

LMSW Practice Test (Sample)

Study Guide



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SAMPLE

Questions

- 1. What should an intake worker at an adolescent shelter do first when assigned a 14-year-old girl who has run away from her family and does not wish them to know her whereabouts?**
 - A. Allow her to discuss taboo subjects**
 - B. Interview the parents**
 - C. Notify the parents that she is at the shelter and request that they come in for a family interview**
 - D. Tell her that when she is ready to talk, a social worker is available**

- 2. In reacting to a client's presentation of material in a psychotherapeutic or clinical situation, the social worker should primarily**
 - A. abstract the basic theme of the communication and reflect it in a broader perspective**
 - B. deal solely with the concrete data presented**
 - C. expand the data by interpreting on a deeper level**
 - D. reflect back to the client using the same language and words where possible**

- 3. What is one key factor in determining the optimal size for a therapy group?**
 - A. Group attendance and turnover**
 - B. Individual skill levels**
 - C. Location of group meetings**
 - D. Number of available therapists**

- 4. Why do most practitioners prefer a group size of 8-10 for social group work?**
 - A. Allows room for non-attendance and client turnover**
 - B. Ensures maximum participation**
 - C. Makes the group more intimate**
 - D. Reduces the risk of conflict**

- 5. What should a worker do upon receiving a letter from a hospital patient requesting a transfer to a previous treatment facility?**
- A. Arrange for a transfer, as per her written request**
 - B. Contact the social worker in the city hospital and ask him or her to see the patient**
 - C. Ignore the letter, since the patient is in treatment**
 - D. Notify the patient that this is not the worker's function**
- 6. In order to encourage reluctant patients from third world countries to adopt Western health methods and reject unhelpful traditional medical practices, a social worker should first**
- A. arrange for the client to be seen in the home first.**
 - B. take a tour of the health facility with the patient.**
 - C. try to convince the oldest family member.**
 - D. try to convince the youngest family member.**
- 7. As treatment progresses with Ira, a computer programmer who abuses cocaine and alcohol, the social worker realizes that he is highly unmotivated but unable to fully stop. Which cognitive behavioral approach might the social worker use to help him?**
- A. Emphasize insight-based therapy to help Ira understand the underlying psychodynamic processes that promote his addiction**
 - B. Find out which situations seem to be associated with substance use and help Ira learn to avoid these**
 - C. Suggest that Ira participate in a family treatment program**
 - D. Suggest that Ira participate in a partial hospitalization program**
- 8. How might a therapist handle silence during the first group therapy session with new members?**
- A. Ask open-ended questions to prompt discussion**
 - B. Announce the goals of the group**
 - C. Perform group activities directly involving all members**
 - D. Allow silence to assess comfort levels**

- 9. What is the first step in dealing with a patient when referred to social services for help in planning for an operation?**
- A. Establish a relationship with the patient to find out what surgery means to him**
 - B. Help the patient handle his anxiety about the operation by describing his procedure**
 - C. Investigate community resources about helping the patient with his surgical plan**
 - D. Refer the patient to the psychiatrist for evaluation of his readiness for surgery**
- 10. After interviewing a ten-year-old girl, a school social worker believes that the child has been sexually abused by her father. What should the worker do when the report to the local protective agency is determined to be unfounded?**
- A. The worker is likely to be sued and will have to pay damages to the family.**
 - B. The school may be sued and forced to pay damages.**
 - C. The worker should continue to insist on a more thorough evaluation.**
 - D. The worker cannot be disciplined since she's immune from damages if the report was made in good faith.**

Answers

SAMPLE

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

SAMPLE

Explanations

SAMPLE

1. What should an intake worker at an adolescent shelter do first when assigned a 14-year-old girl who has run away from her family and does not wish them to know her whereabouts?

A. Allow her to discuss taboo subjects

B. Interview the parents

C. Notify the parents that she is at the shelter and request that they come in for a family interview

D. Tell her that when she is ready to talk, a social worker is available

When working with a 14-year-old girl who has run away from her family and does not want her whereabouts to be known, the first thing an intake worker should do is to allow her to discuss taboo subjects. This option is correct because it respects the girl's autonomy and provides a safe space for her to open up about her experiences without feeling judged or pressured. Option B is incorrect because it immediately involves the parents, which may make the girl feel even more unsafe and reluctant to share her thoughts and feelings. Option C is also incorrect because it disregards the girl's wishes and violates her privacy. Option D is incorrect because it does not actively address the issue at hand and may not be helpful in building trust and rapport with the girl. By allowing her to discuss taboo subjects, the intake worker can establish a respectful and understanding relationship with the girl, which can then facilitate a discussion about her situation and potential solutions.

