordination
- C. Generalized anxiety involves persistent excessive worry across domains rather than fear limited to one cue
- D. Eating-disorder risk cannot be inferred from body size and may require prompt medical and nutritional coordination

10. In a session with Quinn, age 45, this concern becomes clear: A treatment plan states only that the client will feel better soon. What is the best counseling response?

- A. review the formulation alliance goals and intervention and revise the plan collaboratively
- B. explain the concern facilitate an appropriate referral and support continuity during transition
- C. process the meaning of ending review gains plan relapse prevention and arrange follow-up options
- D. translate the goal into observable achievable steps with a review period and indicators of progress

11. In the case of Morgan, the counselor decides to assess mood sleep medication medical factors daily functioning and cognitive pattern. What is the strongest rationale for that choice?

- A. Caregiver strain reflects demands resources meanings and support and may threaten both caregiver and recipient wellbeing
- B. Later-life cognitive complaints require broad assessment because mood sleep medication and illness can mimic decline
- C. Culturally responsive counseling locates distress within both personal experience and oppressive environmental conditions
- D. Spiritual and religious concerns require cultural humility and protection of client autonomy

12. During counseling with Cameron, age 59, the following issue emerges: A client has frequent online contact but reports no relationships that feel emotionally safe. Which response is most appropriate?

- A. assess immediate danger privately and collaborate on an individualized safety plan
- B. assess triggers vulnerability cues consequences and available regulation skills
- C. assess attachment needs interaction patterns barriers and opportunities for meaningful connection
- D. assess severity safety duration and impairment while considering depressive disorders and alternatives

13. A counselor is working with Parker, age 66. A client reports pervasive low mood loss of interest guilt and impaired functioning. Which action should the counselor take first?

- A. assess the obsession-compulsion cycle time burden insight avoidance and impairment
- B. explore worry breadth duration physical tension sleep and impairment
- C. explore identity structure relationships meaning and new sources of contribution
- D. assess severity safety duration and impairment while considering depressive disorders and alternatives

14. In a session with Quinn, age 73, this concern becomes clear: A client notices similar cutoff and caregiving patterns across several generations. What is the best counseling response?

- A. link major themes decisions and next steps and invite the client's additions
- B. tentatively reflect the possible hurt and invite correction
- C. map relationships roles events and recurring patterns across the family system
- D. invite elaboration with a focused open question rather than conducting a rapid interrogation

15. Morgan, age 19, meets with a counselor. A client describes escalating anger toward a named coworker and access to a firearm. What is the counselor's best next response?

- A. clarify intent plan means target imminence and protective factors while following safety duties
- B. complete a fuller assessment rather than treating the screen as a definitive diagnosis
- C. review results collaboratively in plain language and integrate them with other available evidence
- D. question the measure's consistency before drawing strong conclusions from the score

16. During counseling with Cameron, age 26, the following issue emerges: A brief alcohol screen is positive during an annual behavioral health visit. Which response is most appropriate?

- A. document orientation thought process attention and other current mental status findings
- B. complete a fuller assessment rather than treating the screen as a definitive diagnosis
- C. arrange urgent evaluation for a setting capable of medical monitoring and stabilization
- D. use a comparison group that matches the client's relevant characteristics and testing purpose

17. A counselor is working with Parker, age 33. A client experiences tension between personal values and the expectations of a faith community. Which action should the counselor take first?

- A. map reciprocal patterns and avoid assuming one person alone causes the family problem
- B. assess sleep schedule substances medical factors mood and behaviors that condition wakefulness
- C. explore meanings supports costs and choices without imposing the counselor's worldview
- D. assess distinct periods of mood elevation before using a unipolar depression formulation

18. In a session with Quinn, age 40, this concern becomes clear: A client repeatedly misses morning appointments because of shift work and unreliable transportation. What is the best counseling response?

- A. incorporate these strengths as resources in the plan rather than documenting only deficits
- B. modify the plan to address scheduling and access barriers before labeling the client resistant
- C. process the meaning of ending review gains plan relapse prevention and arrange follow-up options
- D. obtain appropriate consent and coordinate relevant information across providers

19. Morgan, age 47, meets with a counselor. A newly formed group seeks rules looks to the leader and shares cautiously. What is the counselor's best next response?

- A. provide structure clarify expectations and support gradual safety and participation
- B. write a prioritized plan of coping contacts professional resources and means-safety steps
- C. identify the situation thought emotion evidence alternatives and a balanced response
- D. explore lifestyle private logic belonging and socially useful alternatives

20. The counselor's plan for Cameron is to ask directly about thoughts intent plan access past behavior and protective factors. Which statement best explains why this approach is appropriate?

- A. Specificity access and imminence help determine the level of risk and the urgency of intervention
- B. Level-of-care decisions match acuity safety medical risk functioning supports and treatment intensity
- C. Differential diagnosis compares plausible explanations and rules out conditions that better account for symptoms
- D. Risk assessment requires direct inquiry and synthesis of acute and chronic risk and protective factors

21. A counselor is working with Parker, age 61. An older adult reports recent memory problems after bereavement poor sleep and a medication change. Which action should the counselor take first?

- A. assess mood sleep medication medical factors daily functioning and cognitive pattern
- B. explore life themes adaptability strengths and the story connecting past roles with future possibilities
- C. follow the client's priorities while assessing distress supports values and coordination needs
- D. normalize varied grief responses while assessing culture functioning risk and signs requiring added care

22. In a session with Quinn, age 68, this concern becomes clear: Parents expect a preschooler to regulate frustration with the consistency of an older child. What is the best counseling response?

- A. assess chasing losses financial harm control attempts risk and co-occurring concerns
- B. explore meanings supports costs and choices without imposing the counselor's worldview
- C. use nonjudgmental assessment of pattern consequences tolerance withdrawal motivation and risk
- D. frame assessment and intervention around developmental capacity temperament context and caregiver support

23. Morgan, age 75, meets with a counselor. A client's family interprets distress through a spiritual framework unfamiliar to the counselor. What is the counselor's best next response?

- A. consider substance or medication effects and medical causes before assigning a primary mental disorder
- B. arrange urgent evaluation for a setting capable of medical monitoring and stabilization
- C. ask how the client and community understand the problem and preferred sources of help
- D. clarify intent plan means target imminence and protective factors while following safety duties

24. The counselor's plan for Cameron is to clarify intent plan means target imminence and protective factors while following safety duties. Which statement best explains why this approach is appropriate?

- A. Validity concerns evidence supporting the meaning and use of scores for a particular purpose
- B. Specificity access and imminence help determine the level of risk and the urgency of intervention
- C. Level-of-care decisions match acuity safety medical risk functioning supports and treatment intensity
- D. Assessment is an ongoing collaborative process and test scores are only one source of clinical information

25. A counselor is working with Parker, age 28. A client with terminal illness wants to discuss fear meaning family communication and unfinished matters. Which action should the counselor take first?

- A. assess distinct periods of mood elevation before using a unipolar depression formulation
- B. assess safety command content reality testing substance use medical causes and level of care
- C. follow the client's priorities while assessing distress supports values and coordination needs
- D. provide an affirming exploratory space guided by the client's language goals and pace

26. In a session with Quinn, age 35, this concern becomes clear: A program evaluator wants to publish identifiable client quotations collected for quality improvement. What is the best counseling response?

- A. protect confidentiality while consulting counsel and seeking clarification or court direction
- B. obtain appropriate consent and protect identity before using material beyond its original purpose
- C. correct future documentation and amend records transparently without concealing the original entry
- D. reduce risk to clients and obtain consultation support or temporary limits on practice

27. In the case of Morgan, the counselor decides to explore life themes adaptability strengths and the story connecting past roles with future possibilities. What is the strongest rationale for that choice?

- A. Career construction emphasizes meaning identity and adaptability rather than matching a person to one fixed occupation
- B. Grief is not a uniform sequence and should be understood in cultural relational and developmental context
- C. Emotion regulation improves when clients identify prompting events body cues meanings urges and effective alternatives
- D. Violence assessment prioritizes survivor autonomy privacy danger indicators and practical safety options

28. The counselor's plan for Cameron is to explore freedom responsibility isolation mortality and personally chosen meaning. Which statement best explains why this approach is appropriate?

- A. Early group development commonly requires orientation predictability inclusion and trust building
- B. Support-building translates a general resource into accessible relationships actions and backup options
- C. Exposure promotes new learning through planned contact with feared cues rather than forced flooding or reassurance
- D. Existential counseling addresses fundamental conditions of living rather than reducing every concern to a symptom

29. A counselor is working with Parker, age 56. A client repeatedly changes topics whenever disagreement appears between client and counselor. Which action should the counselor take first?

- A. use open questions affirmations reflections and summaries to evoke the client's own reasons for change
- B. gently describe the here-and-now interaction and invite exploration of its meaning
- C. state the central meaning concisely and check whether the understanding fits
- D. tentatively reflect the possible hurt and invite correction

30. A counselor responds to Quinn's situation by choosing to consider substance or medication effects and medical causes before assigning a primary mental disorder. Which principle best supports this response?

- A. Differential diagnosis compares plausible explanations and rules out conditions that better account for symptoms
- B. The mental status examination describes present observable functioning rather than lifelong personality traits
- C. Specificity access and imminence help determine the level of risk and the urgency of intervention
- D. Culturally responsive assessment explores meaning context identity supports and help-seeking expectations

31. In the case of Morgan, the counselor decides to obtain appropriate consent and coordinate relevant information across providers. What is the strongest rationale for that choice?

- A. Strengths can improve engagement feasibility resilience and progress toward treatment goals
- B. Treatment modality should match goals safety development culture functioning and client preference
- C. Coordinated care reduces fragmentation while disclosure remains limited to authorized and necessary information
- D. Planned termination consolidates learning anticipates setbacks and supports increasing client independence

32. During counseling with Cameron, age 16, the following issue emerges: A client has insomnia agitation and poor concentration after beginning a new medication. Which response is most appropriate?

- A. ask how the client and community understand the problem and preferred sources of help
- B. question whether score interpretations represent the construct the instrument claims to measure
- C. document orientation thought process attention and other current mental status findings
- D. consider substance or medication effects and medical causes before assigning a primary mental disorder

33. A counselor is working with Parker, age 23. A client requests trauma processing that the counselor has never been trained to provide. Which action should the counselor take first?

- A. protect confidentiality while consulting counsel and seeking clarification or court direction
- B. review the written agreement discuss options and avoid abrupt abandonment
- C. seek qualified supervision and refer when competence cannot be established
- D. verify security informed consent emergency procedures and applicable jurisdictional rules before use

34. A counselor responds to Quinn's situation by choosing to identify the situation thought emotion evidence alternatives and a balanced response. Which principle best supports this response?

- A. Early group development commonly requires orientation predictability inclusion and trust building
- B. Externalizing language reduces identity fusion with problems and opens space for preferred stories and agency
- C. Existential counseling addresses fundamental conditions of living rather than reducing every concern to a symptom
- D. Cognitive restructuring examines interpretations and evidence rather than simply replacing negative thoughts with optimism

35. Morgan, age 37, meets with a counselor. A client repeatedly gambles to recover losses and conceals debts from a partner. What is the counselor's best next response?

- A. assess chasing losses financial harm control attempts risk and co-occurring concerns
- B. map reciprocal patterns and avoid assuming one person alone causes the family problem
- C. assess safety command content reality testing substance use medical causes and level of care
- D. assess mood sleep medication medical factors daily functioning and cognitive pattern

36. The counselor's plan for Cameron is to explore lifestyle private logic belonging and socially useful alternatives. Which statement best explains why this approach is appropriate?

- A. Regulation skills work best when practiced repeatedly and used as tools rather than guarantees that anxiety disappears
- B. Adlerian counseling emphasizes purposeful behavior social interest encouragement and the meanings formed within family context
- C. Collaborative goals convert preferred outcomes into manageable action without taking ownership away from the client
- D. Scaling can make differences visible and support client-defined movement without denying the seriousness of distress

37. A counselor is working with Parker, age 51. A child makes a disclosure that creates reasonable suspicion of abuse. Which action should the counselor take first?

- A. support safe exploration and communication without treating normative identity work as pathology
- B. provide an affirming exploratory space guided by the client's language goals and pace
- C. follow mandated-reporting law promptly while supporting the child and avoiding an investigative interrogation
- D. explore identity structure relationships meaning and new sources of contribution

38. A counselor responds to Quinn's situation by choosing to prioritize safety stabilization immediate needs supports and a short practical plan. Which principle best supports this response?

- A. Scaling can make differences visible and support client-defined movement without denying the seriousness of distress
- B. Crisis work narrows attention to safety functioning resources and manageable next actions
- C. Paraphrasing organizes content and demonstrates listening while allowing the client to correct misunderstandings
- D. Existential counseling addresses fundamental conditions of living rather than reducing every concern to a symptom

39. Morgan, age 65, meets with a counselor. A client repeatedly misses care because the clinic lacks wheelchair access. What is the counselor's best next response?

- A. address the access barrier with the client and advocate at the appropriate system level
- B. correct future documentation and amend records transparently without concealing the original entry
- C. seek qualified supervision and refer when competence cannot be established
- D. obtain appropriate consent and protect identity before using material beyond its original purpose

40. During counseling with Cameron, age 72, the following issue emerges: A client repeats a pattern of expecting rejection and withdrawing before others can respond. Which response is most appropriate?

- A. prioritize safety stabilization immediate needs supports and a short practical plan
- B. schedule small feasible activities and track mood mastery and pleasure afterward
- C. state the central meaning concisely and check whether the understanding fits
- D. explore recurring relational themes defenses and their appearance in the therapeutic relationship

41. A counselor is working with Parker, age 18. A long-term client asks the counselor to become a partner in a small business. Which action should the counselor take first?

