Psych CE

Prolonged Exposure Therapy for Trauma

1. What is the primary goal of Prolonged Exposure (PE) therapy?

- A. To reduce PTSD symptoms
- B. To increase avoidance
- C. To eliminate all trauma memories
- D. To develop new avoidance behaviors

2. Which population was PE therapy originally designed to help?

- A. Trauma-affected clients
- B. Those without PTSD symptoms
- C. General anxiety patients
- D. Individuals without trauma history

3. Which principle is PE therapy primarily based on?

- A. Emotional processing theory
- B. Freudian psychoanalysis
- C. Behavioral inhibition
- D. Psycho-social therapy

4. What is a core component of PE therapy?

- A. Psychoeducation
- **B.** Medication
- C. Physical exercise
- D. Nutritional advice

5. What does in vivo exposure in PE therapy involve?

- A. Facing real-world situations
- B. Revisiting happy memories
- C. Imagining future scenarios
- D. Avoiding stressful environments

6. Which technique is used in PE to confront traumatic memories in a controlled environment?

A. Imaginal exposure

B. Meditation

C. Talk therapy

D. Avoidance behavior

7. What is the role of breathing retraining in PE therapy?

- A. To reduce physiological arousal
- B. To promote dissociation
- C. To distract the client
- D. To heighten trauma memory

8. What is a contraindication for starting PE therapy?

- A. Active psychosis
- B. Stable mental state
- C. High resilience
- D. Positive mental health

9. What does the term 'habituation' refer to in the context of PE therapy?

- A. Reduction in emotional reactivity
- B. Increased avoidance
- C. Heightened distress
- D. Complete trauma elimination

10. How does cultural diversity impact trauma therapy?

- A. Shaping therapy techniques
- B. No effect on therapy
- C. Creating universal trauma responses
- D. Adapting therapy to client values

11. What is the purpose of the Subjective Units of Distress Scale (SUDS) in PE therapy?

- A. To measure distress levels
- B. To diagnose PTSD
- C. To track physical health
- D. To identify trauma triggers

12. Which tool is commonly used to measure PTSD symptom severity?

- A. PCL-5
- B. DSM-5
- C. SUDS

13. Which population might face unique barriers to PE therapy due to historical trauma?

- A. Marginalized groups
- B. High-income individuals
- C. Young adults only
- D. Individuals without systemic trauma

14. What does the term 'exposure hierarchy' refer to in PE therapy?

- A. A list of feared stimuli
- B. A list of favorite places
- C. Avoidance planning
- D. Trauma processing guides

15. How is the therapeutic alliance important in PE therapy?

- A. Enhances engagement
- B. Promotes therapist-led actions
- C. Eliminates client autonomy
- D. Reduces client trust

16. Which statement reflects an adaptation of PE therapy for collectivist cultures?

- A. Emphasizing collective benefits
- B. Ignoring family values
- C. Promoting individual goals only
- D. Disregarding cultural norms

17. What is an ethical consideration in PE therapy?

- A. Informed consent
- B. Guaranteeing outcome
- C. Enforcing attendance
- D. Ignoring cultural context

18. How does PE therapy address avoidance behaviors?

- A. By encouraging it
- B. By systematically reducing it
- C. By replacing it with another behavior
- D. By eliminating emotions

19. What is the benefit of imaginal exposure in PE therapy?

- A. Reframes trauma beliefs
- B. Avoids distressing memories
- C. Encourages avoidance
- D. Promotes emotional numbing

20. How should long-term outcomes of PE therapy be evaluated?

- A. Through symptom severity and functional outcomes
- B. By relying on client self-diagnosis
- C. By ignoring progress
- D. Through therapist opinion

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