2. In reacting to a client's presentation of material in a psychotherapeutic or clinical situation, the social worker should primarily

A. abstract the basic theme of the communication and reflect it in a broader perspective

B. deal solely with the concrete data presented

C. expand the data by interpreting on a deeper level

D. reflect back to the client using the same language and words where possible

The correct answer centers on the importance of synthesizing and contextualizing the client's communication in therapy. By abstracting the basic theme and reflecting it from a broader perspective, the social worker facilitates a deeper understanding for the client, encouraging exploration beyond the immediate details they present. This approach allows the client to gain insight into patterns and underlying issues, promoting therapeutic growth and awareness. In contrast, solely dealing with concrete data may lead to a limited engagement without addressing the emotional or thematic context of what the client is expressing. Interpreting on a deeper level can be beneficial in certain contexts, but it risks overshadowing the client's voice and understanding if not carefully balanced with their self-exploration. Reflecting back using the same language can be useful for validation, yet it may confine the discussion to the specific words used, limiting the opportunity for broader exploration and thematic understanding. The best approach involves taking the client's content and elevating it to a level that invites further dialogue and introspection.

3. What is one key factor in determining the optimal size for a therapy group?

A. Group attendance and turnover

B. Individual skill levels

C. Location of group meetings

D. Number of available therapists

The optimal size for a therapy group is significantly influenced by group attendance and turnover. A stable and consistent group composition allows members to build trust and rapport, enhancing the effectiveness of the therapeutic process. When attendance is regular and turnover is low, participants can share experiences and learn from each other more profoundly. In contrast, high turnover can disrupt the group dynamics, making it challenging for members to establish meaningful connections. Therefore, considering group attendance and turnover is essential for ensuring that the group remains cohesive and members can engage in deeper discussions and development. While individual skill levels, location of group meetings, and the number of available therapists are all relevant to the overall success of a therapy group, they do not fundamentally determine the optimal size as group dynamics and the ability for members to connect and progress depend heavily on stabilized attendance and low turnover rates.

4. Why do most practitioners prefer a group size of 8-10 for social group work?

A. Allows room for non-attendance and client turnover

B. Ensures maximum participation

C. Makes the group more intimate

D. Reduces the risk of conflict

While the idea that a group size of 8-10 allows for some flexibility with non-attendance and client turnover is a valid consideration, the primary reason practitioners often prefer this group size is related to ensuring maximum participation. A group of this size strikes a balance where enough individuals can contribute, fostering diverse perspectives and interactions, while also being small enough that each member has the opportunity to share and engage actively. In larger groups, individuals may feel overlooked or hesitant to participate, while smaller groups might lack the variety of viewpoints that enhance discussion. Therefore, an 8-10 member group is ideal for creating a dynamic environment where each member's voice can be heard, fostering inclusivity and engagement in the process.

5. What should a worker do upon receiving a letter from a hospital patient requesting a transfer to a previous treatment facility?

- A. Arrange for a transfer, as per her written request**
- B. Contact the social worker in the city hospital and ask him or her to see the patient**
- C. Ignore the letter, since the patient is in treatment**
- D. Notify the patient that this is not the worker's function**

When a worker receives a letter from a hospital patient requesting a transfer to a previous treatment facility, the appropriate action is to arrange for the transfer based on the patient's written request. This acknowledges the patient's autonomy and right to participate in their own care decisions. It is essential to respect the patient's wishes, as they are actively engaged in their treatment process and have the right to seek environments that they believe will be more beneficial for their recovery. Facilitating the request also involves the worker assessing whether the transfer aligns with the patient's clinical needs. This may include checking with both the current hospital and the previous facility to ensure an appropriate match in treatment and services. While there may be factors that could complicate the transfer, taking the patient's request seriously and initiating the process demonstrates a commitment to patient-centered care. The other responses do not prioritize the patient's request in the same manner. For instance, contacting another social worker may serve as assistance, but it could delay the process and does not directly address the patient's expressed desire. Ignoring the letter disregards the patient's autonomy and can undermine their trust in the treatment process. Notifying the patient that handling transfer requests is not the worker's function dismisses their needs and can leave them feeling unsupported in their

6. In order to encourage reluctant patients from third world countries to adopt Western health methods and reject unhelpful traditional medical practices, a social worker should first

- A. arrange for the client to be seen in the home first.**
- B. take a tour of the health facility with the patient.**
- C. try to convince the oldest family member.**
- D. try to convince the youngest family member.**

Arranging for the client to be seen in the home first is a strategic approach that helps build trust and rapport with patients from third world countries who may be hesitant to adopt Western health methods. By meeting patients in a familiar environment, the social worker demonstrates respect for their cultural background and established practices. This approach allows for a more personal interaction, where the social worker can listen to concerns and preferences in a comfortable setting. Furthermore, engaging with patients in their own homes can provide insights into their daily lives, health beliefs, and the traditional practices they currently utilize. This understanding is essential for effective communication and the gradual introduction of Western health concepts in a manner that acknowledges and respects the patient's cultural context. While engaging family members may have its advantages, starting with the individual in the home environment lays a foundation for a supportive relationship that can facilitate further discussions about health methods.