- A. verify security informed consent emergency procedures and applicable jurisdictional rules before use
- B. decline the financial relationship and process the request within counseling
- C. follow applicable law consult promptly and take protective steps required in the jurisdiction
- D. give timely notice provide referrals and arrange continuity consistent with client needs

42. A counselor responds to Quinn's situation by choosing to use nonjudgmental assessment of pattern consequences tolerance withdrawal motivation and risk. Which principle best supports this response?

- A. End-of-life counseling centers dignity autonomy meaning relationships grief and interdisciplinary collaboration
- B. Loneliness reflects perceived relational disconnection rather than simply the number of social contacts
- C. Persistent insomnia is often maintained by arousal irregular timing and learned associations between bed and wakefulness
- D. Substance assessment examines severity and function without allowing labels or confrontation to replace evidence

43. Morgan, age 32, meets with a counselor. A newly retired client feels purposeless after losing a valued occupational role. What is the counselor's best next response?

- A. support safe exploration and communication without treating normative identity work as pathology
- B. normalize varied grief responses while assessing culture functioning risk and signs requiring added care
- C. explore identity structure relationships meaning and new sources of contribution
- D. validate the contextual harm explore coping and supports and consider advocacy chosen by the client

44. The counselor's plan for Cameron is to address the access barrier with the client and advocate at the appropriate system level. Which statement best explains why this approach is appropriate?

- A. Counselor advocacy can target environmental barriers while preserving client choice and collaboration
- B. Valid informed consent requires understandable information and a genuine opportunity for questions
- C. Counselors monitor impairment and act before personal functioning compromises professional services
- D. Clinical records should be timely objective relevant and altered only through an auditable process

45. A counselor is working with Parker, age 46. A client becomes quiet after naming a painful loss and appears to be reflecting. Which action should the counselor take first?

- A. gently describe the here-and-now interaction and invite exploration of its meaning
- B. allow supportive silence while monitoring whether the client needs grounding or invitation
- C. build a collaborative graded practice plan while reducing safety behaviors
- D. explore recurring relational themes defenses and their appearance in the therapeutic relationship

46. A counselor responds to Quinn's situation by choosing to assess sleep schedule substances medical factors mood and behaviors that condition wakefulness. Which principle best supports this response?

- A. Grief is not a uniform sequence and should be understood in cultural relational and developmental context
- B. Later-life cognitive complaints require broad assessment because mood sleep medication and illness can mimic decline
- C. Persistent insomnia is often maintained by arousal irregular timing and learned associations between bed and wakefulness
- D. Counselors report reasonable suspicion as required and leave forensic fact-finding to designated investigators

47. Morgan, age 60, meets with a counselor. A client in acute distress is disorganized and unable to consider long-term insight work. What is the counselor's best next response?

- A. prioritize safety stabilization immediate needs supports and a short practical plan
- B. interrupt the harmful behavior firmly and redirect toward safe respectful interaction
- C. link major themes decisions and next steps and invite the client's additions
- D. invite elaboration with a focused open question rather than conducting a rapid interrogation

48. During counseling with Cameron, age 67, the following issue emerges: An adolescent is exploring values relationships and future roles while parents demand immediate certainty. Which response is most appropriate?

- A. explore meanings supports costs and choices without imposing the counselor's worldview
- B. assess medical risk behaviors body concerns and functioning without relying on appearance alone
- C. assess the obsession-compulsion cycle time burden insight avoidance and impairment
- D. support safe exploration and communication without treating normative identity work as pathology

49. For Parker, the counselor elects to assess immediate danger privately and collaborate on an individualized safety plan. Which counseling principle most directly justifies this intervention?

- A. Trauma-responsive care avoids unnecessary re-exposure and recognizes intrusion avoidance arousal and meaning changes
- B. Psychotic symptoms require careful evaluation of risk functioning context and possible medical or substance causes
- C. Depressive presentations require attention to mood anhedonia cognition vegetative changes functioning and suicide risk
- D. Violence assessment prioritizes survivor autonomy privacy danger indicators and practical safety options

50. A counselor responds to Quinn's situation by choosing to state the central meaning concisely and check whether the understanding fits. Which principle best supports this response?

- A. Paraphrasing organizes content and demonstrates listening while allowing the client to correct misunderstandings
- B. Summaries integrate material support transitions and create a shared understanding of the session
- C. Motivational interviewing responds to ambivalence with partnership acceptance compassion and evocation
- D. Constructive confrontation highlights incongruence while preserving empathy autonomy and the working alliance

51. In the case of Morgan, the counselor decides to protect confidentiality while consulting counsel and seeking clarification or court direction. What is the strongest rationale for that choice?

- A. Counselor advocacy can target environmental barriers while preserving client choice and collaboration
- B. A subpoena should not be treated automatically as permission to disclose the complete record
- C. Clinical records should be timely objective relevant and altered only through an auditable process
- D. Technology does not remove duties concerning competence privacy access and legal authority to practice

52. The counselor's plan for Cameron is to link major themes decisions and next steps and invite the client's additions. Which statement best explains why this approach is appropriate?

- A. Therapeutic silence can support emotion and meaning when it is responsive rather than avoidant or abandoning
- B. Open questions can expand exploration while timing focus and pacing protect the collaborative process
- C. Summaries integrate material support transitions and create a shared understanding of the session
- D. Person-centered conditions support growth by creating a relationship marked by genuineness acceptance and empathic understanding

53. For Parker, the counselor elects to provide an affirming exploratory space guided by the client's language goals and pace. Which counseling principle most directly justifies this intervention?

- A. Compulsions are negatively reinforced when temporary relief strengthens rituals despite their long-term cost
- B. End-of-life counseling centers dignity autonomy meaning relationships grief and interdisciplinary collaboration
- C. Ethical exploration respects self-determination and does not treat identity diversity as pathology
- D. Behavior must be interpreted against developmental expectations rather than adult standards

54. A counselor responds to Quinn's situation by choosing to identify safe supports and plan specific realistic steps for reconnection. Which principle best supports this response?

- A. Counselor self-disclosure should be intentional brief culturally considered and driven by client welfare
- B. A collaborative safety plan provides concrete actions and differs from an unsupported promise not to self-harm
- C. Summaries integrate material support transitions and create a shared understanding of the session
- D. Support-building translates a general resource into accessible relationships actions and backup options

55. In the case of Morgan, the counselor decides to assess panic episodes anticipatory anxiety avoidance medical factors and functional impact. What is the strongest rationale for that choice?

- A. Panic concerns include the attacks themselves and the learned fear and avoidance that can follow them
- B. End-of-life counseling centers dignity autonomy meaning relationships grief and interdisciplinary collaboration
- C. Psychotic symptoms require careful evaluation of risk functioning context and possible medical or substance causes
- D. Loneliness reflects perceived relational disconnection rather than simply the number of social contacts

56. The counselor's plan for Cameron is to respond honestly and professionally rather than hiding behind a false therapeutic role. Which statement best explains why this approach is appropriate?

- A. Positive regard affirms human worth without requiring approval of every action
- B. Congruence involves alignment and authentic presence used in service of the client
- C. A nonjudgmental stance reduces shame and supports accurate disclosure without eliminating necessary assessment
- D. Empathy seeks accurate understanding from the client's frame while preserving professional judgment and boundaries

57. A counselor is working with Parker, age 69. A client admits behavior that caused harm and expects immediate rejection. Which action should the counselor take first?

- A. maintain respect for the person while holding the harmful behavior open to examination
- B. respond warmly while restating the boundary and exploring the need beneath the contact
- C. respond with curiosity and calm while assessing meaning risk and context
- D. respond honestly and professionally rather than hiding behind a false therapeutic role

58. In a session with Quinn, age 15, this concern becomes clear: A client falls behind on payments and says the fee policy was never explained. What is the best counseling response?

- A. review services risks benefits fees records and confidentiality before treatment begins
- B. correct future documentation and amend records transparently without concealing the original entry
- C. give timely notice provide referrals and arrange continuity consistent with client needs
- D. review the written agreement discuss options and avoid abrupt abandonment

59. Morgan, age 22, meets with a counselor. An agency closes a program while several clients still need ongoing care. What is the counselor's best next response?

- A. decline the financial relationship and process the request within counseling
- B. give timely notice provide referrals and arrange continuity consistent with client needs
- C. address the access barrier with the client and advocate at the appropriate system level
- D. review services risks benefits fees records and confidentiality before treatment begins

60. The counselor's plan for Cameron is to allow supportive silence while monitoring whether the client needs grounding or invitation. Which statement best explains why this approach is appropriate?

- A. Constructive confrontation highlights incongruence while preserving empathy autonomy and the working alliance
- B. Existential counseling addresses fundamental conditions of living rather than reducing every concern to a symptom
- C. Therapeutic silence can support emotion and meaning when it is responsive rather than avoidant or abandoning

61. A counselor is working with Parker, age 36. A counselor compares an adolescent's score with norms developed only from middle-aged adults. Which action should the counselor take first?

- A. arrange urgent evaluation for a setting capable of medical monitoring and stabilization
- B. question whether score interpretations represent the construct the instrument claims to measure
- C. use a comparison group that matches the client's relevant characteristics and testing purpose
- D. question the measure's consistency before drawing strong conclusions from the score

62. A counselor responds to Quinn's situation by choosing to ask respectfully about the client's meanings and remain open to correction. Which principle best supports this response?

- A. Congruence involves alignment and authentic presence used in service of the client
- B. Self-awareness helps counselors keep personal reactions from directing client care
- C. Effective counselors combine care and responsiveness with predictable ethical limits
- D. Cultural humility combines lifelong learning self-reflection attention to power and accountability

63. Morgan, age 50, meets with a counselor. A counselor plans to use an unfamiliar video platform for sessions across state lines. What is the counselor's best next response?

- A. reduce risk to clients and obtain consultation support or temporary limits on practice
- B. verify security informed consent emergency procedures and applicable jurisdictional rules before use
- C. seek qualified supervision and refer when competence cannot be established
- D. review services risks benefits fees records and confidentiality before treatment begins

64. The counselor's plan for Cameron is to gather biological psychological social cultural and medical information before concluding the cause. Which statement best explains why this approach is appropriate?

- A. A comprehensive intake prevents premature conclusions by examining multiple interacting sources of distress
- B. Screening identifies possible risk and need for evaluation but does not independently establish a disorder
- C. Specificity access and imminence help determine the level of risk and the urgency of intervention
- D. Reliability concerns the consistency or dependability of measurement across relevant occasions or items

65. A counselor is working with Parker, age 64. A screening scale gives markedly different scores when the stable client repeats it two days later. Which action should the counselor take first?

- A. ask directly about thoughts intent plan access past behavior and protective factors
- B. question whether score interpretations represent the construct the instrument claims to measure
- C. use a comparison group that matches the client's relevant characteristics and testing purpose
- D. question the measure's consistency before drawing strong conclusions from the score

66. A counselor responds to Quinn's situation by choosing to arrange urgent evaluation for a setting capable of medical monitoring and stabilization. Which principle best supports this response?

- A. Level-of-care decisions match acuity safety medical risk functioning supports and treatment intensity
- B. Culturally responsive assessment explores meaning context identity supports and help-seeking expectations
- C. Reliability concerns the consistency or dependability of measurement across relevant occasions or items
- D. Validity concerns evidence supporting the meaning and use of scores for a particular purpose

67. In the case of Morgan, the counselor decides to give timely notice provide referrals and arrange continuity consistent with client needs. What is the strongest rationale for that choice?

- A. Confidentiality has legally and ethically recognized exceptions when serious foreseeable harm is present
- B. Technology does not remove duties concerning competence privacy access and legal authority to practice
- C. Ending services requires attention to abandonment risk records emergencies and reasonable transition support
- D. A subpoena should not be treated automatically as permission to disclose the complete record

68. During counseling with Cameron, age 24, the following issue emerges: One member repeatedly ridicules others and prevents quieter members from participating. Which response is most appropriate?

- A. map relationships roles events and recurring patterns across the family system
- B. interrupt the harmful behavior firmly and redirect toward safe respectful interaction
- C. provide structure clarify expectations and support gradual safety and participation
- D. strengthen the caregiver subsystem and clarify boundaries through enacted interaction

69. For Parker, the counselor elects to explore meanings supports costs and choices without imposing the counselor's worldview. Which counseling principle most directly justifies this intervention?

- A. Adolescence commonly involves increasing autonomy identity formation and changing family and peer relationships
- B. A history of mania or hypomania materially changes diagnosis risk assessment and treatment coordination
- C. Depressive presentations require attention to mood anhedonia cognition vegetative changes functioning and suicide risk
- D. Spiritual and religious concerns require cultural humility and protection of client autonomy

70. In a session with Quinn, age 38, this concern becomes clear: A displaced worker wants help making sense of repeated transitions and future direction. What is the best counseling response?

- A. assess chasing losses financial harm control attempts risk and co-occurring concerns
- B. explore life themes adaptability strengths and the story connecting past roles with future possibilities
- C. explore identity structure relationships meaning and new sources of contribution
- D. assess mood sleep medication medical factors daily functioning and cognitive pattern

71. In the case of Morgan, the counselor decides to incorporate these strengths as resources in the plan rather than documenting only deficits. What is the strongest rationale for that choice?

- A. Treatment barriers should be identified collaboratively and addressed as practical contextual or motivational obstacles
- B. Treatment planning is strongest when goals are meaningful to the client and jointly developed
- C. Strengths can improve engagement feasibility resilience and progress toward treatment goals
- D. Referral protects welfare when client needs exceed competence resources or the current level of care

72. During counseling with Cameron, age 52, the following issue emerges: A client says life is not worth living but has not yet been asked about intent or means. Which response is most appropriate?

- A. ask directly about thoughts intent plan access past behavior and protective factors
- B. gather biological psychological social cultural and medical information before concluding the cause
- C. document orientation thought process attention and other current mental status findings
- D. review results collaboratively in plain language and integrate them with other available evidence

73. A counselor is working with Parker, age 59. A client feels empty after achieving goals that once organized life. Which action should the counselor take first?

