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Question: 1

During what stage of group development do members tend to be the most distant or removed?

- A. The middle
- B. The evaluation stage
- C. The beginning
- D. The end

Answer: C

Explanation:

Correct answer: The beginning

There are several characteristics of group development that separate the stages of group process. During the beginning stage, a social worker identifies the purpose of the group and his or her role. This stage is characterized as a time to convene, to organize, and to set a plan. Members are likely to remain distant or removed until they have had time to develop relationships.

It is during the middle stage that almost all of the group's work will occur. Relationships are strengthened as a group so that the tasks can be worked on. During the end, the group reviews its accomplishments, and feelings associated with the termination of the group are addressed. There is no specific "evaluation stage."

Question: 2

Which of the following refers to the social worker's effort to call attention to something in treatment?

- A. Orienting
- B. Accountability
- C. Recentering
- D. Confrontation

Answer: D

Explanation:

Correct answer: Confrontation

Confrontation is usually considered to be a negative term, but in social work treatment, it refers only to the technique of pulling the client's attention toward a desired item. For example, a client might be discussing a number of negative consequences in her life related to drug abuse, but not address the core issue until the social worker directs them.

The other answers are incorrect and do not refer to this social work technique.

Question: 3

What is the main function of a defense mechanism?

- A. To save people from embarrassment
- B. To help people communicate their feelings through words
- C. To discover underlying traumas
- D. To protect people from anxiety

Answer: D

Explanation:

Correct answer: To protect people from anxiety

The use of defense mechanisms is common as a way to manage internal conflicts. Defense mechanisms are behaviors that protect people from anxiety and are usually automatic and involuntary. Some defense mechanisms include acting out, denial, dissociation, and displacement.

The purpose of defense mechanisms is not to help people express their feelings in words, to save them from embarrassment, or to discover underlying traumas.

Question: 4

Gail is meeting with her client, Jane. Gail is careful to moderate her language and gestures so that they are similar in expression and intensity as she begins her assessment. Which of the following best describes Gail's technique?

- A. Metacommunication
- B. Positive regard
- C. Congruent communication
- D. Active listening

Answer: C

Explanation:

Correct answer: Congruent communication

Gail is engaging in congruent communication, the matching of all messages so that they convey a coherent intensity, content, and intention.

The other answers are incorrect. Active listening involves the supportive expression of verbal cues and posture. Positive regard is the general willingness to engage with a client as a person worthy of help and positive attention. Metacommunication describes the context of messages such as body language or vocalizations.

Question: 5

A social worker is meeting with a client, a male in his mid-60s, for the first time. The client describes recent feelings of anxiety for no particular reason. The client states he has been having frequent headaches, "brain fog," and dizziness and is not sure why since he has never had these types of problems before.

What should the social worker do first?

- A. Formulate a treatment plan for the client
- B. Give the client a diagnosis of dementia
- C. Refer the client to a psychiatrist
- D. Refer the client for a medical evaluation

Answer: D

Explanation:

Correct answer: Refer the client for a medical evaluation

When clients complain of physical symptoms, such as dizziness, forgetfulness, and headaches, social workers should refer them for medical evaluations to rule out any physical diagnoses. Once professionals can be sure there is not a medical diagnosis explaining the client's symptoms, they can work with the client to identify other causes.

The social worker does not have enough information to diagnose the client with dementia. The client should receive a medical evaluation before being referred to a psychiatrist, and the social worker should not create a treatment plan for the client until it is certain that the client's symptoms are explained by a mental disorder.

Question: 6

Steve is concerned about his client, Edgar, who Steve believes to be suicidal. Edgar seems very depressed, has a diagnosis of schizophrenia, and suffers from Parkinson's disease. Moreover, Edgar's aunt committed suicide many years ago. Which of the above is the biggest risk factor for suicide?

- A. Chronic illness
- B. Family history of suicide
- C. Depression
- D. Schizophrenia

Answer: B

Explanation:

Correct answer: Family history of suicide

Though there are many challenges here, the family history of suicide is the most concerning, as there is a strong link between genetics and suicide.

