

COUC 667 Counseling Practice Exam (Sample)

Study Guide



Everything you need from our exam experts!

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Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

Remember: successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

How to Use This Guide

This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:

1. Start with a Diagnostic Review

Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.

2. Study in Short, Focused Sessions

Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.

3. Learn from the Explanations

After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.

4. Track Your Progress

Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.

5. Simulate the Real Exam

Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.

6. Repeat and Review

Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.

There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!

Questions

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- 1. Schwitzer and Rubin state you cannot diagnose an adult with autism because this DSM-5 class is for children and adolescents.**
 - A. True**
 - B. False**
 - C. Not specified**
 - D. It depends**

- 2. Prior suicide attempts are the strongest predictor?**
 - A. Weak predictor**
 - B. Not predictive**
 - C. The strongest predictor**
 - D. Only relevant for certain ages**

- 3. Which option does NOT represent one of the basic objectives of the intake interview?**
 - A. Confirm the clinical impressions in the testing report given by the referral source**
 - B. Gather information about the client's presenting problems and goals**
 - C. Establish rapport and understand the client context**
 - D. Assess safety and risk as needed**

- 4. A therapist should do all EXCEPT which of the following when probing for a client's personal history?**
 - A. Use open-ended questions**
 - B. Have the client relive his or her painful memories**
 - C. Build rapport**
 - D. Explore significant life events**

- 5. Which item is not typically addressed in the introduction stage?**
 - A. The client's previous therapy history**
 - B. The limits of confidentiality**
 - C. The length of the session**
 - D. The therapist's credentials**

- 6. According to Schwitzer and Rubin, diagnosing an adult with autism is possible under DSM-5.**
- A. True**
 - B. False**
 - C. Not specified**
 - D. Depends on case**
- 7. According to Tan, which two spiritual disciplines are favored in spiritual warfare?**
- A. Scripture and prayer**
 - B. Meditation and fasting**
 - C. Worship and service**
 - D. Study and evangelism**
- 8. Which statement is true about treatment goals?**
- A. A single goal is sufficient for all problems**
 - B. One or more goals is needed for each problem being treated**
 - C. Goals are optional**
 - D. Goals should be removed after progress**
- 9. Directives that are therapist-centered are designed to shift clients toward what they are not yet talking about?**
- A. Their current feelings**
 - B. What they are not yet talking about**
 - C. Future goals**
 - D. Past experiences**
- 10. Which statement about insomnia is accurate in relation to suicide risk?**
- A. Insomnia lowers suicide risk**
 - B. Insomnia has no relation to suicide risk**
 - C. Insomnia is only relevant when depression is present**
 - D. Insomnia has long been known to increase suicide risk and is an independent risk factor**

Answers

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1. B
2. C
3. A
4. B
5. A
6. B
7. A
8. B
9. B
10. D

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Explanations

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1. Schwitzer and Rubin state you cannot diagnose an adult with autism because this DSM-5 class is for children and adolescents.

A. True

B. False

C. Not specified

D. It depends

Autism Spectrum Disorder in DSM-5 is a diagnosis that applies across the lifespan, not just to children. You can diagnose adults with ASD if they meet the criteria and there is evidence of onset in the early developmental period. In practice, clinicians use developmental history and current functioning to determine whether an adult's symptoms fit ASD, even though the diagnosis is about lifelong patterns. So the statement that you cannot diagnose an adult because the DSM-5 class is for children is false.

2. Prior suicide attempts are the strongest predictor?

A. Weak predictor

B. Not predictive

C. The strongest predictor

D. Only relevant for certain ages

Prior suicide attempts are the strongest predictor of future suicidality because past behavior signals a persistent vulnerability to suicidal crises. When someone has attempted before, it shows they have navigated a moment of intense distress, have access to means, and may continue to experience risk factors such as mental illness, hopelessness, or chronic stress. This elevated risk is especially high in the period shortly after an attempt but remains greater than for those with no history of attempts over the longer term. While other factors like current mood, substance use, or social support contribute to risk, none are as strongly predictive on their own as a prior attempt. Therefore, recognizing a history of attempts as a red flag aligns with the best-supported understanding of suicide risk across ages and conditions.

3. Which option does NOT represent one of the basic objectives of the intake interview?

- A. Confirm the clinical impressions in the testing report given by the referral source**
- B. Gather information about the client's presenting problems and goals**
- C. Establish rapport and understand the client context**
- D. Assess safety and risk as needed**

Intake interviews are about gathering information directly from the client, establishing rapport, and identifying safety concerns. The focus is on understanding the presenting problems, the client's goals, and the context of their life, so the clinician can form an initial picture and plan. Confirming the clinical impressions in a testing report provided by the referral source isn't an intake objective because it relies on prior evaluations and test results rather than what the client conveys in the intake session. During intake, you verify and clarify information with the client, assess immediate risks, and set the stage for treatment, rather than validate conclusions from external assessments. The other options align with gathering present concerns and goals, building rapport, and assessing safety.

4. A therapist should do all EXCEPT which of the following when probing for a client's personal history?

- A. Use open-ended questions**
- B. Have the client relive his or her painful memories**
- C. Build rapport**
- D. Explore significant life events**

A skilled intake scene is about safety and guiding the client to tell their story at a pace they control. Open-ended questions invite broad, rich narratives and let the client shape what's most important, rather than being led by the interviewer's agenda. Building rapport at the outset creates trust and a sense of safety, which makes it more likely the client will share honestly. Exploring significant life events helps you understand development, patterns, and how past experiences relate to present functioning. Encouraging the client to relive painful memories during the initial history probe, however, is not appropriate. Pushing for re-experiencing trauma can be distressing and may retraumatize the client, especially early in therapy or without proper support, consent, and trauma-informed procedures. If processing trauma becomes a focus later, it should be approached with appropriate techniques, safeguards, and clinical judgment.

