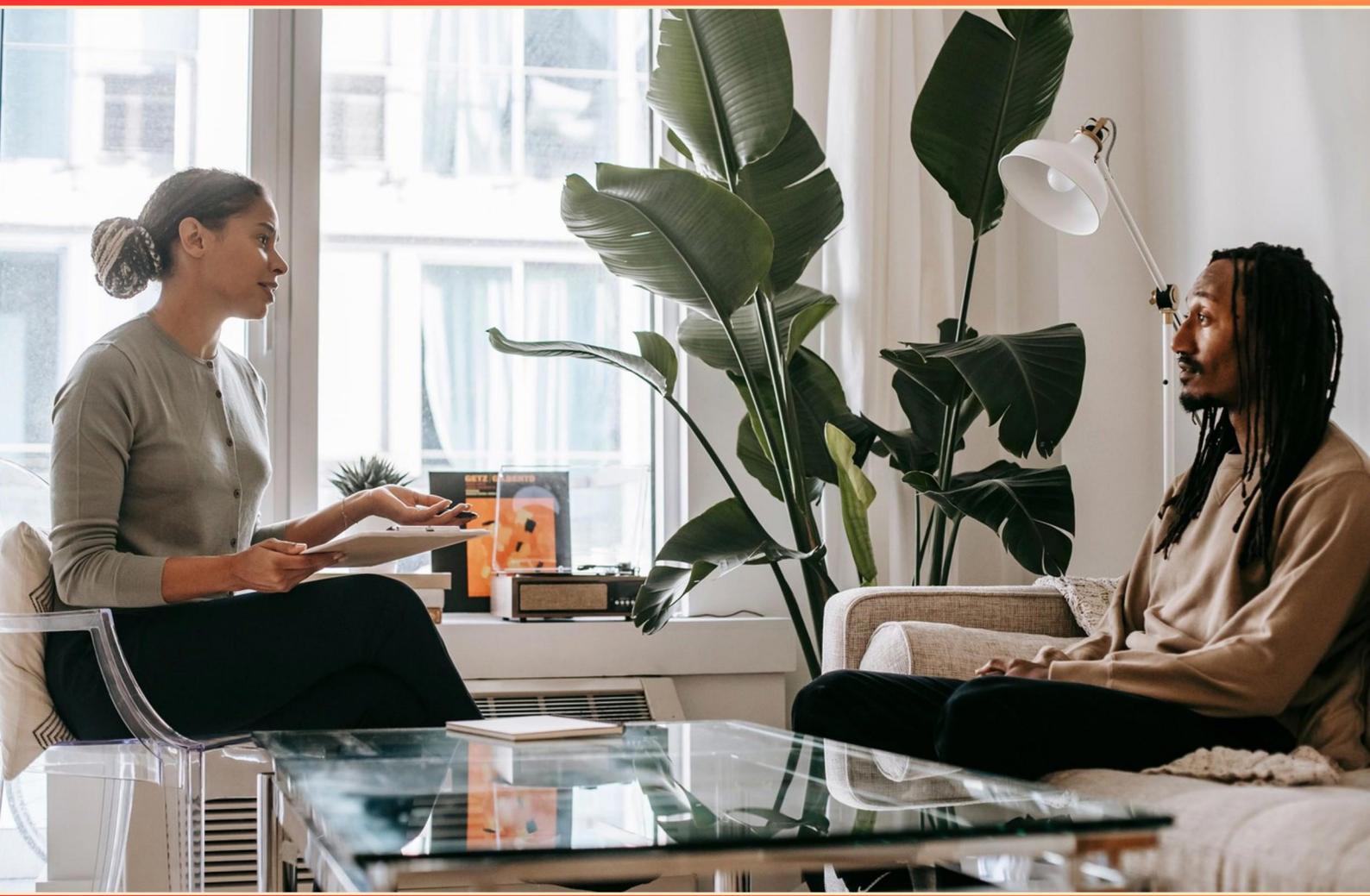
# ADDICTIONS COUNSELOR PRACTICE EXAM (SAMPLE)

## STUDY GUIDE



## SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

**VISIT US ONLINE FOR THE FULL VERSION STUDY GUIDE**

https://addictionscounselor.examzify.com

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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.

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# 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!