Depression, chronic illness, and schizophrenia are all associated with suicide but, individually, they are not as concerning as the family history of suicide.

Question: 7

A social worker is meeting with the teenage son of a man who has been struggling with alcohol use for most of his life. The boy lives with his father and mother and regularly witnesses his father coming home drunk. The teenager admits that he feels scared and confused when this happens. Which of the following is a likely coping skill the teenager will develop as he matures, assuming his father's substance use problems do not resolve?

- A. The teenager will become assertive and challenge his father's means of coping
- B. The teenager will turn to alcohol and/or drugs as a means of coping
- C. The teenager will pursue academics or extracurricular activities to cope with stress at home
- D. The teenager will develop insight and refuse to drink alcohol in the future

Answer: B

Explanation:

Correct answer: The teenager will turn to alcohol and/or drugs as a means of coping

When a family member is addicted to alcohol or drugs, family members may be worried that their behavior will exacerbate the situation or cause clients' addictions to worsen. Children in families with addiction also feel the effects because they are aware of arguments and tension in the home and feel scared and confused. They are also more likely to develop addictive behaviors as ways of coping. It is possible, but not likely, that the teen will develop insight and refuse to drink alcohol. The teen can both challenge his father and turn to substances himself as a means of coping. Generally, teens are not likely to develop healthy coping skills in situations where those skills have not been modeled for them.

Question: 8

What is the main benefit of a social worker recognizing her own countertransference toward a client?

- A. It can help the client understand why he is attracted to the social worker
- B. It can help the client find more appropriate services
- C. It can help the client learn new coping skills
- D. It can help the social worker regulate her own emotions in the therapeutic relationship

Answer: D

Explanation:

Correct answer: It can help the social worker regulate her own emotions in the therapeutic relationship

Countertransference is defined as redirection of a social worker's feelings toward a client or, more generally, as a social worker's emotional entanglement with a client. A social worker's recognition of his or her own countertransference is nearly as critical as understanding a client's transference. Not only does this help a social worker regulate his or her emotions in the therapeutic relationship, but it also gives a social worker valuable insight into what a client is attempting to elicit in him or her.

The social worker's countertransference does not help the client understand his feelings or help the client learn new coping skills; it helps the social worker understand her own feelings. The social worker does not necessarily need to refer the client out for other services, but can work through feelings of countertransference.

Question: 9

Why might a social worker obtain consent to collect education records for an adult client?

- A. To collect information that might pertain to the client's child
- B. To determine current social functioning
- C. To make a diagnosis of a mood disorder
- D. To diagnose intellectual or developmental disabilities

Answer: D

Explanation:

Correct answer: To diagnose intellectual or developmental disabilities

Gathering collateral records is a significant part of the assessment process. When working with adults, educational records can provide clues as to the age at which problems or difficulties began. Historical educational records are often used to diagnose adults with intellectual or developmental disabilities if they were not appropriately identified while in school.

Educational records on an adult client would not help to diagnose the client's child, nor should this be the social worker's intent. Educational records do not pertain to current social functioning, though they can provide information on past intellectual functioning. Educational records do not help social workers make a diagnosis of a mood disorder.

Question: 10

A social worker meeting with a client for the first time collects information about the client's strengths and resources available for treatment planning. This information should be included in which part of the biopsychosocial assessment?

- A. Psychological
- B. Biological
- C. Social
- D. Psychiatric

Answer: C

Explanation:

Correct answer: Social

The biopsychosocial assessment is a useful tool that provides information on the current issue or problem, a client's current and past health, emotional functioning, vocational and educational

background, cultural and spiritual issues, environmental issues, and social functioning. The social section focuses on client systems and unique client context and may identify strengths and/or resources available for treatment planning.

The biological section assesses a client's medical history, developmental history, current medications, substance abuse history, and family history of medical illnesses. The psychological section assesses a client's present psychiatric illness or symptoms, history of the current psychiatric illness or symptoms, past or current psychosocial stressors, and mental status. There is not a separate psychiatric section of the assessment.

