

PSYCHOSOCIAL ASPECT OF WELLBEING MIDTERM PRACTICE TEST (SAMPLE) STUDY GUIDE



Prepare with structure. Pass with confidence



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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. Which subgroup of veterans has the highest rates of suicide?

- A. Non-deployed veterans.
- B. Deployed veterans.
- C. Veterans in combat roles only.
- D. All veterans have similar rates.

2. Inclusivity is defined as what?

- A. A policy ensuring equal pay
- B. Providing targeted opportunities only to some groups
- C. Welcoming, respecting, valuing all individuals and groups
- D. Only focusing on the majority group's needs

3. What is FUNFitness?

- A. A medication
- B. A nutrition program
- C. A physical therapy screening that examines the flexibility, strength, balance, and aerobic fitness of Special Olympics Athletes and people with IDD
- D. A mental health therapy

4. Which statement best differentiates loneliness from social isolation?

- A. Loneliness is the objective lack of contact.
- B. Loneliness is the perceived gap between desired and actual social connections; social isolation is an objective lack of contact.
- C. Both concepts refer to the same thing.
- D. Loneliness has no impact on mood.

5. What are social determinants of health?

- A. Genetic predispositions that influence disease
- B. The conditions in which people are born, grow, live, and age, shaped by the distribution of money, power, and resources at global, national, and local levels
- C. Healthcare provider attitudes
- D. Only access to healthcare

- 6. In a primary care psychosocial workflow, what are the recommended steps after an initial positive screen?**
- A. Conduct targeted assessment (PHQ-9, GAD-7), assess suicide risk, refer for therapy/psychiatry, arrange follow-up.
 - B. Ignore the positive screen and recheck in a year.
 - C. Refer only for physical health evaluation.
 - D. Immediately hospitalize without assessment.
- 7. Disengaged coping is best described as orienting away from the stressor or one's reaction.**
- A. Active coping
 - B. Disengaged coping
 - C. Accommodative coping
 - D. Avoidant coping
- 8. Health disparity is defined as a health difference that is closely linked with social, economic, and/or environmental disadvantage.**
- A. A random variation in health outcomes.
 - B. A health difference not related to social status.
 - C. A health difference closely linked to social, economic, and environmental disadvantage.
 - D. An individual difference in health due to genetics.
- 9. Which statement best describes moral sensitivity?**
- A. It focuses exclusively on clinical technique.
 - B. It involves understanding the importance of the client-provider relationship and considering ethical issues from the patient's viewpoint.
 - C. It is unrelated to beliefs and values.
 - D. It only applies to research ethics.
- 10. Which stage involves pros outweighing cons and clearer intention to change?**
- A. Action
 - B. Preparation
 - C. Contemplation
 - D. Maintenance

Answers

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

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Explanations

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1. Which subgroup of veterans has the highest rates of suicide?

- A. Non-deployed veterans.
- B. Deployed veterans.
- C. Veterans in combat roles only.
- D. All veterans have similar rates.

Key idea: suicide risk among veterans is not uniform across groups; some subgroups face higher risk because of the combination of life after service and access to supports. Non-deployed veterans can be at the highest risk because often face civilian-life challenges without the protective structure and ongoing support that deployment and military life can provide. Factors like unemployment or underemployment, housing instability, social isolation, and existing mental health conditions that may not have been fully addressed during service can accumulate after leaving the military. Additionally, there can be barriers to accessing care or less engagement with programs that specifically reach deployed veterans, leaving these individuals with fewer protective resources. While deployment and combat exposure are important risk factors for trauma-related symptoms, the overall pattern observed in some research shows non-deployed veterans experiencing higher suicide rates, reflecting how civilian reintegration realities and access to care influence risk. The statement that all veterans have similar rates doesn't fit with the observed variation across subgroups.