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# Questions

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**1. What is the Case management approach that focuses on helping clients assert direct and personal control in the search for resources?**

A. Clinical or Rehabilitation Model

B. Intensive Case Management Model

C. Program of Assertive Community Treatment Model. Resources.

D. Supportive Counseling Model

**2. PRISM evaluates which personality disorders?**

A. Narcissistic and paranoid

B. Antisocial and borderline

C. Histrionic and dependent

D. Schizoid and avoidant

**3. Which principle is associated with Dual Relationships?**

A. Client Welfare

B. Dual Relationships

C. Compliance with the law

D. Non Discrimination

**4. In motivational approaches to change, which method is emphasized to increase readiness to change?**

A. Lectures on risk.

B. Structured assessments and feedback to raise readiness to change.

C. Punitive consequences for relapse.

D. Isolating the client from supports.

**5. Which stage is not a stage in the development of cocaine addiction?**

A. Isolated Use

B. Experimentation

C. Regular Use

D. Chronic Dependence

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**6. The TSR assessment instrument measures:**

A. Nature and intensity of treatment services

B. Patient satisfaction with care

C. Predictors of relapse risk

D. Quality of life metrics

**7. Which is not considered a stage in the typical development of alcoholism?**

A. Early experimentation

B. Morning drinking

C. Denial and avoidance

D. Chronic dependence

**8. Which case management approach focuses on helping clients gain personal control in locating resources?**

A. Clinical or Rehabilitation Model

B. Crisis Intervention Model

C. Strengths Based Perspective

D. Person-Centered Planning

**9. In motivational interviewing, the role of the counselor is?**

A. A coach or consultant, asking key questions for learning

B. A medical professional who prescribes medications

C. A judge of readiness

D. A passive listener

**10. Which of the following is NOT listed as a depressant drug used to cope with stress?**

A. Alcohol

B. Opiates

C. Cocaine

D. Benzodiazepines

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# Answers

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

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# Explanations

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## 1. What is the Case management approach that focuses on helping clients assert direct and personal control in the search for resources?

A. Clinical or Rehabilitation Model

B. Intensive Case Management Model

C. Program of Assertive Community Treatment Model. Resources.

D. Supportive Counseling Model

*This item tests understanding of an empowerment-oriented approach that actively puts the client in charge of finding resources. Program of Assertive Community Treatment uses a mobile, multidisciplinary team that works in the client's own environment rather than requiring clinic-based visits. The focus is on helping clients identify which resources matter to them and then actively assisting them in accessing those resources—housing, healthcare, benefits, employment, substance-use treatment, and more—while honoring their choices. Services are intensive, flexible, and available in the community, with small caseloads and ongoing outreach, so clients can pursue what they want with steady support. This combination—outreach, client-directed decision-making, and integrated community services—defines ACT and explains why it best fits the idea of asserting direct, personal control in the search for resources.*

## 2. PRISM evaluates which personality disorders?

A. Narcissistic and paranoid

B. Antisocial and borderline

C. Histrionic and dependent

D. Schizoid and avoidant

*PRISM is built around identifying personality disorders that most impact treatment and prognosis in people with substance use issues, focusing on antisocial and borderline patterns. Antisocial personality disorder is characterized by a pattern of disregard for laws, social norms, and the rights of others, along with impulsivity and a lack of remorse. Borderline personality disorder centers on unstable relationships, identity, and emotions, along with impulsivity and fear of abandonment. The PRISM interview uses structured questions and criteria that reliably pick up these two profiles in addiction settings, helping clinicians diagnose them more consistently and plan appropriate interventions. While other personality disorders can co-occur, PRISM targets antisocial and borderline as its primary focus, which is why those two are the best match for what PRISM evaluates.*

## 3. Which principle is associated with Dual Relationships?

A. Client Welfare

B. Dual Relationships

C. Compliance with the law

D. Non Discrimination

*Understanding why dual relationships matter is about boundaries and protecting clients from harm. When a counselor has more than one role with a client—such as being a friend, relative, business associate, or in some way sharing a non-professional relationship—the counselor's judgment and the power dynamic can be compromised. That's why the principle most closely tied to this issue is the term that names the situation itself: Dual Relationships. Recognizing and naming this boundary issue helps clinicians implement safeguards, such as avoiding multiple roles and seeking supervision or referrals when a conflict arises, to safeguard client welfare. While client welfare, compliance with the law, and non-discrimination are essential ethics principles, they describe broader obligations and don't specifically identify the boundary problem inherent in overlapping roles.*

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## 4. In motivational approaches to change, which method is emphasized to increase readiness to change?

A. Lectures on risk.

B. Structured assessments and feedback to raise readiness to change.

C. Punitive consequences for relapse.

D. Isolating the client from supports.

*Motivational approaches to change focus on raising readiness by helping clients see where they stand and how their current behavior fits with their values and goals. Structured assessments provide a clear snapshot of the person's situation, while personalized feedback makes the consequences of their behavior tangible in a nonjudgmental way. This process often brings ambivalence to the surface and creates a gap between where they are and where they want to be, which is a powerful spark for motivation. When clients hear specific, tailored feedback about risks, benefits, and goals, they're more likely to reflect, commit, and engage in change efforts. Lectures on risk tend to be information-heavy but may not connect with the client's readiness or personal motivations. Punitive consequences for relapse can provoke defensiveness and resistance, not collaboration. Isolating the client from supports removes essential social encouragement that sustains motivation. By contrast, structured assessments with feedback directly target readiness, making it the best approach to promote change.*

