Professional Orientation and Ethics in Couple Marriage and Family Therapy 1st edition Flynn Test Bank

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Professional Orientation and Ethics in Couple, Marriage, and Family Therapy

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CHAPTER 1

Overview and Orientation to the Profession

1. _____ is a discredited, unethical, and harmful therapeutic practice.
   a. Exposure therapy
   b. Aversion therapy
   c. Flooding therapy
   *d. Reparative therapy

   Rationale: Reparative therapy lacks empirical support and increases a sense of self-hatred in individuals.

2. A philosophy of morality and choices made by people in the context of their interactions with others is:
   a. teamwork
   *b. professional ethics
   c. executive virtue
   d. stewardship

   Rationale: Citations in the text address research on the impact of professional ethics and the importance of practicing from an ethical vantage point.

3. What is described as the behavioral, physical, and physiological damage that is directed toward minoritized, marginalized, and racialized individuals?
   a. Intersectionality
   *b. Racial battle fatigue
   c. Social construction
   d. Race-based stereotyping

   Rationale: The text examines the ways in which people of color who experience frequent bouts of hostility, hurtful comments, and stigmatizing behavior due to their race, ethnicity, and personal attributes commonly develop a sense of fatigue as a result.

4. An essential part of becoming a multiculturally competent practitioner is for every clinician to engage in:
   *a. their own personal self-exploration
   b. community partnerships
   c. supervision from someone of a different race
   d. continued diversity education

   Rationale: Exploring and understanding one's own complex identity are helpful in creating a sense of acceptance and empathy for others as well as gaining personal experience in how intersectionality affects individuals and their experiences.

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5. What model expects mental health clinicians to be well-versed in both clinical practice and research?
   a. Practitioner scholar model
   b. Vail model
   c. Johns Hopkins model
   *d. Scientist practitioner model

   Rationale: The science practitioner model requires a level of scientific rigor within the context of therapeutic practice.

6. What terms are often used interchangeably to describe the act of professional therapeutic service?
   a. Therapy and psychotherapy
   b. Counseling and psychotherapy
   c. Therapy and counseling
   *d. Psychotherapy, therapy, and counseling

   Rationale: The terms *psychotherapy*, *therapy*, and *counseling* are named out in the text as being interchangeable to describe the act of professional therapeutic service.

7. When a clinician is assessed to determine whether they have the ability, knowledge, and experience to implement a particular treatment, it is known as:
   a. clinician-based assessment of competence
   b. skill acquisition examination
   *c. limited-domain intervention competence
   d. objective structured clinical examination

   Rationale: Objective structured clinical examination and clinician-based assessments are used in the nursing/medical profession. Skill acquisitioned examination is vague. Limited-domain intervention competence is therapist-specific assessment of competence.

8. The fourth force of counseling and psychotherapy is:
   a. feminist theory
   b. gestalt theory
   c. attachment theory
   *d. multicultural counseling theory

   Rationale: At its foundation, multicultural counseling theory includes the understanding of the various inequalities that are experienced by communities of color, such as racism, discrimination, exclusion, oppression, hatred, and marginalization.

9. The overlapping nature of one's identities and contextual factors is known as:
   a. multiculturalism
   *b. intersectionality
   c. self-in-relation
   d. unique challenges

   Rationale: Citations in the text address coining of the term and how it plays a vital role in understanding the client life context, diagnosis, and treatment planning.

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10. All of the following are examples of sexual minorities except:
    *a. cisgender
    b. two-spirited
    c. queer
    d. questioning

    Rationale: The sexual majority in the United States currently is and has always been heterosexual, cisgender, and non-intersex individuals.

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CHAPTER 2

Philosophy and Pragmatics of Systemic Work

1. According to Piaget, when individuals construct their internal world based on experiences and the social, physical, and cultural environments they relate to, it is known as:
   a. cognitivism
   b. constructionism
   c. connectivism
   *d. constructivism

   Rationale: Constructivism is a meaning-making experience that is specific to individuals who have lived their specific experience. It is centered on the notion that reality is shaped by an individual's description of the event.