- A. explore freedom responsibility isolation mortality and personally chosen meaning
- B. map relationships roles events and recurring patterns across the family system
- C. separate the child from the problem and explore times the anger had less influence
- D. invite them to notice and discuss the shared theme with each other

74. In a session with Quinn, age 66, this concern becomes clear: A family repeatedly solves a child's refusal in ways that unintentionally strengthen it. What is the best counseling response?

- A. explore recurring relational themes defenses and their appearance in the therapeutic relationship
- B. interrupt the maintaining sequence with a focused directive suited to the family's context
- C. prioritize safety stabilization immediate needs supports and a short practical plan
- D. identify the situation thought emotion evidence alternatives and a balanced response

75. In the case of Morgan, the counselor decides to invite elaboration with a focused open question rather than conducting a rapid interrogation. What is the strongest rationale for that choice?

- A. Early group development commonly requires orientation predictability inclusion and trust building
- B. Adlerian counseling emphasizes purposeful behavior social interest encouragement and the meanings formed within family context
- C. Open questions can expand exploration while timing focus and pacing protect the collaborative process
- D. Paraphrasing organizes content and demonstrates listening while allowing the client to correct misunderstandings

76. The counselor's plan for Cameron is to stay regulated explore the rupture and avoid defensiveness or premature appeasement. Which statement best explains why this approach is appropriate?

- A. Positive regard affirms human worth without requiring approval of every action
- B. A nonjudgmental stance reduces shame and supports accurate disclosure without eliminating necessary assessment
- C. Congruence involves alignment and authentic presence used in service of the client
- D. Conflict tolerance allows disagreement to become useful information while protecting safety and respect

77. For Parker, the counselor elects to normalize varied grief responses while assessing culture functioning risk and signs requiring added care. Which counseling principle most directly justifies this intervention?

- A. Later-life cognitive complaints require broad assessment because mood sleep medication and illness can mimic decline
- B. Grief is not a uniform sequence and should be understood in cultural relational and developmental context
- C. Violence assessment prioritizes survivor autonomy privacy danger indicators and practical safety options
- D. Compulsions are negatively reinforced when temporary relief strengthens rituals despite their long-term cost

78. A counselor responds to Quinn's situation by choosing to tentatively reflect the possible hurt and invite correction. Which principle best supports this response?

- A. Crisis work narrows attention to safety functioning resources and manageable next actions
- B. A genogram organizes multigenerational structure and themes while remaining a hypothesis-building tool
- C. Open questions can expand exploration while timing focus and pacing protect the collaborative process
- D. Accurate feeling reflections deepen awareness without claiming certainty about the client's internal experience

79. Morgan, age 40, meets with a counselor. A client has severe withdrawal risk and cannot maintain safety in an outpatient setting. What is the counselor's best next response?

- A. ask directly about thoughts intent plan access past behavior and protective factors
- B. use a comparison group that matches the client's relevant characteristics and testing purpose
- C. arrange urgent evaluation for a setting capable of medical monitoring and stabilization
- D. consider substance or medication effects and medical causes before assigning a primary mental disorder

80. The counselor's plan for Cameron is to frame assessment and intervention around developmental capacity temperament context and caregiver support. Which statement best explains why this approach is appropriate?

- A. Behavior must be interpreted against developmental expectations rather than adult standards
- B. Retirement is a role transition whose impact depends on preparation resources health relationships and identity
- C. Panic concerns include the attacks themselves and the learned fear and avoidance that can follow them
- D. A history of mania or hypomania materially changes diagnosis risk assessment and treatment coordination

81. A counselor is working with Parker, age 54. A client receives counseling medication management and primary care for interacting concerns. Which action should the counselor take first?

- A. incorporate these strengths as resources in the plan rather than documenting only deficits
- B. translate the goal into observable achievable steps with a review period and indicators of progress
- C. obtain appropriate consent and coordinate relevant information across providers
- D. explain the concern facilitate an appropriate referral and support continuity during transition

82. In a session with Quinn, age 61, this concern becomes clear: A counselor considers sharing a personal experience because the client feels uniquely ashamed. What is the best counseling response?

- A. tentatively reflect the possible hurt and invite correction
- B. disclose only if the likely client benefit is clear and return focus promptly to the client
- C. invite elaboration with a focused open question rather than conducting a rapid interrogation
- D. interrupt the maintaining sequence with a focused directive suited to the family's context

83. In the case of Morgan, the counselor decides to complete a fuller assessment rather than treating the screen as a definitive diagnosis. What is the strongest rationale for that choice?

- A. Screening identifies possible risk and need for evaluation but does not independently establish a disorder
- B. Validity concerns evidence supporting the meaning and use of scores for a particular purpose
- C. Culturally responsive assessment explores meaning context identity supports and help-seeking expectations
- D. A comprehensive intake prevents premature conclusions by examining multiple interacting sources of distress

84. The counselor's plan for Cameron is to assess triggers vulnerability cues consequences and available regulation skills. Which statement best explains why this approach is appropriate?

- A. Spiritual and religious concerns require cultural humility and protection of client autonomy
- B. Trauma-responsive care avoids unnecessary re-exposure and recognizes intrusion avoidance arousal and meaning changes
- C. Panic concerns include the attacks themselves and the learned fear and avoidance that can follow them
- D. Emotion regulation improves when clients identify prompting events body cues meanings urges and effective alternatives

85. For Parker, the counselor elects to explore identity structure relationships meaning and new sources of contribution. Which counseling principle most directly justifies this intervention?

- A. Violence assessment prioritizes survivor autonomy privacy danger indicators and practical safety options
- B. A history of mania or hypomania materially changes diagnosis risk assessment and treatment coordination
- C. End-of-life counseling centers dignity autonomy meaning relationships grief and interdisciplinary collaboration
- D. Retirement is a role transition whose impact depends on preparation resources health relationships and identity

86. In a session with Quinn, age 28, this concern becomes clear: A client describes workplace racism and wonders whether distress reflects personal weakness. What is the best counseling response?

- A. follow mandated-reporting law promptly while supporting the child and avoiding an investigative interrogation
- B. assess attachment needs interaction patterns barriers and opportunities for meaningful connection
- C. validate the contextual harm explore coping and supports and consider advocacy chosen by the client
- D. assess safety power imbalance frequency supports and the student's preferences for response

87. In the case of Morgan, the counselor decides to verify security informed consent emergency procedures and applicable jurisdictional rules before use. What is the strongest rationale for that choice?

- A. Counselors avoid nonprofessional roles when exploitation impaired judgment or client harm is reasonably possible
- B. Technology does not remove duties concerning competence privacy access and legal authority to practice
- C. Ending services requires attention to abandonment risk records emergencies and reasonable transition support
- D. A subpoena should not be treated automatically as permission to disclose the complete record

88. During counseling with Cameron, age 42, the following issue emerges: A client gives a long account containing several connected concerns. Which response is most appropriate?

- A. state the central meaning concisely and check whether the understanding fits
- B. gently describe the here-and-now interaction and invite exploration of its meaning
- C. tentatively reflect the possible hurt and invite correction
- D. build a collaborative graded practice plan while reducing safety behaviors

89. For Parker, the counselor elects to explain the concern facilitate an appropriate referral and support continuity during transition. Which counseling principle most directly justifies this intervention?

- A. Referral protects welfare when client needs exceed competence resources or the current level of care
- B. A treatment plan is a living document that changes when evidence shows the current approach is ineffective
- C. Treatment planning is strongest when goals are meaningful to the client and jointly developed
- D. Strengths can improve engagement feasibility resilience and progress toward treatment goals

90. In a session with Quinn, age 56, this concern becomes clear: A client restricts food exercises compulsively and has dizziness despite an average-range appearance. What is the best counseling response?

- A. assess mood sleep medication medical factors daily functioning and cognitive pattern
- B. assess medical risk behaviors body concerns and functioning without relying on appearance alone
- C. assess severity safety duration and impairment while considering depressive disorders and alternatives
- D. assess panic episodes anticipatory anxiety avoidance medical factors and functional impact

91. Morgan, age 63, meets with a counselor. A counselor discovers that several progress notes contain vague judgments rather than clinical facts. What is the counselor's best next response?

- A. protect confidentiality while consulting counsel and seeking clarification or court direction
- B. obtain appropriate consent and protect identity before using material beyond its original purpose
- C. review services risks benefits fees records and confidentiality before treatment begins
- D. correct future documentation and amend records transparently without concealing the original entry

92. During counseling with Cameron, age 70, the following issue emerges: Outcome data and client feedback show little improvement after an adequate trial. Which response is most appropriate?

- A. obtain appropriate consent and coordinate relevant information across providers
- B. explain the concern facilitate an appropriate referral and support continuity during transition
- C. review the formulation alliance goals and intervention and revise the plan collaboratively
- D. revise the plan collaboratively using the client's priorities language and informed choices

93. For Parker, the counselor elects to support safe exploration and communication without treating normative identity work as pathology. Which counseling principle most directly justifies this intervention?

- A. End-of-life counseling centers dignity autonomy meaning relationships grief and interdisciplinary collaboration
- B. Sound career decisions integrate self-knowledge opportunity knowledge and a workable decision process
- C. Loneliness reflects perceived relational disconnection rather than simply the number of social contacts
- D. Adolescence commonly involves increasing autonomy identity formation and changing family and peer relationships

94. In a session with Quinn, age 23, this concern becomes clear: A counselor feels unusually protective of a client whose history resembles the counselor's own. What is the best counseling response?

- A. notice the reaction reflect on its influence and obtain consultation if needed
- B. communicate the client's meaning and emotion without endorsing or condemning the choice
- C. maintain respect for the person while holding the harmful behavior open to examination
- D. stay regulated explore the rupture and avoid defensiveness or premature appeasement

95. In the case of Morgan, the counselor decides to strengthen the caregiver subsystem and clarify boundaries through enacted interaction. What is the strongest rationale for that choice?

- A. Existential counseling addresses fundamental conditions of living rather than reducing every concern to a symptom
- B. A collaborative safety plan provides concrete actions and differs from an unsupported promise not to self-harm
- C. Structural family work targets hierarchy subsystems and boundaries that organize recurring family transactions
- D. A genogram organizes multigenerational structure and themes while remaining a hypothesis-building tool

96. The counselor's plan for Cameron is to follow mandated-reporting law promptly while supporting the child and avoiding an investigative interrogation. Which statement best explains why this approach is appropriate?

- A. Ethical exploration respects self-determination and does not treat identity diversity as pathology
- B. Counselors report reasonable suspicion as required and leave forensic fact-finding to designated investigators
- C. Generalized anxiety involves persistent excessive worry across domains rather than fear limited to one cue
- D. End-of-life counseling centers dignity autonomy meaning relationships grief and interdisciplinary collaboration

97. For Parker, the counselor elects to seek qualified supervision and refer when competence cannot be established. Which counseling principle most directly justifies this intervention?

- A. Counselors practice only within boundaries supported by education training and supervised experience
- B. Financial arrangements should be explained early and managed in ways that preserve client welfare
- C. Technology does not remove duties concerning competence privacy access and legal authority to practice
- D. Confidentiality has legally and ethically recognized exceptions when serious foreseeable harm is present

98. A counselor responds to Quinn's situation by choosing to maintain respect for the person while holding the harmful behavior open to examination. Which principle best supports this response?

- A. Empathy seeks accurate understanding from the client's frame while preserving professional judgment and boundaries
- B. Cultural humility combines lifelong learning self-reflection attention to power and accountability
- C. Positive regard affirms human worth without requiring approval of every action
- D. Self-awareness helps counselors keep personal reactions from directing client care

99. In the case of Morgan, the counselor decides to follow the client's priorities while assessing distress supports values and coordination needs. What is the strongest rationale for that choice?

- A. Behavior must be interpreted against developmental expectations rather than adult standards
- B. End-of-life counseling centers dignity autonomy meaning relationships grief and interdisciplinary collaboration
- C. Retirement is a role transition whose impact depends on preparation resources health relationships and identity
- D. Trauma-responsive care avoids unnecessary re-exposure and recognizes intrusion avoidance arousal and meaning changes

100. The counselor's plan for Cameron is to assess burden safety beliefs supports and practical barriers while validating ambivalence. Which statement best explains why this approach is appropriate?

- A. Psychotic symptoms require careful evaluation of risk functioning context and possible medical or substance causes
- B. A history of mania or hypomania materially changes diagnosis risk assessment and treatment coordination
- C. Trauma-responsive care avoids unnecessary re-exposure and recognizes intrusion avoidance arousal and meaning changes
- D. Caregiver strain reflects demands resources meanings and support and may threaten both caregiver and recipient wellbeing

101. For Parker, the counselor elects to respectfully present the discrepancy and explore it without accusation. Which counseling principle most directly justifies this intervention?

- A. Constructive confrontation highlights incongruence while preserving empathy autonomy and the working alliance
- B. Open questions can expand exploration while timing focus and pacing protect the collaborative process
- C. Therapeutic silence can support emotion and meaning when it is responsive rather than avoidant or abandoning
- D. Existential counseling addresses fundamental conditions of living rather than reducing every concern to a symptom

102. A counselor responds to Quinn's situation by choosing to map reciprocal patterns and avoid assuming one person alone causes the family problem. Which principle best supports this response?

- A. Persistent insomnia is often maintained by arousal irregular timing and learned associations between bed and wakefulness
- B. Violence assessment prioritizes survivor autonomy privacy danger indicators and practical safety options
- C. Ethical exploration respects self-determination and does not treat identity diversity as pathology
- D. Systems thinking views symptoms within circular interaction patterns boundaries roles and wider contexts

103. In the case of Morgan, the counselor decides to assess medical risk behaviors body concerns and functioning without relying on appearance alone. What is the strongest rationale for that choice?