## 5. Which stage is not a stage in the development of cocaine addiction?

A. Isolated Use

B. Experimentation

C. Regular Use

D. Chronic Dependence

*The concept being tested is how cocaine use typically progresses toward addiction. In most clinical models, progression moves from trying the drug (experimentation) to using it in a regular pattern (regular use) to reaching a dependent, addicted state (chronic dependence). Isolated use does not represent a stage in this developmental sequence; it's usually a one-time or infrequent event and doesn't show the increasing involvement that characterizes the progression toward addiction. That's why this option is the best answer—it doesn't describe a phase in the trajectory toward cocaine addiction. The other stages fit the pattern: experimentation marks initial exposure, regular use indicates a patterned, ongoing use, and chronic dependence reflects addiction with tolerance, withdrawal, and compulsive use.*

## 6. The TSR assessment instrument measures:

A. Nature and intensity of treatment services

B. Patient satisfaction with care

C. Predictors of relapse risk

D. Quality of life metrics

*The essential focus of the TSR is capturing the kinds of services a patient is receiving, where they are delivered, and how much or how often. It records the nature of treatment (for example, counseling, pharmacotherapy, case management, group or individual therapy), the setting (outpatient, inpatient, residential), and the intensity or dose (frequency, duration, and amount of each service). This makes the TSR a practical tool for planning and coordinating care, monitoring service use across different stages of treatment, and ensuring appropriate levels of support as patients move through the system. It isn't designed to measure patient satisfaction, predict relapse risk, or assess quality of life; those areas require different instruments.*

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## 7. Which is not considered a stage in the typical development of alcoholism?

A. Early experimentation

B. Morning drinking

C. Denial and avoidance

D. Chronic dependence

*The idea being tested is how alcoholism typically progresses through identifiable phases, and which of the listed items isn't regarded as one of those phases. Early experimentation and denial and avoidance are commonly described as part of the developmental process: people try alcohol, reasons for use emerge, and denial or minimization can help delay recognition of a problem. Chronic dependence is another stage you'll see in many models, marking a shift to physiological reliance and withdrawal patterns. Morning drinking, while strongly associated with dependence, isn't a separate stage of development. It's a behavioral sign that dependence has already become established and withdrawal relief or daily habituation is occurring. In other words, it reflects severity and a consequence of progression, not a distinct phase in the typical sequence.*

## 8. Which case management approach focuses on helping clients gain personal control in locating resources?

A. Clinical or Rehabilitation Model

B. Crisis Intervention Model

C. Strengths Based Perspective

D. Person-Centered Planning

*The key idea is empowerment through building on what clients can do and the resources they already have or can develop. The strengths-based perspective treats the client as capable and focuses on identifying and leveraging assets—personal skills, networks, and community supports—to solve problems. In this approach, the case manager collaborates with the client to map out resources, brainstorm options, and take concrete steps to access them, putting the client in the driver's seat and boosting self-efficacy and autonomy. Other approaches emphasize different angles. The clinical or rehabilitation model centers on diagnosis and symptom-focused treatment, not on empowering clients to locate resources. Crisis intervention aims for rapid stabilization rather than ongoing resource development. While person-centered planning honors the client's goals and preferences, it doesn't inherently prioritize teaching the client to autonomously locate and mobilize resources to the same extent as the strengths-based approach.*

## 9. In motivational interviewing, the role of the counselor is?

A. A coach or consultant, asking key questions for learning

B. A medical professional who prescribes medications

C. A judge of readiness

D. A passive listener

*In motivational interviewing, the counselor serves as a collaborative guide who helps the client learn about their own motivations and goals. The best fit is a coach or consultant role, using open-ended questions and reflective listening to draw out the client's values, ambivalence, and reasons for change. This approach emphasizes partnership, evoking the client's own ideas for change rather than directing them or providing quick fixes. It also centers on autonomy, supporting the client's capacity to choose a path forward. The role is not that of a medical prescriber, a judge of readiness, or a passive listener; instead, the counselor stays actively engaged, asking insightful questions and guiding the conversation to foster learning and motivation.*

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**10. Which of the following is NOT listed as a depressant drug used to cope with stress?**

A. Alcohol

B. Opiates

C. Cocaine

D. Benzodiazepines

*The main idea is knowing which drugs slow down the central nervous system (depressants) versus those that speed it up (stimulants). Depressants reduce arousal and are often used to cope with stress by dampening anxiety or tension. Alcohol, opiates, and benzodiazepines all slow CNS activity and are commonly considered depressants. Cocaine, by contrast, is a stimulant; it increases alertness, energy, and arousal rather than calming or depressing CNS activity. Since the question asks for what is NOT listed as a depressant used to cope with stress, cocaine is the correct choice because it does not have depressant effects.*

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# 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://addictionscounselor.examzify.com

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

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