5. Which item is not typically addressed in the introduction stage?

- A. The client's previous therapy history**
- B. The limits of confidentiality**
- C. The length of the session**
- D. The therapist's credentials**

In the introduction stage, the main task is to set up the therapeutic frame: build rapport and clearly explain how therapy will work. This includes outlining confidentiality and its limits, stating how long each session will last, discussing scheduling and fees, and obtaining informed consent. The client's previous therapy history is not typically addressed at this early point because it's information gathered later during intake and assessment. Exploring past therapy experiences then helps tailor the treatment plan, identify what approaches have helped or not helped before, and guide current goals without crowding the initial encounter with background details.

6. According to Schwitzer and Rubin, diagnosing an adult with autism is possible under DSM-5.

- A. True**
- B. False**
- C. Not specified**
- D. Depends on case**

The main idea here is how DSM-5 handles diagnosing autism in adults by requiring evidence of symptoms from early development. Schwitzer and Rubin emphasize that DSM-5 criteria for autism assume a history of deficits that were present in childhood. Without reliable documentation or retrospective evidence of early onset, a confident diagnosis of autism in an adult isn't supported under DSM-5. That's why the statement is considered false—they argue that you can't properly diagnose autism in an adult unless there's clear evidence the symptoms started in childhood. In practice, clinicians seek developmental history, school records, and collateral reports to establish this early onset, and lacking it makes the diagnosis untenable. The other options don't fit because the guidance isn't that the diagnosis is not specified or purely case-dependent; it hinges on demonstrating early developmental onset.

7. According to Tan, which two spiritual disciplines are favored in spiritual warfare?

- A. Scripture and prayer**
- B. Meditation and fasting**
- C. Worship and service**
- D. Study and evangelism**

Grounding in God's Word and ongoing communication with God are the focus. Scripture serves as the believer's sword—providing truth, identity in Christ, and guidance to counter deception—while prayer keeps the believer connected to God, drawing on His power, granting discernment, and sustaining endurance. Together, these two disciplines form the primary toolkit for spiritual warfare in Tan's view. Other practices like fasting, worship, or study support growth, but Scripture and prayer are the emphasized pair for warfare.

8. Which statement is true about treatment goals?

- A. A single goal is sufficient for all problems
- B. One or more goals is needed for each problem being treated**
- C. Goals are optional
- D. Goals should be removed after progress

Clear, problem-specific goals drive effective treatment. In counseling, clients often present multiple concerns, so setting one or more concrete goals for each problem gives direction to the work, creates criteria for judging progress, and helps keep the client engaged. When goals are defined for each issue, interventions can be tailored to targeted outcomes, and progress becomes observable rather than vague. If you tried to address everything with a single broad goal, important problems may be overlooked and progress may feel less tangible. Goals are not optional; they shape what happens in sessions and provide a clear way to evaluate change. They should be revisited and adjusted as progress occurs or as new concerns emerge, ensuring the plan stays aligned with the client's needs and circumstances. It wouldn't be appropriate to remove goals after some progress, as that would reduce accountability and make it harder to maintain gains or prevent relapse.

9. Directives that are therapist-centered are designed to shift clients toward what they are not yet talking about?

- A. Their current feelings
- B. What they are not yet talking about**
- C. Future goals
- D. Past experiences

Directives that are therapist-centered aim to bring into the conversation topics the client hasn't yet spoken about, often areas the client avoids or is reluctant to explore. By guiding the client toward these unspoken topics, the therapist helps uncover underlying concerns, fears, or unfinished business that block progress. This shift works to broaden awareness and open pathways for change, beyond what the client is currently expressing. While discussing present feelings or recalling past experiences or future goals can occur, the defining aim of these directives is to push exploration toward topics not yet discussed.

10. Which statement about insomnia is accurate in relation to suicide risk?

- A. Insomnia lowers suicide risk**
- B. Insomnia has no relation to suicide risk**
- C. Insomnia is only relevant when depression is present**
- D. Insomnia has long been known to increase suicide risk and is an independent risk factor**

Insomnia itself can elevate suicide risk even when other mental health conditions are not considered or controlled for. Sleep problems have been shown to increase the likelihood of suicidal thoughts, planning, and attempts, and this association persists after accounting for depression and other conditions, making insomnia an independent risk factor. The reasons involve both biology and cognition: ongoing sleep loss creates hyperarousal and cognitive strain that can heighten hopelessness, impair judgment, and reduce problem-solving ability, while increasing impulsivity and emotional dysregulation. Neurobiological changes linked to sleep deprivation—such as stress system activation and neurotransmitter imbalances—may also contribute to this heightened risk. Clinically, this means assessing sleep health is crucial in suicide risk assessments, and treating insomnia—such as with cognitive-behavioral therapy for insomnia—can be an important part of reducing suicidality, beyond addressing mood disorders alone.

Next Steps

Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.

As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.

If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at hello@examzify.com.

Or visit your dedicated course page for more study tools and resources:

<https://couc667.examzify.com>

We wish you the very best on your exam journey. You've got this!

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