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

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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

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3. Which principle is PE therapy primarily based on?

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

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4. What is a core component of PE therapy?

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

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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

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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

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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

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8. What is a contraindication for starting PE therapy?

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

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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

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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

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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

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

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

D. Psychoeducation manual

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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

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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

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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

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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

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17. What is an ethical consideration in PE therapy?

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

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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

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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

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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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