- A. Caregiver strain reflects demands resources meanings and support and may threaten both caregiver and recipient wellbeing
- B. Generalized anxiety involves persistent excessive worry across domains rather than fear limited to one cue
- C. Eating-disorder risk cannot be inferred from body size and may require prompt medical and nutritional coordination
- D. Career construction emphasizes meaning identity and adaptability rather than matching a person to one fixed occupation

104. During counseling with Cameron, age 32, the following issue emerges: A client discloses escalating partner violence and monitoring of communications. Which response is most appropriate?

- A. explore life themes adaptability strengths and the story connecting past roles with future possibilities
- B. assess immediate danger privately and collaborate on an individualized safety plan
- C. map reciprocal patterns and avoid assuming one person alone causes the family problem
- D. validate the contextual harm explore coping and supports and consider advocacy chosen by the client

105. A counselor is working with Parker, age 39. A client automatically concludes that one mistake proves total incompetence. Which action should the counselor take first?

- A. use open questions affirmations reflections and summaries to evoke the client's own reasons for change
- B. identify the situation thought emotion evidence alternatives and a balanced response
- C. strengthen the caregiver subsystem and clarify boundaries through enacted interaction
- D. build a collaborative graded practice plan while reducing safety behaviors

106. In a session with Quinn, age 46, this concern becomes clear: A student names several appealing occupations but cannot compare them systematically. What is the best counseling response?

- A. normalize varied grief responses while assessing culture functioning risk and signs requiring added care
- B. use nonjudgmental assessment of pattern consequences tolerance withdrawal motivation and risk
- C. follow mandated-reporting law promptly while supporting the child and avoiding an investigative interrogation
- D. clarify interests values abilities constraints and reliable occupational information

107. In the case of Morgan, the counselor decides to separate the child from the problem and explore times the anger had less influence. What is the strongest rationale for that choice?

- A. Externalizing language reduces identity fusion with problems and opens space for preferred stories and agency
- B. Motivational interviewing responds to ambivalence with partnership acceptance compassion and evocation
- C. Adlerian counseling emphasizes purposeful behavior social interest encouragement and the meanings formed within family context
- D. Constructive confrontation highlights incongruence while preserving empathy autonomy and the working alliance

108. During counseling with Cameron, age 60, the following issue emerges: A client asks to explore gender without being pushed toward a predetermined outcome. Which response is most appropriate?

- A. follow the client's priorities while assessing distress supports values and coordination needs
- B. assess the obsession-compulsion cycle time burden insight avoidance and impairment
- C. provide an affirming exploratory space guided by the client's language goals and pace
- D. assess immediate danger privately and collaborate on an individualized safety plan

109. For Parker, the counselor elects to interrupt the harmful behavior firmly and redirect toward safe respectful interaction. Which counseling principle most directly justifies this intervention?

- A. Strategic interventions target interaction sequences and attempted solutions that keep a problem going
- B. A collaborative safety plan provides concrete actions and differs from an unsupported promise not to self-harm
- C. Blocking protects members and group purpose while creating an opportunity to examine impact and alternatives
- D. Regulation skills work best when practiced repeatedly and used as tools rather than guarantees that anxiety disappears

110. A counselor responds to Quinn's situation by choosing to modify the plan to address scheduling and access barriers before labeling the client resistant. Which principle best supports this response?

- A. Strengths can improve engagement feasibility resilience and progress toward treatment goals
- B. Treatment planning is strongest when goals are meaningful to the client and jointly developed
- C. Planned termination consolidates learning anticipates setbacks and supports increasing client independence
- D. Treatment barriers should be identified collaboratively and addressed as practical contextual or motivational obstacles

111. In the case of Morgan, the counselor decides to invite them to notice and discuss the shared theme with each other. What is the strongest rationale for that choice?

- A. Immediacy uses the current therapeutic relationship to examine interpersonal patterns as they occur
- B. Linking moves interaction among members and helps transform parallel disclosures into therapeutic group work
- C. Attending behaviors communicate availability and should be adapted rather than applied as rigid universal rules
- D. Collaborative goals convert preferred outcomes into manageable action without taking ownership away from the client

112. During counseling with Cameron, age 27, the following issue emerges: A family shows diffuse parent-child boundaries and weak coordination between caregivers. Which response is most appropriate?

- A. strengthen the caregiver subsystem and clarify boundaries through enacted interaction
- B. state the central meaning concisely and check whether the understanding fits
- C. offer accurate empathy congruence and unconditional positive regard without directing the choice
- D. tentatively reflect the possible hurt and invite correction

113. A counselor is working with Parker, age 34. A client spends long periods awake in bed and varies wake time dramatically on weekends. Which action should the counselor take first?

- A. assess safety command content reality testing substance use medical causes and level of care
- B. explore identity structure relationships meaning and new sources of contribution
- C. assess attachment needs interaction patterns barriers and opportunities for meaningful connection
- D. assess sleep schedule substances medical factors mood and behaviors that condition wakefulness

114. In a session with Quinn, age 41, this concern becomes clear: A client shifts rapidly from intense anger to shame and acts impulsively during conflicts. What is the best counseling response?

- A. assess mood sleep medication medical factors daily functioning and cognitive pattern
- B. validate the contextual harm explore coping and supports and consider advocacy chosen by the client
- C. assess triggers vulnerability cues consequences and available regulation skills
- D. assess safety power imbalance frequency supports and the student's preferences for response

115. Morgan, age 48, meets with a counselor. A client notices that the counselor's reassuring words conflict with a tense tone. What is the counselor's best next response?

- A. respond honestly and professionally rather than hiding behind a false therapeutic role
- B. maintain respect for the person while holding the harmful behavior open to examination
- C. respond with curiosity and calm while assessing meaning risk and context
- D. ask respectfully about the client's meanings and remain open to correction

116. The counselor's plan for Cameron is to assess safety power imbalance frequency supports and the student's preferences for response. Which statement best explains why this approach is appropriate?

- A. Generalized anxiety involves persistent excessive worry across domains rather than fear limited to one cue
- B. Bullying involves repeated aggression and power imbalance and requires attention to safety climate and bystander systems
- C. Panic concerns include the attacks themselves and the learned fear and avoidance that can follow them
- D. Systems thinking views symptoms within circular interaction patterns boundaries roles and wider contexts

117. A counselor is working with Parker, age 62. A survivor reports intrusive memories avoidance hyperarousal and negative beliefs after an assault. Which action should the counselor take first?

- A. assess safety command content reality testing substance use medical causes and level of care
- B. explore meanings supports costs and choices without imposing the counselor's worldview
- C. use a trauma-informed assessment that prioritizes safety choice pacing and current functioning
- D. frame assessment and intervention around developmental capacity temperament context and caregiver support

118. A counselor responds to Quinn's situation by choosing to explore recurring relational themes defenses and their appearance in the therapeutic relationship. Which principle best supports this response?

- A. Regulation skills work best when practiced repeatedly and used as tools rather than guarantees that anxiety disappears
- B. Attending behaviors communicate availability and should be adapted rather than applied as rigid universal rules
- C. Structural family work targets hierarchy subsystems and boundaries that organize recurring family transactions
- D. Psychodynamic work links present patterns with unconscious conflict attachment and earlier relational experience

119. Morgan, age 15, meets with a counselor. A client minimizes drinking despite withdrawal symptoms missed work and family conflict. What is the counselor's best next response?

- A. use nonjudgmental assessment of pattern consequences tolerance withdrawal motivation and risk
- B. assess safety power imbalance frequency supports and the student's preferences for response
- C. assess panic episodes anticipatory anxiety avoidance medical factors and functional impact
- D. explore identity structure relationships meaning and new sources of contribution

120. The counselor's plan for Cameron is to reduce risk to clients and obtain consultation support or temporary limits on practice. Which statement best explains why this approach is appropriate?

- A. Financial arrangements should be explained early and managed in ways that preserve client welfare
- B. Counselors monitor impairment and act before personal functioning compromises professional services
- C. Research and publication require respect for autonomy privacy and foreseeable risks to participants
- D. Counselors practice only within boundaries supported by education training and supervised experience

121. A counselor is working with Parker, age 29. A guarded client speaks softly and watches whether the counselor remains engaged. Which action should the counselor take first?

- A. offer accurate empathy congruence and unconditional positive regard without directing the choice
- B. teach and rehearse paced breathing or muscle relaxation while monitoring its effect
- C. use a scale to identify exceptions existing resources and the next small change
- D. use culturally responsive eye contact posture presence and minimal encouragers

122. A counselor responds to Quinn's situation by choosing to document orientation thought process attention and other current mental status findings. Which principle best supports this response?

- A. Validity concerns evidence supporting the meaning and use of scores for a particular purpose
- B. The mental status examination describes present observable functioning rather than lifelong personality traits
- C. Reliability concerns the consistency or dependability of measurement across relevant occasions or items
- D. Screening identifies possible risk and need for evaluation but does not independently establish a disorder

123. In the case of Morgan, the counselor decides to follow applicable law consult promptly and take protective steps required in the jurisdiction. What is the strongest rationale for that choice?

- A. Confidentiality has legally and ethically recognized exceptions when serious foreseeable harm is present
- B. Counselor advocacy can target environmental barriers while preserving client choice and collaboration
- C. Clinical records should be timely objective relevant and altered only through an auditable process
- D. Technology does not remove duties concerning competence privacy access and legal authority to practice

124. During counseling with Cameron, age 50, the following issue emerges: A student reports repeated targeted humiliation and fears retaliation if adults intervene visibly. Which response is most appropriate?

- A. clarify interests values abilities constraints and reliable occupational information
- B. explore worry breadth duration physical tension sleep and impairment
- C. assess safety power imbalance frequency supports and the student's preferences for response
- D. assess attachment needs interaction patterns barriers and opportunities for meaningful connection

125. A counselor is working with Parker, age 57. A client with a specific fear avoids every reminder and seeks constant reassurance. Which action should the counselor take first?

- A. build a collaborative graded practice plan while reducing safety behaviors
- B. gently describe the here-and-now interaction and invite exploration of its meaning
- C. identify safe supports and plan specific realistic steps for reconnection
- D. teach and rehearse paced breathing or muscle relaxation while monitoring its effect

126. In a session with Quinn, age 64, this concern becomes clear: A client describes being overlooked for promotion and says it did not matter while appearing tearful. What is the best counseling response?

- A. explore freedom responsibility isolation mortality and personally chosen meaning
- B. tentatively reflect the possible hurt and invite correction
- C. write a prioritized plan of coping contacts professional resources and means-safety steps
- D. explore lifestyle private logic belonging and socially useful alternatives

127. Morgan, age 71, meets with a counselor. A client gives brief answers while describing a complicated relationship pattern. What is the counselor's best next response?

- A. strengthen the caregiver subsystem and clarify boundaries through enacted interaction
- B. state the central meaning concisely and check whether the understanding fits
- C. build a collaborative graded practice plan while reducing safety behaviors
- D. invite elaboration with a focused open question rather than conducting a rapid

128. During counseling with Cameron, age 17, the following issue emerges: A client needs specialized eating-disorder care beyond the counselor's competence. Which response is most appropriate?

- A. review the formulation alliance goals and intervention and revise the plan collaboratively
- B. obtain appropriate consent and coordinate relevant information across providers
- C. explain the concern facilitate an appropriate referral and support continuity during transition
- D. translate the goal into observable achievable steps with a review period and indicators of progress

129. For Parker, the counselor elects to correct future documentation and amend records transparently without concealing the original entry. Which counseling principle most directly justifies this intervention?

- A. Clinical records should be timely objective relevant and altered only through an auditable process
- B. Counselors monitor impairment and act before personal functioning compromises professional services
- C. Valid informed consent requires understandable information and a genuine opportunity for questions
- D. Technology does not remove duties concerning competence privacy access and legal authority to practice

130. A counselor responds to Quinn's situation by choosing to use a trauma-informed assessment that prioritizes safety choice pacing and current functioning. Which principle best supports this response?

- A. Compulsions are negatively reinforced when temporary relief strengthens rituals despite their long-term cost
- B. End-of-life counseling centers dignity autonomy meaning relationships grief and interdisciplinary collaboration
- C. Grief is not a uniform sequence and should be understood in cultural relational and developmental context
- D. Trauma-responsive care avoids unnecessary re-exposure and recognizes intrusion avoidance arousal and meaning changes

131. Morgan, age 38, meets with a counselor. A client with recurrent depression recalls episodes of little sleep elevated energy and risky spending. What is the counselor's best next response?

- A. explore worry breadth duration physical tension sleep and impairment
- B. assess the obsession-compulsion cycle time burden insight avoidance and impairment
- C. assess distinct periods of mood elevation before using a unipolar depression formulation
- D. map reciprocal patterns and avoid assuming one person alone causes the family problem

132. The counselor's plan for Cameron is to validate the contextual harm explore coping and supports and consider advocacy chosen by the client. Which statement best explains why this approach is appropriate?

- A. Counselors report reasonable suspicion as required and leave forensic fact-finding to designated investigators
- B. Culturally responsive counseling locates distress within both personal experience and oppressive environmental conditions
- C. Spiritual and religious concerns require cultural humility and protection of client autonomy
- D. Systems thinking views symptoms within circular interaction patterns boundaries roles and wider contexts

133. A counselor is working with Parker, age 52. A client experiences abrupt surges of fear with palpitations and begins avoiding places where attacks occurred. Which action should the counselor take first?

- A. assess panic episodes anticipatory anxiety avoidance medical factors and functional impact
- B. explore identity structure relationships meaning and new sources of contribution
- C. assess the obsession-compulsion cycle time burden insight avoidance and impairment
- D. assess safety power imbalance frequency supports and the student's preferences for response

134. In a session with Quinn, age 59, this concern becomes clear: A client becomes angry after the counselor names a missed appointment pattern. What is the best counseling response?

