

Counseling theories

[Psychology](#)



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1. Which of the following therapeutic approaches most places emphasis on an individual's competencies, avoiding defining a client by a problem, establishing a collaborative relationship where the client is the senior partner, and focusing on a client's strengths and resources?
 - a. cognitive behavior therapy
 - b. postmodern approaches
 - c. reality therapy
 - d. behavior therapy
 - e. psychoanalytic therapy

 2. In what theoretical orientation is the therapist's job to confront clients with the restricted life they have chosen and to help them become aware of their own part in creating this condition?
 - a. psychoanalytic therapy
 - b. Adlerian therapy
 - c. existential therapy
 - d. person-centered therapy
 - e. reality therapy

 3. Which of the following is not an aspect of Adlerian therapy:
 - a. People are primarily social beings.
 - b. Human nature is creative, active, and decisional.
 - c. Feelings of inferiority from childhood lead us to develop a style of life in which we become the master of our fate.
 - d. All people react out of the social unconscious.
 - e. Clients are not "sick" nor are they needing to be "cured".

 4. Which theory views people as being significantly influenced by unconscious motivation, conflicts between impulses and prohibitions,
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defense mechanisms, and early childhood experiences?

- a. psychoanalytic therapy
- b. Adlerian therapy
- c. existential therapy
- d. person-centered therapy
- e. reality therapy

5. Which theory operates on the premises that all relationship problems are in the present and must be solved in the present, and that once the significant relationship is improved, the troubling symptom will disappear?

- a. psychoanalytic therapy
- b. Adlerian therapy
- c. existential therapy
- d. person-centered therapy
- e. reality therapy

6. _____ assumes that people are basically shaped by learning and sociocultural conditioning.

- a. existential therapy
- b. behavior therapy
- c. Gestalt therapy
- d. person-centered therapy
- e. narrative therapy

7. The assumption that we have the capacity to understand our problems, we have the resources within us to resolve them and that clients can move toward growth and wholeness by looking within is central to:

- a. feminist therapy.
- b. person-centered therapy.

c. Gestalt therapy.

d. existential therapy.

e. Adlerian therapy.

8. Which theory states that the therapist's task is to support the client as they explore their present experience through an awareness of their internal (intrapersonal) world and the external environment?

a. feminist therapy

b. person-centered therapy

c. Gestalt therapy

d. existential therapy

e. reality therapy

9. Which theory assumes that people are prone to learning erroneous, self-defeating thoughts that perpetuate their difficulties and that these thoughts can be corrected to create a more fulfilling life?

a. reality therapy

b. behavioral therapy

c. Gestalt therapy

d. cognitive behavioral therapy

e. existential therapy

10. A basic assumption of _____ is that power inequalities and gender-role expectations influence individuals from a very early age.

a. reality therapy

b. feminist therapy

c. narrative therapy

d. solution-focused therapy

e. existential therapy

11. Which therapy encourages clients to talk about the exceptions to a problem they are experiencing?

- a. person-centered therapy
- b. family systems therapy
- c. solution-focused therapy
- d. psychoanalytic therapy
- e. Adlerian therapy

12. Which theory(ies) is (are) least likely to use assessment and diagnosis in the therapeutic process?

- a. person-centered therapy
- b narrative therapy
- c. behavior therapy
- d. psychoanalytic therapy
- e. both (a) and (b)

13. _____ consists of evaluating the relevant factors in a client's life to identify themes for further exploration in therapy, whereas _____ consists of identifying a specific category of psychological problem based on a pattern of symptoms.

- a. Diagnosis, assessment
- b. Life evaluation, assessment
- c. Assessment, life evaluation
- d. Assessment, diagnosis
- e. none of the above

14. Which examination focuses on areas such as appearance, behavior, feeling, perception, and thinking, and is used to screen for psychosis?

- a. mental-status examination

- b. the SAT
- c. the Myers Briggs Type Indicator
- d. the Rorschach
- e. the WISC

15. In working within a multicultural framework, what is especially important?

- a. making a diagnosis and formulating a treatment plan
- b. assisting the client in adapting to your theoretical orientation
- c. using techniques flexibly
- d. using appropriate referrals if the client is different than you

16. Although it is not bound by prescribed techniques, this theoretical perspective focuses on developing social interest, providing encouragement, and facilitating insight into client's mistaken ideas and their personal assets.

- a. feminist therapy
- b. behavioral therapy
- c. Gestalt therapy
- d. cognitive behavioral therapy
- e. Adlerian therapy

17. _____ have as main assumptions that people: are competent and healthy, have the capacity to find their own solutions to the difficulties they face; and that the client is the expert on his or her own life.