Question: 11

Which of the following is true about imaginary friends, according to Jean Piaget?

- A. Children are most likely to have imaginary friends from the ages of 7 to 11
- B. Imaginary friends are indicative of an emerging personality disorder
- C. Most children know that their imaginary friends are not real
- D. Imaginary friends are a product of social isolation

Answer: C

Explanation:

Correct answer: Most children know that their imaginary friends are not real

According to Jean Piaget, imaginary friends are a normal part of child development and not indicative of the presence of a mental disorder. Imaginary friends do not emerge as a product of environmental deficit, such as social isolation. Rather, they are a normal way in which children develop in early childhood; from the ages of two to seven years.

Parents are often worried that the presence of an imaginary friend in their child may indicate a severe mental disorder. However, most children grasp that their imaginary friend is not real and do not actually believe they are interacting with them in the manner of a hallucination or delusion. Social workers should attempt to normalize this phenomenon with concerned responsible parties.

Question: 12

A social worker has regularly been meeting with a family system for about a month when the head of the household, a father of three boys, is fired from his job of 20 years. This was the family's primary source of income, and the father is noticeably shaken. What should the social worker's primary focus be in this situation?

- A. Working closely with the father to find new employment
- B. Supporting the children during this time
- C. Locating financial assistance for the family
- D. Helping the father develop effective coping skills to handle the change in income and responsibility within the family

Answer: D

Explanation:

Correct answer: Helping the father develop effective coping skills to handle the change in income and responsibility within the family

Social workers must consider the implications of financial burdens on the biopsychosocial-spiritual-cultural aspects of well-being. Coping skills are needed when there are dramatic changes in income and opportunities to adapt and return to economic stability are critical. In this situation, the social worker should work closely with the father, in particular, to make sure he has healthy coping skills to use in this highly stressful situation.

The remaining answer options are incorrect. The social worker might help by locating some financial assistance for the family, supporting the children, and pointing the father toward some employment opportunities, but none of these should be the social worker's primary focus.

Question: 13

Barbara, a school social worker, is concerned about her young client, Mark. Mark is beginning to show signs of violent behavior in class, including throwing pencils and threatening other children. Mark is known to have a difficult family life in which both parents are struggling with substance abuse. Which of the following defense mechanisms best describes Mark's behavior?

- A. Acting out
- B. Regression
- C. Decompensation
- D. Conversion

Answer: A

Explanation:

Correct answer: Acting out

Defense mechanisms are cognitive and emotional tools designed to resolve conflict within the psyche. In this case, Mark is acting out, meaning that he is acting out his feelings (in this case, rage and frustration) rather than speaking about his feelings.

The other answer choices are incorrect. Decompensation applies more to people in whom an existing support system does not work. Conversion applies to the physical experience of emotional symptoms. Regression refers to a return to a more childlike state.

Question: 14

A social worker has been meeting with a client for about a month. Though the client was initially pleasant and receptive to the social worker's suggestions at the beginning of treatment, recently, the client has been challenging what the social worker says, has not been complying with interventions, and appears to be unmotivated. What is the best explanation for the client's behavior?

- A. The client is being resistant due to the feelings and behaviors being brought up by the social worker
- B. The client is using substances
- C. The social worker did not collect enough information during the assessment phase
- D. The client has finished treatment and is ready for termination

Answer: A

Explanation:

Correct answer: The client is being resistant due to the feelings and behaviors being brought up by the social worker

At times, clients may be oppositional, reactionary, noncompliant, and/or unmotivated. These attitudes or behaviors are often referred to as resistance. It is essential to determine the extent to which this resistance or these inabilities are caused by a client, a social worker, and/or the conditions present. A client may be resistant due to feelings of guilt or shame and may not be ready to recognize or address the feelings and behaviors being brought up by a social worker.

The client is not yet ready for termination if he is not complying with treatment. There is no indication that the social worker did not collect enough information or that the client is using substances.