- A. maintain respect for the person while holding the harmful behavior open to examination
- B. stay regulated explore the rupture and avoid defensiveness or premature appeasement
- C. communicate the client's meaning and emotion without endorsing or condemning the choice
- D. respond honestly and professionally rather than hiding behind a false therapeutic role

135. Morgan, age 66, meets with a counselor. A client values honesty yet repeatedly hides important information from supportive people. What is the counselor's best next response?

- A. invite them to notice and discuss the shared theme with each other
- B. explore freedom responsibility isolation mortality and personally chosen meaning
- C. interrupt the maintaining sequence with a focused directive suited to the family's context
- D. respectfully present the discrepancy and explore it without accusation

136. The counselor's plan for Cameron is to translate the goal into observable achievable steps with a review period and indicators of progress. Which statement best explains why this approach is appropriate?

- A. Treatment barriers should be identified collaboratively and addressed as practical contextual or motivational obstacles
- B. Strengths can improve engagement feasibility resilience and progress toward treatment goals
- C. Specific measurable objectives make progress review and plan revision possible
- D. Planned termination consolidates learning anticipates setbacks and supports increasing client independence

137. A counselor is working with Parker, age 19. An attorney sends a subpoena for notes without client authorization or a judge's order. Which action should the counselor take first?

- A. follow applicable law consult promptly and take protective steps required in the jurisdiction
- B. seek qualified supervision and refer when competence cannot be established
- C. protect confidentiality while consulting counsel and seeking clarification or court direction
- D. give timely notice provide referrals and arrange continuity consistent with client needs

138. A counselor responds to Quinn's situation by choosing to gently describe the here-and-now interaction and invite exploration of its meaning. Which principle best supports this response?

- A. Motivational interviewing responds to ambivalence with partnership acceptance compassion and evocation
- B. Exposure promotes new learning through planned contact with feared cues rather than forced flooding or reassurance
- C. Linking moves interaction among members and helps transform parallel disclosures into therapeutic group work
- D. Immediacy uses the current therapeutic relationship to examine interpersonal patterns as they occur

139. Morgan, age 33, meets with a counselor. A depression inventory consistently measures general distress rather than depressive symptoms. What is the counselor's best next response?

- A. use a comparison group that matches the client's relevant characteristics and testing purpose
- B. question whether score interpretations represent the construct the instrument claims to measure
- C. question the measure's consistency before drawing strong conclusions from the score
- D. arrange urgent evaluation for a setting capable of medical monitoring and stabilization

140. During counseling with Cameron, age 40, the following issue emerges: Two group members describe different events that share a theme of fearing rejection. Which response is most appropriate?

- A. invite them to notice and discuss the shared theme with each other
- B. interrupt the maintaining sequence with a focused directive suited to the family's context
- C. gently describe the here-and-now interaction and invite exploration of its meaning
- D. respectfully present the discrepancy and explore it without accusation

141. For Parker, the counselor elects to disclose only if the likely client benefit is clear and return focus promptly to the client. Which counseling principle most directly justifies this intervention?

- A. Structural family work targets hierarchy subsystems and boundaries that organize recurring family transactions
- B. Existential counseling addresses fundamental conditions of living rather than reducing every concern to a symptom
- C. A collaborative safety plan provides concrete actions and differs from an unsupported promise not to self-harm
- D. Counselor self-disclosure should be intentional brief culturally considered and driven by client welfare

142. In a session with Quinn, age 54, this concern becomes clear: A client discloses stigmatized thoughts with visible shame. What is the best counseling response?

- A. notice the reaction reflect on its influence and obtain consultation if needed
- B. respond with curiosity and calm while assessing meaning risk and context
- C. respond honestly and professionally rather than hiding behind a false therapeutic role
- D. communicate the client's meaning and emotion without endorsing or condemning the choice

143. In the case of Morgan, the counselor decides to obtain appropriate consent and protect identity before using material beyond its original purpose. What is the strongest rationale for that choice?

- A. Ending services requires attention to abandonment risk records emergencies and reasonable transition support
- B. Counselor advocacy can target environmental barriers while preserving client choice and collaboration
- C. Research and publication require respect for autonomy privacy and foreseeable risks to participants
- D. Counselors practice only within boundaries supported by education training and supervised experience

144. During counseling with Cameron, age 68, the following issue emerges: A client needs skills practice and peer feedback but feels unsafe in the proposed group. Which response is most appropriate?

- A. evaluate readiness preferences risks and alternatives before selecting the modality
- B. revise the plan collaboratively using the client's priorities language and informed choices
- C. modify the plan to address scheduling and access barriers before labeling the client resistant
- D. explain the concern facilitate an appropriate referral and support continuity during transition

145. For Parker, the counselor elects to interrupt the maintaining sequence with a focused directive suited to the family's context. Which counseling principle most directly justifies this intervention?

- A. Accurate feeling reflections deepen awareness without claiming certainty about the client's internal experience
- B. Strategic interventions target interaction sequences and attempted solutions that keep a problem going
- C. Adlerian counseling emphasizes purposeful behavior social interest encouragement and the meanings formed within family context
- D. Exposure promotes new learning through planned contact with feared cues rather than forced flooding or reassurance

146. A counselor responds to Quinn's situation by choosing to provide structure clarify expectations and support gradual safety and participation. Which principle best supports this response?

- A. Early group development commonly requires orientation predictability inclusion and trust building
- B. Immediacy uses the current therapeutic relationship to examine interpersonal patterns as they occur
- C. Collaborative goals convert preferred outcomes into manageable action without taking ownership away from the client
- D. Strategic interventions target interaction sequences and attempted solutions that keep a problem going

147. In the case of Morgan, the counselor decides to communicate the client's meaning and emotion without endorsing or condemning the choice. What is the strongest rationale for that choice?

- A. Congruence involves alignment and authentic presence used in service of the client
- B. Cultural humility combines lifelong learning self-reflection attention to power and accountability
- C. Empathy seeks accurate understanding from the client's frame while preserving professional judgment and boundaries
- D. Conflict tolerance allows disagreement to become useful information while protecting safety and respect

148. The counselor's plan for Cameron is to revise the plan collaboratively using the client's priorities language and informed choices. Which statement best explains why this approach is appropriate?

- A. Coordinated care reduces fragmentation while disclosure remains limited to authorized and necessary information
- B. Strengths can improve engagement feasibility resilience and progress toward treatment goals
- C. Treatment modality should match goals safety development culture functioning and client preference
- D. Treatment planning is strongest when goals are meaningful to the client and jointly developed

149. For Parker, the counselor elects to question whether score interpretations represent the construct the instrument claims to measure. Which counseling principle most directly justifies this intervention?

- A. Validity concerns evidence supporting the meaning and use of scores for a particular purpose
- B. The mental status examination describes present observable functioning rather than lifelong personality traits
- C. Specificity access and imminence help determine the level of risk and the urgency of intervention
- D. Culturally responsive assessment explores meaning context identity supports and help-seeking expectations

150. In a session with Quinn, age 49, this concern becomes clear: A new client is unsure what counseling records contain and who may receive them. What is the best counseling response?

- A. obtain appropriate consent and protect identity before using material beyond its original purpose
- B. review services risks benefits fees records and confidentiality before treatment begins
- C. seek qualified supervision and refer when competence cannot be established
- D. protect confidentiality while consulting counsel and seeking clarification or court direction

151. Morgan, age 56, meets with a counselor. A caregiver reports exhaustion resentment and guilt but refuses all offers of respite. What is the counselor's best next response?

- A. assess sleep schedule substances medical factors mood and behaviors that condition wakefulness
- B. explore identity structure relationships meaning and new sources of contribution
- C. assess immediate danger privately and collaborate on an individualized safety plan
- D. assess burden safety beliefs supports and practical barriers while validating ambivalence

152. During counseling with Cameron, age 63, the following issue emerges: A client hears threatening voices and appears unable to distinguish them from external events. Which response is most appropriate?

- A. assess triggers vulnerability cues consequences and available regulation skills
- B. validate the contextual harm explore coping and supports and consider advocacy chosen by the client
- C. assess safety command content reality testing substance use medical causes and level of care
- D. support safe exploration and communication without treating normative identity work as pathology

153. A counselor is working with Parker, age 70. A client feels inferior and seeks significance through perfectionistic overachievement. Which action should the counselor take first?

- A. explore lifestyle private logic belonging and socially useful alternatives
- B. explore recurring relational themes defenses and their appearance in the therapeutic relationship
- C. separate the child from the problem and explore times the anger had less influence
- D. build a collaborative graded practice plan while reducing safety behaviors

154. In a session with Quinn, age 16, this concern becomes clear: A client seeks reassurance through repeated contact outside agreed session limits. What is the best counseling response?

- A. respond with curiosity and calm while assessing meaning risk and context
- B. respond warmly while restating the boundary and exploring the need beneath the contact
- C. notice the reaction reflect on its influence and obtain consultation if needed
- D. respond honestly and professionally rather than hiding behind a false therapeutic role

155. Morgan, age 23, meets with a counselor. A client facing housing instability has strong family support persistence and effective problem-solving skills. What is the counselor's best next response?

- A. evaluate readiness preferences risks and alternatives before selecting the modality
- B. obtain appropriate consent and coordinate relevant information across providers
- C. incorporate these strengths as resources in the plan rather than documenting only deficits

156. The counselor's plan for Cameron is to respond warmly while restating the boundary and exploring the need beneath the contact. Which statement best explains why this approach is appropriate?

- A. Self-awareness helps counselors keep personal reactions from directing client care
- B. A nonjudgmental stance reduces shame and supports accurate disclosure without eliminating necessary assessment
- C. Empathy seeks accurate understanding from the client's frame while preserving professional judgment and boundaries
- D. Effective counselors combine care and responsiveness with predictable ethical limits

157. For Parker, the counselor elects to notice the reaction reflect on its influence and obtain consultation if needed. Which counseling principle most directly justifies this intervention?

- A. Self-awareness helps counselors keep personal reactions from directing client care
- B. A nonjudgmental stance reduces shame and supports accurate disclosure without eliminating necessary assessment
- C. Conflict tolerance allows disagreement to become useful information while protecting safety and respect
- D. Congruence involves alignment and authentic presence used in service of the client

158. A counselor responds to Quinn's situation by choosing to translate the broad wish into a small personally meaningful and achievable first step. Which principle best supports this response?

- A. Regulation skills work best when practiced repeatedly and used as tools rather than guarantees that anxiety disappears
- B. Constructive confrontation highlights incongruence while preserving empathy autonomy and the working alliance
- C. A collaborative safety plan provides concrete actions and differs from an unsupported promise not to self-harm
- D. Collaborative goals convert preferred outcomes into manageable action without taking ownership away from the client

159. In the case of Morgan, the counselor decides to teach and rehearse paced breathing or muscle relaxation while monitoring its effect. What is the strongest rationale for that choice?

- A. Summaries integrate material support transitions and create a shared understanding of the session
- B. Regulation skills work best when practiced repeatedly and used as tools rather than guarantees that anxiety disappears
- C. Therapeutic silence can support emotion and meaning when it is responsive rather than avoidant or abandoning
- D. Paraphrasing organizes content and demonstrates listening while allowing the client to correct misunderstandings

160. During counseling with Cameron, age 58, the following issue emerges: A client has met goals and fears that ending counseling means losing all support. Which response is most appropriate?

- A. revise the plan collaboratively using the client's priorities language and informed choices
- B. review the formulation alliance goals and intervention and revise the plan collaboratively
- C. process the meaning of ending review gains plan relapse prevention and arrange follow-up options
- D. evaluate readiness preferences risks and alternatives before selecting the modality

161. A counselor is working with Parker, age 65. Family members blame one teenager while interaction patterns show escalating criticism and withdrawal. Which action should the counselor take first?

- A. explore meanings supports costs and choices without imposing the counselor's worldview
- B. map reciprocal patterns and avoid assuming one person alone causes the family problem
- C. assess burden safety beliefs supports and practical barriers while validating ambivalence
- D. provide an affirming exploratory space guided by the client's language goals and pace

162. A counselor responds to Quinn's situation by choosing to respond with curiosity and calm while assessing meaning risk and context. Which principle best supports this response?

- A. Congruence involves alignment and authentic presence used in service of the client
- B. Cultural humility combines lifelong learning self-reflection attention to power and accountability
- C. A nonjudgmental stance reduces shame and supports accurate disclosure without eliminating necessary assessment
- D. Empathy seeks accurate understanding from the client's frame while preserving professional judgment and boundaries

163. In the case of Morgan, the counselor decides to assess attachment needs interaction patterns barriers and opportunities for meaningful connection. What is the strongest rationale for that choice?

- A. Loneliness reflects perceived relational disconnection rather than simply the number of social contacts
- B. Caregiver strain reflects demands resources meanings and support and may threaten both caregiver and recipient wellbeing
- C. Career construction emphasizes meaning identity and adaptability rather than matching a person to one fixed occupation
- D. Behavior must be interpreted against developmental expectations rather than adult standards

164. During counseling with Cameron, age 25, the following issue emerges: A counselor knows general facts about a client's cultural group but not this client's experience. Which response is most appropriate?

- A. communicate the client's meaning and emotion without endorsing or condemning the choice
- B. notice the reaction reflect on its influence and obtain consultation if needed
- C. respond honestly and professionally rather than hiding behind a false therapeutic role
- D. ask respectfully about the client's meanings and remain open to correction

165. For Parker, the counselor elects to use a scale to identify exceptions existing resources and the next small change. Which counseling principle most directly justifies this intervention?

- A. Open questions can expand exploration while timing focus and pacing protect the collaborative process
- B. Psychodynamic work links present patterns with unconscious conflict attachment and earlier relational experience
- C. Structural family work targets hierarchy subsystems and boundaries that organize recurring family transactions
- D. Scaling can make differences visible and support client-defined movement without denying the seriousness of distress

166. A counselor responds to Quinn's situation by choosing to build a collaborative graded practice plan while reducing safety behaviors. Which principle best supports this response?