- a. Psychoanalytic approaches
- b. Behavior therapy
- c. Gestalt therapy
- d. Postmodern approaches
- e. Rational emotive behavior therapy

18. Which theoretical perspective is active, directive and didactic, assisting clients in making plans to change specific behaviors that they determine are not working for them?

- a. psychoanalytic therapy
- b. reality therapy
- c. existential therapy
- d. person-centered therapy
- e. Adlerian therapy

19. Which theoretical perspective is most likely to use techniques such as reframing and relabeling, bibliotherapy, advocacy, power intervention, social action, and gender-role analysis and intervention?

- a. cognitive behavioral therapy
- b. family systems therapy
- c. Gestalt therapy
- d. feminist therapy
- e. Adlerian therapy

20. Which theoretical perspective places primary emphasis on the client/therapist relationship and uses few techniques other than active listening, reflection, and clarification?

- a. psychoanalytic therapy
- b. reality therapy
- c. existential therapy
- d. person-centered therapy
- e. Adlerian therapy

21. What fundamental interest is a critical distinction between analytic therapy and other approaches?

- a. the individual client's thinking
- b. an interest in the client's childhood and family experiences
- c. the "whys" of an individual client's experience and behavior
- d. how the client's behavior is helping or preventing them from getting what they want

22. Assessment of an individual client's need for analytic therapy would include:

- a. development of behaviors that express an unconscious desire.
- b. determining whether he/she wants and needs to understand the unconscious roots of his/her neurosis.
- c. identifying an early childhood trauma that resulted in becoming fixated at an early developmental stage.
- d. the client's ability to recall his/her dreams so that they may be analyzed.

23. From a psychoanalytic perspective, if the focus of treatment is limited to individual symptoms, it is likely that:

- a. therapy will be successful.
- b. symptom substitution may occur.
- c. the analyst will feel less overwhelmed and will be more effective in his or her role.
- d. the client will be extremely grateful.
- e. an analysis of transference can be avoided.

24. Insight in analytic therapy typically requires the client to experience therapeutic regression and the "working through" of distortions in the context of the therapeutic relationship. These processes:

- a. require an immense amount of commitment from the client and are only for the strong willed.

- b. cannot be terminated prematurely without danger of psychological harm to the client.
- c. suggest the client has to be psychologically “reborn”.
- d. are well-understood by managed care institutions and are usually financially supported.
- e. are resigned to the unconscious and will happen no matter what the client or therapist does.

25. Treatment techniques of psychoanalytic psychotherapy include all except:

- a. dreams, jokes, slips and symptoms.
- b. interpretations of resistance and content.
- c. transference and countertransference.
- d. paradoxical intention.
- e. the therapeutic contract.

26. Which of the following statements about the psychodynamic approaches is not true?

- a. Practitioners can learn to think psychoanalytically even if they do not practice psychoanalytically.
- b. The goal of brief psychodynamic therapy is to cure clients.
- c. Brief dynamic therapy focuses more on the here and now of the client's life than on the there and then of childhood experiences.
- d. Contemporary psychoanalytic practice emphasizes the origins and transformations of the self.
- e. Psychodynamic therapy is aimed at promoting integration and ego development.

27. Repeating interpretations of a client's behavior and overcoming his/her

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resistance, allowing the client to resolve his/her neurotic patterns is called:

- a. redundant interpretation.
- b. wearing down.
- c. working through.
- d. transference absorption.
- e. projective identification.

28. Adlerians tend to see counseling as a four-stage process. Which of the following is not one of the four stages?

- a. forming a relationship
- b. conducting a psychological investigation
- c. exploring the client's multigenerational family characteristics
- d. psychological disclosure
- e. reorientation and reeducation

29. Adlerians believe that first comes _____, then _____, and then _____.

- a. feeling, behaving, thinking
- b. thinking, behaving, feeling
- c. thinking, feeling, behaving
- d. behaving, thinking, feeling

30. In doing a lifestyle assessment, the therapist is likely to gather information about life except for:

- a. her transference toward the therapist.
- b. family influences.
- c. early memories
- d. birth order
- e. early childhood experience

31. The primary goal of existential therapy is:

- a. to make known the unconscious.
- b. to deal with unfinished business.
- c. for clients to lead more authentic lives.
- d. to establish well-defined goals and the means to achieve them.
- e. to understand the client's position in his or her family of origin.