7. As treatment progresses with Ira, a computer programmer who abuses cocaine and alcohol, the social worker realizes that he is highly unmotivated but unable to fully stop. Which cognitive behavioral approach might the social worker use to help him?

- A. Emphasize insight-based therapy to help Ira understand the underlying psychodynamic processes that promote his addiction**
- B. Find out which situations seem to be associated with substance use and help Ira learn to avoid these**
- C. Suggest that Ira participate in a family treatment program**
- D. Suggest that Ira participate in a partial hospitalization program**

A This approach may not be as effective for Ira as it relies on gaining insight into unconscious processes, which may not address his immediate behavioral needs.

B: This answer is incorrect because it does not address Ira's specific motivation and underlying issues.

C: While involving family can be beneficial in addiction treatment, this answer does not address Ira's individual needs and may not be the most effective approach for him.

D: A partial hospitalization program may not be the best fit for Ira as it typically involves intensive and structured treatment, which may not address his specific challenges with motivation and stopping substance use.

8. How might a therapist handle silence during the first group therapy session with new members?

- A. Ask open-ended questions to prompt discussion**
- B. Announce the goals of the group**
- C. Perform group activities directly involving all members**
- D. Allow silence to assess comfort levels**

While asking open-ended questions can indeed encourage involvement and prompt discussion, the most effective approach during the first group therapy session with new members often involves allowing silence to assess comfort levels. This technique can provide valuable insights into how participants are feeling within the group setting. Silence can create a space for reflection and may help members process their thoughts and feelings without immediate pressure to respond. It also allows members to observe one another and gauge the group dynamics, which can be particularly important for new members. By allowing some quiet time, the therapist can help establish a safe environment where individuals feel comfortable to share when they are ready. In contrast, while announcing the goals of the group and performing activities can structure the session, these approaches might inadvertently overwhelm new members who are still acclimating to the group dynamic. Immediate activity might push individuals who are feeling insecure or uncertain to engage before they are ready, which may not foster an effective therapeutic atmosphere.

9. What is the first step in dealing with a patient when referred to social services for help in planning for an operation?
- A. Establish a relationship with the patient to find out what surgery means to him**
 - B. Help the patient handle his anxiety about the operation by describing his procedure**
 - C. Investigate community resources about helping the patient with his surgical plan**
 - D. Refer the patient to the psychiatrist for evaluation of his readiness for surgery**

Establishing a relationship with the patient is fundamental because it creates a trusting environment where the patient feels safe to express their feelings and thoughts regarding the surgery. Understanding what the surgery means to the patient allows the social worker to tailor their support according to the individual's emotional and psychological needs. This step is vital for effective communication and ensures that subsequent interventions, whether addressing anxiety, exploring community resources, or considering referrals, are rooted in a clear comprehension of the patient's perspective. A strong therapeutic alliance is the foundation of any successful intervention in social work. By prioritizing the establishment of a relationship first, social workers can foster a more understanding and supportive dialogue, leading to better outcomes in assisting the patient throughout the surgical planning process.

10. After interviewing a ten-year-old girl, a school social worker believes that the child has been sexually abused by her father. What should the worker do when the report to the local protective agency is determined to be unfounded?
- A. The worker is likely to be sued and will have to pay damages to the family.**
 - B. The school may be sued and forced to pay damages.**
 - C. The worker should continue to insist on a more thorough evaluation.**
 - D. The worker cannot be disciplined since she's immune from damages if the report was made in good faith.**

The correct answer emphasizes the protective nature of reporting suspected abuse. When a report is determined to be unfounded, it does not necessarily imply that the social worker acted inappropriately or with malice. Reports of suspected abuse are often made in good faith, and the intention behind these reports is essential. In many jurisdictions, there are legal protections for individuals who report suspected child abuse, as the intention is to shield vulnerable children from harm. Choosing to prioritize the safety of the child by making a report is a duty of a social worker, and even if the outcome is unfounded, the act of reporting cannot usually lead to legal consequences such as lawsuits against the worker or the agency if the report was made in good faith. The implications for the other options lie in how they frame the consequences of making a report. Legal immunity helps protect social workers from wrongful punitive actions when they act to report suspected abuse based on their professional judgment and ethical obligations.