- A. Exposure promotes new learning through planned contact with feared cues rather than forced flooding or reassurance
- B. Early group development commonly requires orientation predictability inclusion and trust building
- C. Constructive confrontation highlights incongruence while preserving empathy autonomy and the working alliance
- D. Motivational interviewing responds to ambivalence with partnership acceptance compassion and evocation

167. Morgan, age 46, meets with a counselor. Testing suggests strengths and concerns that differ from the client's self-description. What is the counselor's best next response?

- A. document orientation thought process attention and other current mental status findings
- B. question whether score interpretations represent the construct the instrument claims to measure
- C. review results collaboratively in plain language and integrate them with other available evidence
- D. question the measure's consistency before drawing strong conclusions from the score

168. The counselor's plan for Cameron is to assess the obsession-compulsion cycle time burden insight avoidance and impairment. Which statement best explains why this approach is appropriate?

- A. Psychotic symptoms require careful evaluation of risk functioning context and possible medical or substance causes
- B. Compulsions are negatively reinforced when temporary relief strengthens rituals despite their long-term cost
- C. Sound career decisions integrate self-knowledge opportunity knowledge and a workable decision process
- D. Ethical exploration respects self-determination and does not treat identity diversity as pathology

169. For Parker, the counselor elects to question the measure's consistency before drawing strong conclusions from the score. Which counseling principle most directly justifies this intervention?

- A. Validity concerns evidence supporting the meaning and use of scores for a particular purpose
- B. Reliability concerns the consistency or dependability of measurement across relevant occasions or items
- C. Risk assessment requires direct inquiry and synthesis of acute and chronic risk and protective factors
- D. Differential diagnosis compares plausible explanations and rules out conditions that better account for symptoms

170. A counselor responds to Quinn's situation by choosing to decline the financial relationship and process the request within counseling. Which principle best supports this response?

- A. Clinical records should be timely objective relevant and altered only through an auditable process
- B. Research and publication require respect for autonomy privacy and foreseeable risks to participants
- C. Counselors practice only within boundaries supported by education training and supervised experience
- D. Counselors avoid nonprofessional roles when exploitation impaired judgment or client harm is reasonably possible

171. In the case of Morgan, the counselor decides to use a comparison group that matches the client's relevant characteristics and testing purpose. What is the strongest rationale for that choice?

- A. Validity concerns evidence supporting the meaning and use of scores for a particular purpose
- B. Assessment is an ongoing collaborative process and test scores are only one source of clinical information
- C. Norm-referenced interpretations depend on an appropriate and representative standardization group
- D. Reliability concerns the consistency or dependability of measurement across relevant occasions or items

172. The counselor's plan for Cameron is to use culturally responsive eye contact posture presence and minimal encouragers. Which statement best explains why this approach is appropriate?

- A. Attending behaviors communicate availability and should be adapted rather than applied as rigid universal rules
- B. A collaborative safety plan provides concrete actions and differs from an unsupported promise not to self-harm
- C. Immediacy uses the current therapeutic relationship to examine interpersonal patterns as they occur
- D. Collaborative goals convert preferred outcomes into manageable action without taking ownership away from the client

173. For Parker, the counselor elects to evaluate readiness preferences risks and alternatives before selecting the modality. Which counseling principle most directly justifies this intervention?

- A. Treatment planning is strongest when goals are meaningful to the client and jointly developed
- B. Treatment modality should match goals safety development culture functioning and client preference
- C. Referral protects welfare when client needs exceed competence resources or the current level of care
- D. Coordinated care reduces fragmentation while disclosure remains limited to authorized and necessary information

174. A counselor responds to Quinn's situation by choosing to assess distinct periods of mood elevation before using a unipolar depression formulation. Which principle best supports this response?

- A. Retirement is a role transition whose impact depends on preparation resources health relationships and identity
- B. Behavior must be interpreted against developmental expectations rather than adult standards
- C. A history of mania or hypomania materially changes diagnosis risk assessment and treatment coordination
- D. Depressive presentations require attention to mood anhedonia cognition vegetative changes functioning and suicide risk

175. In the case of Morgan, the counselor decides to ask how the client and community understand the problem and preferred sources of help. What is the strongest rationale for that choice?

- A. Culturally responsive assessment explores meaning context identity supports and help-seeking expectations
- B. Assessment is an ongoing collaborative process and test scores are only one source of clinical information
- C. Differential diagnosis compares plausible explanations and rules out conditions that better account for symptoms
- D. Reliability concerns the consistency or dependability of measurement across relevant occasions or items

176. The counselor's plan for Cameron is to use open questions affirmations reflections and summaries to evoke the client's own reasons for change. Which statement best explains why this approach is appropriate?

- A. Attending behaviors communicate availability and should be adapted rather than applied as rigid universal rules
- B. Cognitive restructuring examines interpretations and evidence rather than simply replacing negative thoughts with optimism
- C. A genogram organizes multigenerational structure and themes while remaining a hypothesis-building tool
- D. Motivational interviewing responds to ambivalence with partnership acceptance compassion and evocation

177. For Parker, the counselor elects to assess safety command content reality testing substance use medical causes and level of care. Which counseling principle most directly justifies this intervention?

- A. Compulsions are negatively reinforced when temporary relief strengthens rituals despite their long-term cost
- B. Career construction emphasizes meaning identity and adaptability rather than matching a person to one fixed occupation
- C. Psychotic symptoms require careful evaluation of risk functioning context and possible medical or substance causes
- D. Eating-disorder risk cannot be inferred from body size and may require prompt medical and nutritional coordination

178. In a session with Quinn, age 62, this concern becomes clear: During intake a client becomes confused about the date and gives tangential answers. What is the best counseling response?

- A. question the measure's consistency before drawing strong conclusions from the score
- B. document orientation thought process attention and other current mental status findings
- C. gather biological psychological social cultural and medical information before concluding the cause
- D. complete a fuller assessment rather than treating the screen as a definitive diagnosis

179. Morgan, age 69, meets with a counselor. A client wants life to improve but cannot identify a starting point. What is the counselor's best next response?

- A. invite elaboration with a focused open question rather than conducting a rapid interrogation
- B. explore lifestyle private logic belonging and socially useful alternatives
- C. offer accurate empathy congruence and unconditional positive regard without directing the choice
- D. translate the broad wish into a small personally meaningful and achievable first step

180. During counseling with Cameron, age 15, the following issue emerges: A depressed client waits to feel motivated before resuming valued activities. Which response is most appropriate?

- A. schedule small feasible activities and track mood mastery and pleasure afterward
- B. explore lifestyle private logic belonging and socially useful alternatives
- C. respectfully present the discrepancy and explore it without accusation
- D. interrupt the harmful behavior firmly and redirect toward safe respectful interaction

181. A counselor is working with Parker, age 22. A client has unwanted contamination thoughts and repetitive washing performed to reduce distress. Which action should the counselor take first?

- A. assess the obsession-compulsion cycle time burden insight avoidance and impairment
- B. explore life themes adaptability strengths and the story connecting past roles with future possibilities
- C. use a trauma-informed assessment that prioritizes safety choice pacing and current functioning
- D. normalize varied grief responses while assessing culture functioning risk and signs requiring added care

182. In a session with Quinn, age 29, this concern becomes clear: A client makes a credible specific threat toward an identifiable person. What is the best counseling response?

- A. decline the financial relationship and process the request within counseling
- B. verify security informed consent emergency procedures and applicable jurisdictional rules before use
- C. protect confidentiality while consulting counsel and seeking clarification or court direction
- D. follow applicable law consult promptly and take protective steps required in the jurisdiction

183. Morgan, age 36, meets with a counselor. A counselor notices persistent exhaustion irritability and mistakes that are affecting sessions. What is the counselor's best next response?

- A. review the written agreement discuss options and avoid abrupt abandonment
- B. reduce risk to clients and obtain consultation support or temporary limits on practice
- C. obtain appropriate consent and protect identity before using material beyond its original purpose
- D. seek qualified supervision and refer when competence cannot be established

184. During counseling with Cameron, age 43, the following issue emerges: A client wants a portable response to escalating physiological arousal. Which response is most appropriate?

- A. tentatively reflect the possible hurt and invite correction
- B. invite elaboration with a focused open question rather than conducting a rapid interrogation
- C. teach and rehearse paced breathing or muscle relaxation while monitoring its effect
- D. translate the broad wish into a small personally meaningful and achievable first step

185. A counselor is working with Parker, age 50. A recently bereaved client worries that waves of sadness mean something is seriously wrong. Which action should the counselor take first?

- A. assess triggers vulnerability cues consequences and available regulation skills
- B. normalize varied grief responses while assessing culture functioning risk and signs requiring added care
- C. provide an affirming exploratory space guided by the client's language goals and pace
- D. frame assessment and intervention around developmental capacity temperament context and caregiver support

186. In a session with Quinn, age 57, this concern becomes clear: A client describes a decision the counselor would not personally make. What is the best counseling response?

- A. respond honestly and professionally rather than hiding behind a false therapeutic role
- B. stay regulated explore the rupture and avoid defensiveness or premature appeasement
- C. communicate the client's meaning and emotion without endorsing or condemning the choice
- D. respond with curiosity and calm while assessing meaning risk and context

187. In the case of Morgan, the counselor decides to review the written agreement discuss options and avoid abrupt abandonment. What is the strongest rationale for that choice?

- A. Financial arrangements should be explained early and managed in ways that preserve client welfare
- B. Valid informed consent requires understandable information and a genuine opportunity for questions
- C. Technology does not remove duties concerning competence privacy access and legal authority to practice
- D. A subpoena should not be treated automatically as permission to disclose the complete record

188. During counseling with Cameron, age 71, the following issue emerges: A client sees both benefits and costs of changing substance use. Which response is most appropriate?

- A. schedule small feasible activities and track mood mastery and pleasure afterward
- B. disclose only if the likely client benefit is clear and return focus promptly to the client
- C. separate the child from the problem and explore times the anger had less influence
- D. use open questions affirmations reflections and summaries to evoke the client's own reasons for change

189. A counselor is working with Parker, age 17. A client recovering from depression has withdrawn from every supportive relationship. Which action should the counselor take first?

- A. identify safe supports and plan specific realistic steps for reconnection
- B. use open questions affirmations reflections and summaries to evoke the client's own reasons for change
- C. prioritize safety stabilization immediate needs supports and a short practical plan

190. In a session with Quinn, age 24, this concern becomes clear: A client fears judgment while considering a major life decision. What is the best counseling response?

- A. state the central meaning concisely and check whether the understanding fits
- B. schedule small feasible activities and track mood mastery and pleasure afterward
- C. offer accurate empathy congruence and unconditional positive regard without directing the choice
- D. tentatively reflect the possible hurt and invite correction

191. In the case of Morgan, the counselor decides to offer accurate empathy congruence and unconditional positive regard without directing the choice. What is the strongest rationale for that choice?

- A. Accurate feeling reflections deepen awareness without claiming certainty about the client's internal experience
- B. Psychodynamic work links present patterns with unconscious conflict attachment and earlier relational experience
- C. Externalizing language reduces identity fusion with problems and opens space for preferred stories and agency
- D. Person-centered conditions support growth by creating a relationship marked by genuineness acceptance and empathic understanding

192. During counseling with Cameron, age 38, the following issue emerges: A counselor writes goals before asking what changes matter most to the client. Which response is most appropriate?

- A. process the meaning of ending review gains plan relapse prevention and arrange follow-up options
- B. revise the plan collaboratively using the client's priorities language and informed choices
- C. incorporate these strengths as resources in the plan rather than documenting only deficits
- D. translate the goal into observable achievable steps with a review period and indicators of progress

193. A counselor is working with Parker, age 45. A new client reports panic symptoms while also describing recent medication changes. Which action should the counselor take first?

- A. gather biological psychological social cultural and medical information before concluding the cause
- B. use a comparison group that matches the client's relevant characteristics and testing purpose
- C. document orientation thought process attention and other current mental status findings
- D. arrange urgent evaluation for a setting capable of medical monitoring and stabilization

194. A counselor responds to Quinn's situation by choosing to process the meaning of ending review gains plan relapse prevention and arrange follow-up options. Which principle best supports this response?

- A. Strengths can improve engagement feasibility resilience and progress toward treatment goals
- B. Treatment modality should match goals safety development culture functioning and client preference
- C. Planned termination consolidates learning anticipates setbacks and supports increasing client independence
- D. Coordinated care reduces fragmentation while disclosure remains limited to authorized and necessary information

195. In the case of Morgan, the counselor decides to clarify interests values abilities constraints and reliable occupational information. What is the strongest rationale for that choice?

- A. Retirement is a role transition whose impact depends on preparation resources health relationships and identity
- B. Sound career decisions integrate self-knowledge opportunity knowledge and a workable decision process
- C. Compulsions are negatively reinforced when temporary relief strengthens rituals despite their long-term cost
- D. Caregiver strain reflects demands resources meanings and support and may threaten both caregiver and recipient wellbeing

196. During counseling with Cameron, age 66, the following issue emerges: A suicidal client can collaborate and identifies warning signs before risk escalates. Which response is most appropriate?

- A. identify safe supports and plan specific realistic steps for reconnection
- B. translate the broad wish into a small personally meaningful and achievable first step
- C. build a collaborative graded practice plan while reducing safety behaviors
- D. write a prioritized plan of coping contacts professional resources and means-safety steps

197. For Parker, the counselor elects to schedule small feasible activities and track mood mastery and pleasure afterward. Which counseling principle most directly justifies this intervention?

- A. Constructive confrontation highlights incongruence while preserving empathy autonomy and the working alliance
- B. Behavioral activation changes avoidance patterns by increasing contact with reinforcement before motivation fully returns
- C. Blocking protects members and group purpose while creating an opportunity to examine impact and alternatives
- D. Immediacy uses the current therapeutic relationship to examine interpersonal patterns as they occur

198. A counselor responds to Quinn's situation by choosing to assess severity safety duration and impairment while considering depressive disorders and alternatives. Which principle best supports this response?

