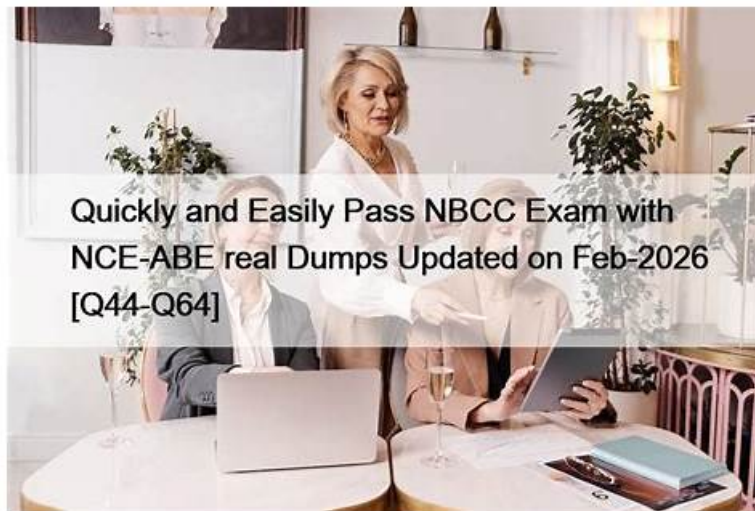


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## NBCC NCE-ABE Exam Syllabus Topics:

| Section                             | Weight | Objectives                                                                                                                                                                                                                                                                   |
|-------------------------------------|--------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Intake, Assessment, and Diagnosis   | 15%    | <ul style="list-style-type: none"><li>- Cultural considerations in assessment</li><li>- Diagnostic frameworks and classification</li><li>- Client intake procedures</li><li>- Assessment methods and tools</li></ul>                                                         |
| Professional Practice and Ethics    | 12%    | <ul style="list-style-type: none"><li>- Legal and regulatory issues</li><li>- Confidentiality and informed consent</li><li>- Professional roles and responsibilities</li><li>- Ethical standards and codes</li></ul>                                                         |
| Treatment Planning                  | 12%    | <ul style="list-style-type: none"><li>- Case management and coordination</li><li>- Goal setting and outcome measurement</li><li>- Evidence-based interventions</li><li>- Treatment plan development and implementation</li></ul>                                             |
| Counseling Skills and Interventions | 28%    | <ul style="list-style-type: none"><li>- Multicultural and social justice competence</li><li>- Therapeutic relationship building</li><li>- Counseling theories and techniques</li><li>- Group counseling processes</li><li>- Career and life planning interventions</li></ul> |
| Areas of Clinical Focus             | 15%    | <ul style="list-style-type: none"><li>- Substance abuse and addiction</li><li>- Relationship and family issues</li><li>- Trauma and crisis intervention</li><li>- Mental health disorders across lifespan</li></ul>                                                          |

|                            |     |                                                                                                                                                                                                                         |
|----------------------------|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Core Counseling Attributes | 18% | <ul style="list-style-type: none"> <li>- Self-awareness and professional development</li> <li>- Advocacy and leadership</li> <li>- Consultation and collaboration</li> <li>- Research and program evaluation</li> </ul> |
|----------------------------|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

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## NBCC National Counselor Examination Sample Questions (Q74-Q79):

### NEW QUESTION # 74

A counselor in private practice has been asked to teach a course in the counselor education department of the local university. Soon after beginning the course, one of the students in the class requests personal counseling from the counselor. Ethically, what should the counselor do?

- A. Schedule a counseling appointment at the earliest convenience.
- B. Ask the student to wait until the course is over.
- C. Suggest that the student redirect the request to another faculty member.
- **D. Refer the student to another appropriate professional.**

**Answer: D**

Explanation:

Ethical practice requires counselors to avoid multiple relationships when they could impair professional judgment, increase the risk of harm, or exploit the client. Serving simultaneously as both instructor and personal counselor to the same individual creates:

\* A power differential (grading authority and evaluative role)

\* Potential for role confusion

\* Risk that the student may feel pressured or may not be fully free in the counseling relationship. Therefore, the counselor should not enter into a counseling relationship with a current student. The ethically appropriate action is to provide a referral to another qualified mental health professional, as in Option B.

\* A (asking the student to wait until the course is over) still allows for a future dual relationship and does not completely remove the risk tied to the existing power dynamic.

\* C (scheduling counseling) directly creates a problematic multiple relationship.

\* D (redirecting to another faculty member) could create another dual relationship (faculty-student and counselor-client) and is not the cleanest or safest option.

Thus, the counselor should refer the student to another appropriate professional, making B the correct answer.

### NEW QUESTION # 75

Contemporary theories of occupational placement services emphasize

- A. reliance on computer-assisted decision-making models.
- B. that the singular purpose of placement centers is to find jobs for clients.
- C. that personal skills and abilities can compensate for declining trends in any occupational field.
- **D. the need for clients to develop job search and networking skills.**

**Answer: D**

Explanation:

In the Career Development core area, modern practice emphasizes career self-management, lifelong employability, and empowering clients with skills to navigate a changing labor market.

\* Contemporary occupational placement and career services focus on helping clients develop practical job search skills (resume writing, interviewing, networking, use of online tools) and the ability to build and maintain professional networks. Clients are taught to actively manage their careers rather than passively wait for placements. This aligns with Option A, making it correct.