2. What therapy is based on the notion that family therapy should involve attention to the larger cultural and gender-based concerns and their impact on women, marginalized communities, couples, and families?
   a. Narrative family therapy
   *b. Feminist family therapy
   c. Emotionally focused family therapy
   d. Systemic family therapy

   Rationale: Feminist family therapy was formally developed as a therapeutic experience of politics. Contemporary feminist therapy is centered on the intersectionality of individuals, inequality, and inequity.

3. Multicultural counseling theory is an action-based, social justice approach that heightens clients' and counselors' awareness of the following areas except:
   a. discriminatory cultural practices
   b. lack of equity
   *c. ethnocentrism
   d. empowerment

   Rationale: Multicultural counseling theory was initially developed as a response to the limitations of traditional counseling theories that were more ethnocentric in nature. Ethnocentrism assumes that the norms and practices of one's cultural group are universal and applicable to other cultures.

4. A major hurdle that stands between fully grasping the systemic theory is one's ability to challenge their existing mental models of:
   a. theory, philosophy, and systems
   b. skills, interventions, and theories
   c. behavior, intention, and causality
   *d. reality, psychology, and human behavior

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Rationale: When practitioners make a commitment to begin thinking systemically, they undergo a comprehensive reorientation that is centered on seeing the interconnectedness of systems, the whole of any behavior, and complex interactions as they relate to the origination and continuation of any issue.

5. During an extremely stressful and traumatizing experience, a youth's sympathetic nervous system influences the following responses except for:
   a. fawn
   b. freeze
   *c. fall
   d. fight

   Rationale: The four F's are fight, flight, freeze, or fawn.

6. The method for understanding, explaining, and guiding the treatment process is:
   a. theoretical orientation
   b. social constructionism
   c. multiculturalism
   *d. case conceptualization

   Rationale: Case conceptualization is the foundation of a coherent strategy tailored to meet a client's or system's unique goals.

7. The philosophical integration of theory and practice is known as a paradigm. Which of these elements is not usually encompassed within the paradigm?
   a. Epistemology
   b. Axiology
   c. Ontology
   *d. Deontology

   Rationale: A theoretical paradigm holds a scheme of ideas or assumptions about existence and truth, human development, the essence of therapy, and therapeutic skills. Paradigms typically contain ontology, epistemology, theoretical stance, therapeutic process, skills/interventions, and axiology.

8. Theories provide key information on all of the following except:
   *a. the nature of the action
   b. the roles of the clinician and client during treatment
   c. skills and interventions
   d. the requirements for healing and change

   Rationale: The text supports the ways in which theories provide key information that aids in the creation of a deep sense of understanding and organization for the therapeutic process. Theories provide key information on the roles of the clinician and client during treatment, a framework for understanding what is taking place during a clinical encounter, what is taking place within the client(s), skills and interventions, requirements necessary for healing and change, and the nature of human and family development.

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9. Recent estimates range between 300 to 400 total counseling theories. How many are approximately centered on the practice of family therapy?
   a. 10
   *b. 50
   c. 150
   d. 250

   Rationale: Presently, there is an enormous amount of counseling theories; however, only about 50 models center on the practice of family therapy. In-text citations support these findings.

10. When the therapist no longer observes the individual, couple, or family as an outsider but steps into the role of participant-observer, it is known as:
   a. structural coupling
   *b. second-order cybernetics
   c. structural determinism
   d. cybernetics

   Rationale: In first-order cybernetics, the practitioner observes the system and feedback loops from the outside. Second-order cybernetics acknowledges that the clinician becomes an active part of the system they are influencing, known as a participant-observer.