2. Inclusivity is defined as what?

- A. A policy ensuring equal pay
- B. Providing targeted opportunities only to some groups
- C. Welcoming, respecting, valuing all individuals and groups
- D. Only focusing on the majority group's needs

Inclusivity means welcoming, respecting, valuing all individuals and groups. It's about creating spaces where diverse backgrounds are represented, every voice can be heard, and barriers to participation are removed. When you foster inclusivity, people from different ages, races, abilities, genders, and life experiences feel they belong and can contribute. This supports psychosocial wellbeing by strengthening belonging, reducing social exclusion, and affirming everyone's worth. An equal-pay policy addresses fairness in compensation but doesn't define inclusivity. Providing targeted opportunities only to some groups undermines inclusivity by excluding others. Focusing only on the majority group's needs ignores diversity and can harm the wellbeing of minority or marginalized individuals.

3. What is FUNFitness?

- A. A medication
- B. A nutrition program
- C. A physical therapy screening that examines the flexibility, strength, balance, and aerobic fitness of Special Olympics Athletes and people with IDD
- D. A mental health therapy

FUNFitness is a physical therapy screening used with Special Olympics athletes and people with intellectual and developmental disabilities to measure key aspects of physical function—flexibility, strength, balance, and aerobic fitness. This assessment helps clinicians and coaches identify specific areas to improve, tailor individualized exercise plans, and monitor progress over time to support safe, effective participation in sport and activity. It isn't a medication, a nutrition program, or mental health therapy; those domains are addressed by other interventions, while FUNFitness focuses on evaluating physical capabilities to guide fitness and health planning.

4. Which statement best differentiates loneliness from social isolation?

- A. Loneliness is the objective lack of contact.
- B. Loneliness is the perceived gap between desired and actual social connections; social isolation is an objective lack of contact.**
- C. Both concepts refer to the same thing.
- D. Loneliness has no impact on mood.

Loneliness is about how you feel and what you perceive, while social isolation is about the actual, measurable amount of social contact you have. Loneliness arises when there is a perceived gap between the social connections you want and what you experience. Social isolation is an objective state defined by the number and frequency of social interactions, regardless of how you feel about them. So the best statement captures that distinction: loneliness is the perceived gap between desired and actual connections, and social isolation is an objective lack of contact. The other options mix up perception and reality, or ignore the link between loneliness and mood. Loneliness can accompany many social situations, and it can negatively affect mood and mental health, even if you're not physically isolated.

5. What are social determinants of health?

- A. Genetic predispositions that influence disease
- B. The conditions in which people are born, grow, live, and age, shaped by the distribution of money, power, and resources at global, national, and local levels**
- C. Healthcare provider attitudes
- D. Only access to healthcare

Social determinants of health are the conditions in which people are born, grow, live, work, and age, shaped by how money, power, and resources are distributed in society. These factors—such as income, education, housing quality, neighborhood safety, access to nutritious food, employment, social support, discrimination, and access to healthcare—collectively influence health outcomes and health equity. This broader, structural view explains why health disparities exist beyond biology or individual choices. Genetic predispositions are biological factors that affect disease risk, not the social environment. Healthcare provider attitudes shape the care someone receives but don't encompass the wider social and economic forces that drive health. And limiting the concept to access to healthcare ignores the numerous social and environmental conditions that affect health across lifespans.

6. In a primary care psychosocial workflow, what are the recommended steps after an initial positive screen?

- A. Conduct targeted assessment (PHQ-9, GAD-7), assess suicide risk, refer for therapy/psychiatry, arrange follow-up.**
- B. Ignore the positive screen and recheck in a year.
- C. Refer only for physical health evaluation.
- D. Immediately hospitalize without assessment.