32. The first step in existential therapy is:

- a. to conduct a thorough life history.
- b. to establish a therapeutic alliance whereby the therapist can understand the client's world.
- c. to ask the client to identify wants, needs, and perceptions.
- d. to examine past traumas from childhood.
- e. to assess for cognitive distortions.

33. Existential therapists:

- a. may choose techniques from what is taking place in the ongoing therapeutic process and their relationship with clients.
- b. tend to rely on a well-developed set of techniques.
- c. do not borrow techniques from other therapies.
- d. almost always dispute irrational beliefs that lead to human suffering.
- e. focus on the collective unconscious.

34. All of the following concepts are a part of existential therapy except for

- a. reconstruction of the self
- b. being in the world
- c. total behavior
- d. existential anxiety
- e. finding new values

35. In person-centered therapy assessment occurs:

- a. during the first session.
- b. as an ongoing process throughout therapy.
- c. only after a solid therapeutic relationship has been built.
- d. only at the initial and termination phases of therapy.
- e. none of the above

36. Person-centered therapists are:

- a. less invested in effecting client movement directly than in enabling their clients to make changes that they have chosen freely based on their desire to live in a more effective and satisfying manner.
- b. no longer convinced that the therapeutic relationship is of paramount importance in their work with clients.
- c. likely to adopt techniques from the cognitive behavioral approaches when working with deeply troubled individuals.
- d. in high demand at agencies that value brief therapy.
- e. all of the above.

37. As basic assumption in counseling from a person-centered perspective is that counseling:

- a. should be directed at solving problems.
- b. is best aimed at teaching coping skills.
- c. works best when the therapist makes appropriate and timely interpretations.
- d. proceeds best if clients are provided with structure and direction.
- e. is aimed at helping clients tap their inner resources so she can better deal with her problems.

38. Gestalt therapy is practiced with a theoretical foundation grounded in:

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- a. field theory.
- b. phenomenology.
- c. dialogue.
- d. all of the above.
- e. none of the above.

39. The main goal of Gestalt therapy is:

- a. teaching clients how to replace dysfunctional thinking with constructive thinking.
- b. the restoration of awareness.
- c. teaching clients how to make specific behavioral action plans.
- d. the elimination of disabling symptoms.
- e. both (c) and (d).

40. In Gestalt therapy, assessment is best conceived of as:

- a. something that is completed at the intake session.
- b. a behavioral description of what the client is doing.
- c. an ongoing process embedded in the dialogue between client and therapist.
- d. something that gets in the way of understanding the client's subjective world.
- e. a process that results in a traditional diagnosis that can be used for insurance purposes.

41. A Gestalt therapist would be interested in..

- a. awareness of her moment-to-moment experiencing.
- b. contact with her therapist.
- c. ability to attribute meaning to what she is thinking, doing, and feeling.
- d. reactions to what is happening during the therapeutic hour.

e. all of the above.

42. In Gestalt therapy there is an emphasis on drawing heavily on:

- a. cognitive techniques aimed at eliminating critical judgments of self.
- b. understanding and exploring ego states.
- c. behavioral strategies that are aimed at acquiring new interpersonal skills.
- d. experiential techniques aimed at intensifying here-and-now experiencing.
- e. both (a) and (b).

43. In Gestalt therapy, techniques are best considered as:

- a. experiments.
- b. strategies created by the therapist.
- c. planned exercises to elicit feelings.
- d. interventions designed to remove symptoms.
- e. ways to get the client past layers of resistance.

44. Which of the following would a Gestalt therapist be least likely to bring into a counseling session?

- a. exploring polarities within.
- b. encouraging to create a dialogue in therapy as a way to work through unfinished business.
- c. asking to "become a conflict" rather than talk about the conflict.
- d. asking to pay attention to what she is experiencing in her body.
- e. asking to engage in free-association.

45. Behavior therapists follow the progress of their clients through the collection of data:

- a. before interventions.
- b. during interventions.
- c. after interventions.

d. all of the above.

e. both (a) and (c) only.

46. Assessment and diagnosis are done at the outset to determine a treatment plan. Which type of questions are not used?

a. what

b. how

c. when

d. why

e. all types of questions are encouraged

47. Which of the following strategies reflects an evolution in behavior therapy?

a. mindfulness/acceptance interventions

b. classical conditioning

c. reinforcement strategies based on operant learning

d. systematic desensitization

e. the empty chair technique

48. Which of the following is true with regard to the fundamental characteristics of behavior therapy?

a. Behavior can be characterized as overt actions and internal processes.

b. Behavior is something that can be operationally defined.

c. Behavior is learned, at least for the most part.

d. The behavioral approach is characterized by results and data.

e. All of the above.