Question: 15

James is a 35-year-old man you are seeing in your role as a social worker at a local homeless shelter. He admits to taking heroin regularly over the past two years despite numerous arrests and trips to the emergency room following near-fatal overdoses. James is probably suffering from:

- A. Drug misuse
- B. Substance abuse
- C. A personality disorder
- D. Depression

Answer: B

Explanation:

Correct answer: Substance abuse

Substance abuse is the continued use of alcohol or other drugs in spite of adverse consequences. Even though James has gotten into legal trouble and almost died, he has continued to use heroin as a result of his substance use problem.

Though James might have depression or a personality disorder, the question does not indicate that he has symptoms of either. Drug misuse is the inappropriate use of medications or prescribed drugs, and heroin is neither a medication nor a prescribed drug.

Question: 16

Which of the following is not a defense mechanism?

- A. Denial
- B. Idealization
- C. Derealization
- D. Inhibition

Answer: C

Explanation:

Correct answer: Derealization

Derealization is the sense experienced in some individuals of not feeling connected to consensus reality. It is not a defense mechanism.

Defense mechanisms are psychological tools used (usually to a pathological excess) to alleviate feelings of internal conflict. Inhibition avoids pleasure to avoid the inner conflict stirred up by it. Idealization creates a one-sided positive vision of an individual or phenomenon to avoid careful consideration. Denial is the most basic of defense mechanisms, literally meaning to deny that a problem of any kind exists.

Question: 17

According to Behaviorist theory, which of the following changes behavior by removing a negative stimulus?

- A. Negative consequence
- B. Negative reinforcement
- C. Positive consequence
- D. Positive reinforcement

Answer: B

Explanation:

Correct answer: Negative reinforcement

According to Behaviorist theory, negative reinforcement changes behavior by removing a negative stimulus. Positive reinforcement changes behavior by adding a positive.

The other answer options are incorrect. "Positive consequence" and "negative consequence" are not terms used in Behaviorist theory in this way.

Question: 18

A school social worker is seeing a young boy about his recent behavior. This behavior involves instances of physical aggression and teasing of classmates. Though the boy is of small size, he has begun to bully others in play environments. During the first interview, it is established that the boy is likely being abused by his father. Which defense mechanism is the boy most likely using?

- A. Projective identification

- B. Identification with the aggressor
- C. Devaluation
- D. Projection

Answer: B

Explanation:

Correct answer: Identification with the aggressor

Identification with the aggressor is the defense mechanism used when a person begins to take on characteristics of a powerful aggressor. This is done to compensate for feelings of helplessness by using aggressive behavior to achieve a feeling of power after having felt powerlessness.

The boy's stated behavior (bullying) likely reflects the experience he has felt in his reported home environment. By expressing aggression (both verbal and physical) toward peers, the boy is serving important psychological needs. First, he is resolving his feelings of powerlessness by securing a sense of power over others. Second, he is experimenting with the identity of an aggressor as a relational style. Finally, he is using the defense mechanism to ward off internal conflict about his status as a victim.

Question: 19

Which of the following examples is typical of a family receiving TANF benefits?

- A. A recent college graduate without any children
- B. A two-parent household with three teenagers
- C. A single mother with an infant and a four-year-old
- D. An older couple with several grown children

Answer: C

Explanation:

Correct answer: A single mother with an infant and a four-year-old

Temporary Assistance to Needy Families (TANF) became effective in 1997 and is a federal assistance program meant to help families gain self-sufficiency. It provides cash benefits to poor individuals with dependent children. The typical TANF family consists of one female adult and two young children. It imposes a lifetime five-year limit on the receipt of benefits.

Question: 20

All of the following are social work core values except:

- A. Effective communication
- B. Competence
- C. Social justice
- D. Integrity

Answer: A

Explanation:

Correct answer: Effective communication

The NASW Code of Ethics core values that are the foundation of social work practice include service, social justice, dignity and worth of the person, importance of human relationships, integrity, and competence.

Effective communication is a very important skill to have as a social worker but is not necessarily an ethical principle.

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