\* Computer-assisted decision-making models (B) can be useful tools, but current theory does not emphasize reliance on them as the main feature; they are one resource among many.

\* The idea that the singular purpose of placement centers is simply to find jobs for clients (Option C) reflects an outdated, narrow view. Contemporary practice emphasizes counseling, skill-building, and career development, not only placement.

\* Option D, suggesting that personal skills can always compensate for declining trends in any occupational field, is inaccurate; labor market conditions and field-specific trends significantly affect opportunities, and counselors are trained to help clients realistically consider labor market information and occupational outlooks.

Thus, the focus on clients developing job search and networking skills (A) best represents contemporary theories of occupational placement services.

### NEW QUESTION # 76

A primary distinction between content and construct validity is the:

- A. Nature of the judges evaluating the test.
- **B. Nature of the rationale underlying the test.**
- C. Statistical analyses used on the test.
- D. Types of items included in the test.

**Answer: B**

Explanation:

In the assessment domain, counselors are expected to understand different forms of test validity and how they are established.

\* Content validity is based on a logical, rational match between test items and a clearly defined content domain (for example, a math test sampling the full range of skills taught in a course). The rationale is: does this set of items adequately represent the domain it claims to cover?

\* Construct validity is based on a theoretical rationale: the test is intended to measure an underlying psychological construct (such as depression, anxiety, or intelligence), and multiple forms of evidence (correlations, factor analysis, group differences, etc.) are used to support that claim.

Thus, the primary distinction is the nature of the rationale underlying the test (Option B):

\* Content validity relies on rational, expert judgment about content coverage.

\* Construct validity relies on theory and empirical evidence regarding how the construct should behave and relate to other variables. Why the others are incorrect:

\* A. Nature of the judges: While expert judges are often involved in evaluating content validity, this is not the primary distinction; construct validity can also involve experts plus statistical evidence.

\* C. Types of items: The same items could, in theory, be examined for either type of validity; items themselves do not define the distinction.

\* D. Statistical analyses: Statistical evidence is especially important for construct validity, but simply saying "statistical analyses" does not capture the fundamental conceptual difference in rationale.

NBCC Counselor Work Behavior Areas expect counselors to use tests appropriately, which includes understanding these validity distinctions when selecting and interpreting assessment instruments.

### NEW QUESTION # 77

Within group counseling, the formation of subgroups as a reaction to initial intragroup conflict:

- A. Serves as an indicator of counseling effectiveness.
- B. Should be prevented by the counselor.
- C. Indicates need for change in leadership style.
- **D. Is a phenomenon to be expected.**

**Answer: D**

Explanation:

Counselors are expected to understand group development processes and respond therapeutically rather than pathologizing normal group phenomena.

During the transition stage of group development, members often experience:

\* Anxiety and uncertainty

\* Testing of the leader

\* Conflict and disagreement

\* Possible formation of subgroups as members seek safety and alignment

The formation of subgroups in response to early intragroup conflict is a common and expected phenomenon in group counseling, not automatically a sign of poor leadership or failure.

\* B. Should be prevented by the counselor - trying to suppress all subgrouping can interfere with authentic expression and working through conflict.

\* C. Indicates need for change in leadership style - subgroup formation alone does not automatically mean the leader is ineffective.

\* D. Indicator of counseling effectiveness - subgrouping is developmental, not inherently a sign of success or failure.

Recognizing this as an expected part of group development (A) allows the counselor to facilitate movement toward cohesion and productive work rather than overreacting to normal dynamics.

### NEW QUESTION # 78

Which of the following is the experimentally validated treatment modality for individuals diagnosed with substance use disorder?

- A. Narrative therapy
- B. Eye movement desensitization and reprocessing
- C. Solution-focused brief therapy
- **D. Motivational interviewing**

**Answer: D**

Explanation:

In the Counseling Skills and Interventions work behavior area, counselors are expected to select interventions that are supported by empirical evidence for the client's specific concerns, including substance use disorders.

Motivational interviewing (MI) (Option A) is a widely researched, empirically supported treatment modality for individuals with substance use disorders. It is a client-centered, directive approach designed to:

\* Enhance intrinsic motivation for change,

\* Resolve ambivalence,

\* Support clients in moving through stages of change regarding substance use.

Core MI skills often summarized as OARS (open questions, affirmations, reflections, summaries) are used to elicit and strengthen "change talk" and reduce resistance. Research has consistently shown MI's effectiveness in reducing substance use and increasing treatment engagement across various populations and settings.

Why the other options are less appropriate here:

\* B. Narrative therapy - While potentially helpful for meaning-making and identity reconstruction, it is not the primary empirically validated front-line modality for substance use disorders.

\* C. Solution-focused brief therapy - Has some supportive evidence for various problems and can be useful in certain substance-related contexts, but MI has a stronger and more direct evidence base specifically for substance use disorders.

\* D. Eye movement desensitization and reprocessing (EMDR) - Primarily validated for trauma-related disorders, particularly PTSD, rather than as a core, primary treatment for substance use disorders.

NBCC-aligned counselor work behaviors emphasize that practitioners should match interventions to the problem using approaches with strong empirical support, making motivational interviewing the best choice among the options for treating substance use disorders.

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### NEW QUESTION # 79

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