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CHAPTER 3

Professional Roles and Collaboration

1. Who is known as a leading figure in cognitive behavioral family therapy, cognitive therapy with couples, and forensic psychology?
   a. Michael White
   *b. Frank Dattilio
   c. Steve de Shazer
   d. Harold A. Goolishian

   Rationale: Frank Dattilio is known in the field as a leading figure in cognitive behavioral family therapy, cognitive therapy with couples, and forensic psychology. Text citations support this historical development of the field.

2. What is described as an art, science, and set of interventions provided by a more senior member of a profession to a more junior member or members of a profession?
   a. Theory
   *b. Supervision
   c. Theoretical framework
   d. Strategy

   Rationale: Supervision plays a vital role in the training experience for a future clinician. The text dives into the ways that the position of supervisor requires a vast amount of expression, technicality, knowledge, and the ability to meet and/or scaffold the learning levels for each junior member.

3. Loganbill, Hardy, and Delworth's developmental model of supervision describes the following as typical phases of supervisee development except for:
   a. integration
   *b. fluctuation
   c. confusion
   d. stagnation

   Rationale: Models of supervisee development often come in the form of phases and stages, and although Loganbill, Hardy, and Delworth's stages are stagnation, confusion, and integration, they recommend being aware of the supervisee's specific needs.

4. The interactive process to foster new learning based on prior knowledge is known as:
   *a. scaffolding
   b. differentiated learning
   c. flooding
   d. rescuing

   Rationale: Scaffolding is an interactive educational methodology that aids the learner in connecting the new knowledge to their prior knowledge. The result is a developmental approach that facilitates confidence and understanding.

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5. _____ is not an example of professional overlap in the helping professions.
   a. Poorly defined boundaries
   b. Overlap in professional services
   *c. Belief in the Oedipus complex
   d. Role confusion

   Rationale: The Oedipus complex is a theoretical tenet from psychoanalytic theory. It is not an area of professional overlap in the helping professions.

6. The ability of a therapist licensed at the independent practice level to transfer their license to other states or U.S. jurisdictions when they change residence to another state or jurisdiction is known as:
   a. pre-licensed supervision
   b. endorsed certification
   *c. licensure portability
   d. certification reciprocity

   Rationale: Clinicians must be fully licensed to practice at the independent level. Licensure portability is the ability of a therapist licensed at the independent practice level to transfer their license to other states or U.S. jurisdictions when they change residence to another state or jurisdiction.

7. All of the following are key constructs in the basic building blocks of Western thought except:
   *a. sein
   b. anamnesis
   c. I-thou
   d. eudaimonia

   Rationale: Martin Heidegger's *dasein* (i.e., being-in-the-world) is a key construct, along with Plato's concept of *anamnesis*, Aristotle's concept of *eudaimonia*, and Martin Buber's *I-thou*.

8. Who is one of the founders of object relations theory and promoted the notion that children could withstand and benefit from psychoanalysis?
   a. John Bowlby
   *b. Melanie Klein
   c. Donald Winnicott
   d. Anna Freud

   Rationale: Melanie Klein was an Austrian-British child psychoanalyst. She was one of the founders of object relations theory and therapy and is well-known for her efforts in developing play therapy techniques and promoting the notion that children could withstand and benefit from psychoanalysis.

9. What family systems pioneer earned the title Father of Hypnotherapy?
   a. Franz Mesmer
   b. James Braid
   *c. Milton H. Erickson
   d. Gregory Bateson

   Rationale: Milton H. Erickson had an enormous influence on the entire family systems movement. His impact on modern hypnosis and as a psychotherapy innovator earned him the title of Father of Hypnotherapy.

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10. Who is known as the Mother of Play Therapy?
    *a. Virginia Axline
    b. Eliana Gil
    c. Anna Freud
    d. Terry Kottman

    Rationale: American psychologist Virginia Axline was a pioneer in the field of play therapy and child and adolescent psychotherapy. Because of her contributions to the field, she has been venerated as the Mother of Play Therapy.

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