When a positive mental health screen appears in primary care, the next steps focus on understanding the shape and safety of the issue and then linking to appropriate care, followed by planned follow-up. Begin with targeted assessment using validated tools like the PHQ-9 for depression and the GAD-7 for anxiety to gauge symptom severity, functional impact, duration, and prior treatment history. At the same time, conduct a suicide risk assessment by asking directly about thoughts of self-harm, intent, planning, and means, and develop a safety plan if there are any safety concerns. Based on what you find, refer to therapy or psychiatry as appropriate, and consider a stepped-care approach that may include psychotherapy (e.g., CBT, problem-solving therapy) and, when indicated, pharmacotherapy, with care coordinated through collaborative or integrated care. Arrange follow-up to monitor symptom change, treatment adherence, and side effects, reusing the screening measures to track progress over time. Skipping assessment and safety planning, ignoring the mental health concern, or immediately resorting to hospitalization without evaluation are not appropriate approaches in this context; the goal is to assess, ensure safety, connect to appropriate treatment, and monitor progress.

7. Disengaged coping is best described as orienting away from the stressor or one's reaction.

- A. Active coping
- B. Disengaged coping**
- C. Accommodative coping
- D. Avoidant coping

Disengaged coping means turning away from both the stressor and the emotional reaction it triggers. It's a withdrawal pattern where you don't engage with the problem and you also don't engage with what you're feeling about it. This differs from active coping, which directly aims to confront and solve the stressor, and from accommodative coping, which involves adapting or adjusting yourself to the situation. While avoidant coping also involves avoiding the stressor, the description here emphasizes disengagement from both the stressor and one's own responses, which aligns with how disengaged coping is defined. An example would be not only avoiding thinking about an upcoming exam but also ignoring any related feelings, rather than addressing study strategies or processing those emotions.

8. Health disparity is defined as a health difference that is closely linked with social, economic, and/or environmental disadvantage.

- A. A random variation in health outcomes.
- B. A health difference not related to social status.
- C. A health difference closely linked to social, economic, and environmental disadvantage.**
- D. An individual difference in health due to genetics.

Health disparities arise when differences in health outcomes are systematically linked to social, economic, and environmental conditions. The best description here is the one that explicitly notes a health difference closely tied to social, economic, and environmental disadvantage, because it anchors health outcomes in the broader context of social determinants of health—the conditions in which people live, work, and play that influence risk and access to resources. This framing matters because, while genetics and biology play a role in health, health disparities focus on how social and environmental factors create unequal health outcomes across groups. The other ideas don't fit this concept: random variation describes outcomes without a systematic social pattern, a difference not related to social status ignores the very determinants that drive disparities, and genetics points to biological factors without the social context that makes disparities avoidable and unfair.

9. Which statement best describes moral sensitivity?

- A. It focuses exclusively on clinical technique.
- B. It involves understanding the importance of the client-provider relationship and considering ethical issues from the patient's viewpoint.**
- C. It is unrelated to beliefs and values.
- D. It only applies to research ethics.

Moral sensitivity is the ability to recognize ethical dimensions in a situation and to understand how actions will affect others, including the patient's values, beliefs, and emotions within the care relationship. The statement is the best because it centers on the importance of the client-provider relationship and asks the clinician to consider issues from the patient's perspective, which is essential for ethical awareness and responsive care. Other options miss this core aspect: focusing only on technique leaves out the ethical meaning of care; beliefs and values are central to moral sensitivity, not unrelated; and the concept applies broadly to everyday clinical practice, not just research ethics.

10. Which stage involves pros outweighing cons and clearer intention to change?

- A. Action
- B. Preparation**
- C. Contemplation
- D. Maintenance

In this moment of change, the balance tilts toward taking action and the person shows a clear plan to move forward. That tipping of pros over cons indicates they're no longer just weighing whether to change; they're ready to act soon and often start laying out concrete steps, like setting goals, making a plan, or trying small initial changes. This readiness and intent to act in the near term distinguishes it from the earlier stage where people are still ambivalent (weighing benefits and costs without commitment). It also sits before actually changing behavior (action) and before maintaining that change over time (maintenance). So, the stage described is Preparation.

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://psychaspectofwellbeingmidterm.examzify.com>

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

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