- A. Grief is not a uniform sequence and should be understood in cultural relational and developmental context
- B. Psychotic symptoms require careful evaluation of risk functioning context and possible medical or substance causes
- C. Depressive presentations require attention to mood anhedonia cognition vegetative changes functioning and suicide risk
- D. Later-life cognitive complaints require broad assessment because mood sleep medication and illness can mimic decline

199. In the case of Morgan, the counselor decides to review the formulation alliance goals and intervention and revise the plan collaboratively. What is the strongest rationale for that choice?

- A. Specific measurable objectives make progress review and plan revision possible
- B. Referral protects welfare when client needs exceed competence resources or the current level of care
- C. Strengths can improve engagement feasibility resilience and progress toward treatment goals
- D. A treatment plan is a living document that changes when evidence shows the current approach is ineffective

200. During counseling with Cameron, age 33, the following issue emerges: A child describes being a bad kid because anger keeps taking over. Which response is most appropriate?

- A. separate the child from the problem and explore times the anger had less influence
- B. identify safe supports and plan specific realistic steps for reconnection
- C. respectfully present the discrepancy and explore it without accusation
- D. provide structure clarify expectations and support gradual safety and participation

Practice Exam 13: Answer Key And Explanations

1. A — Generalized anxiety involves persistent excessive worry across domains rather than fear limited to one cue. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

2. D — A genogram organizes multigenerational structure and themes while remaining a hypothesis-building tool. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

3. C — The best response is to use a scale to identify exceptions existing resources and the next small change. Scaling can make differences visible and support client-defined movement without denying the seriousness of distress. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling.

4. B — Valid informed consent requires understandable information and a genuine opportunity for questions. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

5. C — A collaborative safety plan provides concrete actions and differs from an unsupported promise not to self-harm. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for.

6. A — The best response is to explore worry breadth duration physical tension sleep and impairment. Generalized anxiety involves persistent excessive worry across domains rather than fear limited to one cue. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

7. D — The best response is to link major themes decisions and next steps and invite the client's additions. Summaries integrate material support transitions and create a shared understanding of the session. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

8. B — Assessment is an ongoing collaborative process and test scores are only one source of clinical information. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for.

9. A — Behavioral addictions can be maintained by intermittent reinforcement distorted beliefs and short-term emotional escape. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

10. D — The best response is to translate the goal into observable achievable steps with a review period and indicators of progress. Specific measurable objectives make progress review and plan revision possible. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

11. B — Later-life cognitive complaints require broad assessment because mood sleep medication and illness can mimic decline. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

12. C — The best response is to assess attachment needs interaction patterns barriers and opportunities for meaningful connection. Loneliness reflects perceived relational disconnection rather than simply the number of social contacts. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

13. D — The best response is to assess severity safety duration and impairment while considering depressive disorders and alternatives. Depressive presentations require attention to mood anhedonia cognition vegetative changes functioning and suicide risk. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

14. C — The best response is to map relationships roles events and recurring patterns across the family system. A genogram organizes multigenerational structure and themes while remaining a hypothesis-building tool. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not.

15. A — The best response is to clarify intent plan means target imminence and protective factors while following safety duties. Specificity access and imminence help determine the level of risk and the urgency of intervention. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling.

16. B — The best response is to complete a fuller assessment rather than treating the screen as a definitive diagnosis. Screening identifies possible risk and need for evaluation but does not independently establish a disorder. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling.

17. C — The best response is to explore meanings supports costs and choices without imposing the counselor's worldview. Spiritual and religious concerns require cultural humility and protection of client autonomy. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not.

18. B — The best response is to modify the plan to address scheduling and access barriers before labeling the client resistant. Treatment barriers should be identified collaboratively and addressed as practical contextual or motivational obstacles. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling.

19. A — The best response is to provide structure clarify expectations and support gradual safety and participation. Early group development commonly requires orientation predictability inclusion and trust building. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not fit the.

20. D — Risk assessment requires direct inquiry and synthesis of acute and chronic risk and protective factors. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

21. A — The best response is to assess mood sleep medication medical factors daily functioning and cognitive pattern. Later-life cognitive complaints require broad assessment because mood sleep medication and illness can mimic decline. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

22. D — The best response is to frame assessment and intervention around developmental capacity temperament context and caregiver support. Behavior must be interpreted against developmental expectations rather than adult standards. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not.

23. C — The best response is to ask how the client and community understand the problem and preferred sources of help. Culturally responsive assessment explores meaning context identity supports and help-seeking expectations. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

24. B — Specificity access and imminence help determine the level of risk and the urgency of intervention. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

25. C — The best response is to follow the client's priorities while assessing distress supports values and coordination needs. End-of-life counseling centers dignity autonomy meaning relationships grief and interdisciplinary collaboration. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not.

26. B — The best response is to obtain appropriate consent and protect identity before using material beyond its original purpose. Research and publication require respect for autonomy privacy and foreseeable risks to participants. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

27. A — Career construction emphasizes meaning identity and adaptability rather than matching a person to one fixed occupation. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for.

28. D — Existential counseling addresses fundamental conditions of living rather than reducing every concern to a symptom. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

29. B — The best response is to gently describe the here-and-now interaction and invite exploration of its meaning. Immediacy uses the current therapeutic relationship to examine interpersonal patterns as they occur. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

30. A — Differential diagnosis compares plausible explanations and rules out conditions that better account for symptoms. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

31. C — Coordinated care reduces fragmentation while disclosure remains limited to authorized and necessary information. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

32. D — The best response is to consider substance or medication effects and medical causes before assigning a primary mental disorder. Differential diagnosis compares plausible explanations and rules out conditions that better account for symptoms. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling.

33. C — The best response is to seek qualified supervision and refer when competence cannot be established. Counselors practice only within boundaries supported by education training and supervised experience. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not fit.

34. D — Cognitive restructuring examines interpretations and evidence rather than simply replacing negative thoughts with optimism. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

35. A — The best response is to assess chasing losses financial harm control attempts risk and co-occurring concerns. Behavioral addictions can be maintained by intermittent reinforcement distorted beliefs and short-term emotional escape. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

36. B — Adlerian counseling emphasizes purposeful behavior social interest encouragement and the meanings formed within family context. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

37. C — The best response is to follow mandated-reporting law promptly while supporting the child and avoiding an investigative interrogation. Counselors report reasonable suspicion as required and leave forensic fact-finding to designated investigators. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

38. B — Crisis work narrows attention to safety functioning resources and manageable next actions. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

39. A — The best response is to address the access barrier with the client and advocate at the appropriate system level. Counselor advocacy can target environmental barriers while preserving client choice and collaboration. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

40. D — The best response is to explore recurring relational themes defenses and their appearance in the therapeutic relationship. Psychodynamic work links present patterns with unconscious conflict attachment and earlier relational experience. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

41. B — The best response is to decline the financial relationship and process the request within counseling. Counselors avoid nonprofessional roles when exploitation impaired judgment or client harm is reasonably possible. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

42. D — Substance assessment examines severity and function without allowing labels or confrontation to replace evidence. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

43. C — The best response is to explore identity structure relationships meaning and new sources of contribution. Retirement is a role transition whose impact depends on preparation resources health relationships and identity. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

44. A — Counselor advocacy can target environmental barriers while preserving client choice and collaboration. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

45. B — The best response is to allow supportive silence while monitoring whether the client needs grounding or invitation. Therapeutic silence can support emotion and meaning when it is responsive rather than avoidant or abandoning. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling.

46. C — Persistent insomnia is often maintained by arousal irregular timing and learned associations between bed and wakefulness. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for.

47. A — The best response is to prioritize safety stabilization immediate needs supports and a short practical plan. Crisis work narrows attention to safety functioning resources and manageable next actions. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not.

48. D — The best response is to support safe exploration and communication without treating normative identity work as pathology. Adolescence commonly involves increasing autonomy identity formation and changing family and peer relationships. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

49. D — Violence assessment prioritizes survivor autonomy privacy danger indicators and practical safety options. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

50. A — Paraphrasing organizes content and demonstrates listening while allowing the client to correct misunderstandings. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

51. B — A subpoena should not be treated automatically as permission to disclose the complete record. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

52. C — Summaries integrate material support transitions and create a shared understanding of the session. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

53. C — Ethical exploration respects self-determination and does not treat identity diversity as pathology. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

54. D — Support-building translates a general resource into accessible relationships actions and backup options. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

55. A — Panic concerns include the attacks themselves and the learned fear and avoidance that can follow them. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for.

56. B — Congruence involves alignment and authentic presence used in service of the client. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

57. A — The best response is to maintain respect for the person while holding the harmful behavior open to examination. Positive regard affirms human worth without requiring approval of every action. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

58. D — The best response is to review the written agreement discuss options and avoid abrupt abandonment. Financial arrangements should be explained early and managed in ways that preserve client welfare. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

59. B — The best response is to give timely notice provide referrals and arrange continuity consistent with client needs. Ending services requires attention to abandonment risk records emergencies and reasonable transition support. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

60. C — Therapeutic silence can support emotion and meaning when it is responsive rather than avoidant or abandoning. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for.

61. C — The best response is to use a comparison group that matches the client's relevant characteristics and testing purpose. Norm-referenced interpretations depend on an appropriate and representative standardization group. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not.

62. D — Cultural humility combines lifelong learning self-reflection attention to power and accountability. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question.

63. B — The best response is to verify security informed consent emergency procedures and applicable jurisdictional rules before use. Technology does not remove duties concerning competence privacy access and legal authority to practice. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

64. A — A comprehensive intake prevents premature conclusions by examining multiple interacting sources of distress. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

65. D — The best response is to question the measure's consistency before drawing strong conclusions from the score. Reliability concerns the consistency or dependability of measurement across relevant occasions or items. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

66. A — Level-of-care decisions match acuity safety medical risk functioning supports and treatment intensity. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

67. C — Ending services requires attention to abandonment risk records emergencies and reasonable transition support. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

68. B — The best response is to interrupt the harmful behavior firmly and redirect toward safe respectful interaction. Blocking protects members and group purpose while creating an opportunity to examine impact and alternatives. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

69. D — Spiritual and religious concerns require cultural humility and protection of client autonomy. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

70. B — The best response is to explore life themes adaptability strengths and the story connecting past roles with future possibilities. Career construction emphasizes meaning identity and adaptability rather than matching a person to one fixed occupation. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from.

71. C — Strengths can improve engagement feasibility resilience and progress toward treatment goals. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question.

72. A — The best response is to ask directly about thoughts intent plan access past behavior and protective factors. Risk assessment requires direct inquiry and synthesis of acute and chronic risk and protective factors. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks.

73. A — The best response is to explore freedom responsibility isolation mortality and personally chosen meaning. Existential counseling addresses fundamental conditions of living rather than reducing every concern to a symptom. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

74. B — The best response is to interrupt the maintaining sequence with a focused directive suited to the family's context. Strategic interventions target interaction sequences and attempted solutions that keep a problem going. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

75. C — Open questions can expand exploration while timing focus and pacing protect the collaborative process. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

76. D — Conflict tolerance allows disagreement to become useful information while protecting safety and respect. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

77. B — Grief is not a uniform sequence and should be understood in cultural relational and developmental context. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for.

78. D — Accurate feeling reflections deepen awareness without claiming certainty about the client's internal experience. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

79. C — The best response is to arrange urgent evaluation for a setting capable of medical monitoring and stabilization. Level-of-care decisions match acuity safety medical risk functioning supports and treatment intensity. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

80. A — Behavior must be interpreted against developmental expectations rather than adult standards. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question.

81. C — The best response is to obtain appropriate consent and coordinate relevant information across providers. Coordinated care reduces fragmentation while disclosure remains limited to authorized and necessary information. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not fit.

82. B — The best response is to disclose only if the likely client benefit is clear and return focus promptly to the client. Counselor self-disclosure should be intentional brief culturally considered and driven by client welfare. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate.

83. A — Screening identifies possible risk and need for evaluation but does not independently establish a disorder. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

84. D — Emotion regulation improves when clients identify prompting events body cues meanings urges and effective alternatives. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

85. D — Retirement is a role transition whose impact depends on preparation resources health relationships and identity. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

86. C — The best response is to validate the contextual harm explore coping and supports and consider advocacy chosen by the client. Culturally responsive counseling locates distress within both personal experience and oppressive environmental conditions. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling.

87. B — Technology does not remove duties concerning competence privacy access and legal authority to practice. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

88. A — The best response is to state the central meaning concisely and check whether the understanding fits. Paraphrasing organizes content and demonstrates listening while allowing the client to correct misunderstandings. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

89. A — Referral protects welfare when client needs exceed competence resources or the current level of care. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

90. B — The best response is to assess medical risk behaviors body concerns and functioning without relying on appearance alone. Eating-disorder risk cannot be inferred from body size and may require prompt medical and nutritional coordination. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate.

91. D — The best response is to correct future documentation and amend records transparently without concealing the original entry. Clinical records should be timely objective relevant and altered only through an auditable process. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

92. C — The best response is to review the formulation alliance goals and intervention and revise the plan collaboratively. A treatment plan is a living document that changes when evidence shows the current approach is ineffective. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate.

93. D — Adolescence commonly involves increasing autonomy identity formation and changing family and peer relationships. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

94. A — The best response is to notice the reaction reflect on its influence and obtain consultation if needed. Self-awareness helps counselors keep personal reactions from directing client care. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not fit.

95. C — Structural family work targets hierarchy subsystems and boundaries that organize recurring family transactions. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

96. B — Counselors report reasonable suspicion as required and leave forensic fact-finding to designated investigators. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

97. A — Counselors practice only within boundaries supported by education training and supervised experience. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

98. C — Positive regard affirms human worth without requiring approval of every action. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question.

99. B — End-of-life counseling centers dignity autonomy meaning relationships grief and interdisciplinary collaboration. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question.

100. D — Caregiver strain reflects demands resources meanings and support and may threaten both caregiver and recipient wellbeing. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for.

101. A — Constructive confrontation highlights incongruence while preserving empathy autonomy and the working alliance. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

102. D — Systems thinking views symptoms within circular interaction patterns boundaries roles and wider contexts. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

103. C — Eating-disorder risk cannot be inferred from body size and may require prompt medical and nutritional coordination. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for.

104. B — The best response is to assess immediate danger privately and collaborate on an individualized safety plan. Violence assessment prioritizes survivor autonomy privacy danger indicators and practical safety options. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not.

105. B — The best response is to identify the situation thought emotion evidence alternatives and a balanced response. Cognitive restructuring examines interpretations and evidence rather than simply replacing negative thoughts with optimism. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

106. D — The best response is to clarify interests values abilities constraints and reliable occupational information. Sound career decisions integrate self-knowledge opportunity knowledge and a workable decision process. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not fit the.

107. A — Externalizing language reduces identity fusion with problems and opens space for preferred stories and agency. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

108. C — The best response is to provide an affirming exploratory space guided by the client's language goals and pace. Ethical exploration respects self-determination and does not treat identity diversity as pathology. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

109. C — Blocking protects members and group purpose while creating an opportunity to examine impact and alternatives. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

110. D — Treatment barriers should be identified collaboratively and addressed as practical contextual or motivational obstacles. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

111. B — Linking moves interaction among members and helps transform parallel disclosures into therapeutic group work. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

112. A — The best response is to strengthen the caregiver subsystem and clarify boundaries through enacted interaction. Structural family work targets hierarchy subsystems and boundaries that organize recurring family transactions. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not.

113. D — The best response is to assess sleep schedule substances medical factors mood and behaviors that condition wakefulness. Persistent insomnia is often maintained by arousal irregular timing and learned associations between bed and wakefulness. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling.

114. C — The best response is to assess triggers vulnerability cues consequences and available regulation skills. Emotion regulation improves when clients identify prompting events body cues meanings urges and effective alternatives. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

115. A — The best response is to respond honestly and professionally rather than hiding behind a false therapeutic role. Congruence involves alignment and authentic presence used in service of the client. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

116. B — Bullying involves repeated aggression and power imbalance and requires attention to safety climate and bystander systems. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for.

117. C — The best response is to use a trauma-informed assessment that prioritizes safety choice pacing and current functioning. Trauma-responsive care avoids unnecessary re-exposure and recognizes intrusion avoidance arousal and meaning changes. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

118. D — Psychodynamic work links present patterns with unconscious conflict attachment and earlier relational experience. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

119. A — The best response is to use nonjudgmental assessment of pattern consequences tolerance withdrawal motivation and risk. Substance assessment examines severity and function without allowing labels or confrontation to replace evidence. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

120. B — Counselors monitor impairment and act before personal functioning compromises professional services. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question.

121. D — The best response is to use culturally responsive eye contact posture presence and minimal encouragers. Attending behaviors communicate availability and should be adapted rather than applied as rigid universal rules. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

122. B — The mental status examination describes present observable functioning rather than lifelong personality traits. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

123. A — Confidentiality has legally and ethically recognized exceptions when serious foreseeable harm is present. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

124. C — The best response is to assess safety power imbalance frequency supports and the student's preferences for response. Bullying involves repeated aggression and power imbalance and requires attention to safety climate and bystander systems. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling.

125. A — The best response is to build a collaborative graded practice plan while reducing safety behaviors. Exposure promotes new learning through planned contact with feared cues rather than forced flooding or reassurance. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

126. B — The best response is to tentatively reflect the possible hurt and invite correction. Accurate feeling reflections deepen awareness without claiming certainty about the client's internal experience. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not fit the.

127. D — The best response is to invite elaboration with a focused open question rather than conducting a rapid interrogation. Open questions can expand exploration while timing focus and pacing protect the collaborative process. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks.

128. C — The best response is to explain the concern facilitate an appropriate referral and support continuity during transition. Referral protects welfare when client needs exceed competence resources or the current level of care. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks.

129. A — Clinical records should be timely objective relevant and altered only through an auditable process. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

130. D — Trauma-responsive care avoids unnecessary re-exposure and recognizes intrusion avoidance arousal and meaning changes. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

131. C — The best response is to assess distinct periods of mood elevation before using a unipolar depression formulation. A history of mania or hypomania materially changes diagnosis risk assessment and treatment coordination. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

132. B — Culturally responsive counseling locates distress within both personal experience and oppressive environmental conditions. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

133. A — The best response is to assess panic episodes anticipatory anxiety avoidance medical factors and functional impact. Panic concerns include the attacks themselves and the learned fear and avoidance that can follow them. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks.

134. B — The best response is to stay regulated explore the rupture and avoid defensiveness or premature appeasement. Conflict tolerance allows disagreement to become useful information while protecting safety and respect. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

135. D — The best response is to respectfully present the discrepancy and explore it without accusation. Constructive confrontation highlights incongruence while preserving empathy autonomy and the working alliance. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not fit the.

136. C — Specific measurable objectives make progress review and plan revision possible. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question therefore.

137. C — The best response is to protect confidentiality while consulting counsel and seeking clarification or court direction. A subpoena should not be treated automatically as permission to disclose the complete record. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

138. D — Immediacy uses the current therapeutic relationship to examine interpersonal patterns as they occur. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

139. B — The best response is to question whether score interpretations represent the construct the instrument claims to measure. Validity concerns evidence supporting the meaning and use of scores for a particular purpose. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

140. A — The best response is to invite them to notice and discuss the shared theme with each other. Linking moves interaction among members and helps transform parallel disclosures into therapeutic group work. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

141. D — Counselor self-disclosure should be intentional brief culturally considered and driven by client welfare. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

142. B — The best response is to respond with curiosity and calm while assessing meaning risk and context. A nonjudgmental stance reduces shame and supports accurate disclosure without eliminating necessary assessment. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

143. C — Research and publication require respect for autonomy privacy and foreseeable risks to participants. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

144. A — The best response is to evaluate readiness preferences risks and alternatives before selecting the modality. Treatment modality should match goals safety development culture functioning and client preference. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not fit.

145. B — Strategic interventions target interaction sequences and attempted solutions that keep a problem going. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

146. A — Early group development commonly requires orientation predictability inclusion and trust building. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question.

147. C — Empathy seeks accurate understanding from the client's frame while preserving professional judgment and boundaries. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

148. D — Treatment planning is strongest when goals are meaningful to the client and jointly developed. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

149. A — Validity concerns evidence supporting the meaning and use of scores for a particular purpose. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

150. B — The best response is to review services risks benefits fees records and confidentiality before treatment begins. Valid informed consent requires understandable information and a genuine opportunity for questions. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not.

151. D — The best response is to assess burden safety beliefs supports and practical barriers while validating ambivalence. Caregiver strain reflects demands resources meanings and support and may threaten both caregiver and recipient wellbeing. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks.

152. C — The best response is to assess safety command content reality testing substance use medical causes and level of care. Psychotic symptoms require careful evaluation of risk functioning context and possible medical or substance causes. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate.

153. A — The best response is to explore lifestyle private logic belonging and socially useful alternatives. Adlerian counseling emphasizes purposeful behavior social interest encouragement and the meanings formed within family context. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

154. B — The best response is to respond warmly while restating the boundary and exploring the need beneath the contact. Effective counselors combine care and responsiveness with predictable ethical limits. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not.

155. C — The best response is to incorporate these strengths as resources in the plan rather than documenting only deficits. Strengths can improve engagement feasibility resilience and progress toward treatment goals. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

156. D — Effective counselors combine care and responsiveness with predictable ethical limits. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question therefore.

157. A — Self-awareness helps counselors keep personal reactions from directing client care. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question therefore.

158. D — Collaborative goals convert preferred outcomes into manageable action without taking ownership away from the client. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

159. B — Regulation skills work best when practiced repeatedly and used as tools rather than guarantees that anxiety disappears. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale.

160. C — The best response is to process the meaning of ending review gains plan relapse prevention and arrange follow-up options. Planned termination consolidates learning anticipates setbacks and supports increasing client independence. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

161. B — The best response is to map reciprocal patterns and avoid assuming one person alone causes the family problem. Systems thinking views symptoms within circular interaction patterns boundaries roles and wider contexts. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

162. C — A nonjudgmental stance reduces shame and supports accurate disclosure without eliminating necessary assessment. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

163. A — Loneliness reflects perceived relational disconnection rather than simply the number of social contacts. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

164. D — The best response is to ask respectfully about the client's meanings and remain open to correction. Cultural humility combines lifelong learning self-reflection attention to power and accountability. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not fit.

165. D — Scaling can make differences visible and support client-defined movement without denying the seriousness of distress. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

166. A — Exposure promotes new learning through planned contact with feared cues rather than forced flooding or reassurance. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for.

167. C — The best response is to review results collaboratively in plain language and integrate them with other available evidence. Assessment is an ongoing collaborative process and test scores are only one source of clinical information. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate.

168. B — Compulsions are negatively reinforced when temporary relief strengthens rituals despite their long-term cost. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

169. B — Reliability concerns the consistency or dependability of measurement across relevant occasions or items. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described..

170. D — Counselors avoid nonprofessional roles when exploitation impaired judgment or client harm is reasonably possible. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

171. C — Norm-referenced interpretations depend on an appropriate and representative standardization group. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question therefore.

172. A — Attending behaviors communicate availability and should be adapted rather than applied as rigid universal rules. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

173. B — Treatment modality should match goals safety development culture functioning and client preference. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

174. C — A history of mania or hypomania materially changes diagnosis risk assessment and treatment coordination. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

175. A — Culturally responsive assessment explores meaning context identity supports and help-seeking expectations. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question.

176. D — Motivational interviewing responds to ambivalence with partnership acceptance compassion and evocation. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question.

177. C — Psychotic symptoms require careful evaluation of risk functioning context and possible medical or substance causes. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

178. B — The best response is to document orientation thought process attention and other current mental status findings. The mental status examination describes present observable functioning rather than lifelong personality traits. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

179. D — The best response is to translate the broad wish into a small personally meaningful and achievable first step. Collaborative goals convert preferred outcomes into manageable action without taking ownership away from the client. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling.

180. A — The best response is to schedule small feasible activities and track mood mastery and pleasure afterward. Behavioral activation changes avoidance patterns by increasing contact with reinforcement before motivation fully returns. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

181. A — The best response is to assess the obsession-compulsion cycle time burden insight avoidance and impairment. Compulsions are negatively reinforced when temporary relief strengthens rituals despite their long-term cost. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not.

182. D — The best response is to follow applicable law consult promptly and take protective steps required in the jurisdiction. Confidentiality has legally and ethically recognized exceptions when serious foreseeable harm is present. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

183. B — The best response is to reduce risk to clients and obtain consultation support or temporary limits on practice. Counselors monitor impairment and act before personal functioning compromises professional services. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do.

184. C — The best response is to teach and rehearse paced breathing or muscle relaxation while monitoring its effect. Regulation skills work best when practiced repeatedly and used as tools rather than guarantees that anxiety disappears. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate.

185. B — The best response is to normalize varied grief responses while assessing culture functioning risk and signs requiring added care. Grief is not a uniform sequence and should be understood in cultural relational and developmental context. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from.

186. C — The best response is to communicate the client's meaning and emotion without endorsing or condemning the choice. Empathy seeks accurate understanding from the client's frame while preserving professional judgment and boundaries. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

187. A — Financial arrangements should be explained early and managed in ways that preserve client welfare. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

188. D — The best response is to use open questions affirmations reflections and summaries to evoke the client's own reasons for change. Motivational interviewing responds to ambivalence with partnership acceptance compassion and evocation. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

189. A — The best response is to identify safe supports and plan specific realistic steps for reconnection. Support-building translates a general resource into accessible relationships actions and backup options. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they do not fit.

190. C — The best response is to offer accurate empathy congruence and unconditional positive regard without directing the choice. Person-centered conditions support growth by creating a relationship marked by genuineness acceptance and empathic understanding. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks.

191. D — Person-centered conditions support growth by creating a relationship marked by genuineness acceptance and empathic understanding. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the.

192. B — The best response is to revise the plan collaboratively using the client's priorities language and informed choices. Treatment planning is strongest when goals are meaningful to the client and jointly developed. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but.

193. A — The best response is to gather biological psychological social cultural and medical information before concluding the cause. A comprehensive intake prevents premature conclusions by examining multiple interacting sources of distress. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling tasks, but they.

194. C — Planned termination consolidates learning anticipates setbacks and supports increasing client independence. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The question.

195. B — Sound career decisions integrate self-knowledge opportunity knowledge and a workable decision process. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action described. The.

196. D — The best response is to write a prioritized plan of coping contacts professional resources and means-safety steps. A collaborative safety plan provides concrete actions and differs from an unsupported promise not to self-harm. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate counseling.

197. B — Behavioral activation changes avoidance patterns by increasing contact with reinforcement before motivation fully returns. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

198. C — Depressive presentations require attention to mood anhedonia cognition vegetative changes functioning and suicide risk. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale for the action.

199. D — A treatment plan is a living document that changes when evidence shows the current approach is ineffective. That principle directly explains why the counselor's selected response fits this situation. It links the intervention to client welfare, sound assessment, and a collaborative counseling process. The competing statements concern other valid responsibilities, but they do not provide the closest rationale.

200. A — The best response is to separate the child from the problem and explore times the anger had less influence. Externalizing language reduces identity fusion with problems and opens space for preferred stories and agency. This approach addresses the central clinical or ethical issue while preserving collaboration, safety, and the client's autonomy. The other options are drawn from legitimate.