49. What is an ABC Analysis according to behavior therapists?

a. It is an analysis of the television network, ABC.

b. It is a procedure in which the therapist strives to select an identified issue

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and determine empirically what environmental conditions are related to the issue, what conditions are preventing its resolution, and what strengths and resources are available for its resolution.

- c. It is the initial phase of the WDEP system of therapy.
- d. It is an assessment of fundamental skills, which indicates whether or not a client has the cognitive abilities to engage in reinforcement-based activities.
- e. It is the assessment protocol used before, during, and after behavioral treatments.

50. Behavior therapists view a good therapeutic relationship as:

- a. necessary, but not sufficient, to effect therapeutic change in most instances.
- b. irrelevant to treatment.
- c. nice, but optional.
- d. a distraction that gets the focus off of the client's problematic behavior.
- e. necessary and sufficient to effect therapeutic change.

51. As one prepares to terminate from behavior therapy, what is least likely to happen?

- a. The therapist might evaluate the client's self-efficacy.
- b. The therapist might talk with the client about relapse prevention.
- c. The therapist might engage the client in free association to determine whether the clients inner conflicts have been resolved.
- d. The therapist might inform the client that he or she will check in with him or her in a few months to see how things are going.
- e. both (a) and (b).

52. Albert Ellis views problems primarily from the vantage point of:

- a. injunctions she accepted and early decisions she made.

b. her clinging to dogmatic, rigid "musts" and commands that she continues to live by.

c. the impact of early childhood experiences.

d. negative conditioning from her parents.

e. societal standards of what is acceptable for a woman.

53. Rational Emotive Behavior Therapy (REBT) includes which therapeutic technique(s) ?

a. cognitive techniques

b. emotive techniques

c. behavioral techniques

d. all of the above

e. none of the above

54. Cognitive therapy (CT), developed by _____, perceives psychological problems as stemming from:

a. Donald Meichenbaum; emotional stress.

b. Aaron Beck; faulty thinking, making incorrect inferences on the basis of inadequate or incorrect information, and failing to distinguish between fantasy and reality.

c. Albert Bandura; poor social learning experiences.

d. Judith Beck; weight issues.

e. Heinz Kohut; deficits in the self.

55. Which of the following would Albert Ellis be least likely to incorporate in his counseling sessions?

a. encouraging her to relive her early childhood traumatic experiences

b. using in vivo desensitization

c. exploring her irrational thinking

- d. teaching her how to debate self-defeating thinking patterns
- e. teaching her new and more functional beliefs

56. In using REBT techniques, the therapists main aim is to:

- a. ameliorate her presenting symptoms, such as panic or guilt.
- b. help her make a profound philosophical change.
- c. help her to feel better.
- d. uncover unconscious dynamics that are causing present problems.
- e. experience her feelings as intensely as possible.

57. The founder of reality therapy is:

- a. Robert Wubbolding.
- b. Albert Ellis.
- c. David Cain.
- d. William Glasser.
- e. William Blau.

58. From a reality therapy framework, psychological symptoms are viewed as:

- a. the problem to address in therapy.
- b. merely the underlying dynamic of a particular problem.
- c. a chosen behavior.
- d. unconscious patterns.
- e. feelings that need to be expressed.

59. A reality therapist would be most interested in learning how:

- a. meeting her basic needs.
- b. expressing her social interest.
- c. gaining insight into the causes of her behavior.
- d. able to experience catharsis.

e. all of the above.

60. A reality therapist would:

- a. explore what client wants.
- b. help client evaluate what she is doing.
- c. help client formulate an action plan.
- d. all of the above.
- e. none of the above.

61. Reality therapy is:

- a. active.
- b. directive.
- c. practical.
- d. based on choice theory.
- e. all of the above.

62. A basic premise of reality therapy is that:

- a. behavior controls our perceptions.
- b. behavior is a manifestation of unconscious dynamics.
- c. behavior will not change until the client acquires insight.
- d. behavior will become healthy after the client experiences catharsis.
- e. both (c) and (d).

63. All of the following are elements in the process of reality therapy except:

- a. establishing a therapeutic relationship.
- b. encouraging her to re-author a problem-saturated story.
- c. challenging Ruth to evaluate her behavior.
- d. assisting Ruth in developing a realistic plan for change.
- e. getting Ruth to make a commitment to carry out her plan.

64. Feminism holds that gender inequity exists and that this is a source of

oppression. This inequality is based on:

- a. the natural differences between women and men.
- b. cultural factors.
- c. an imbalance of power in favor of men.
- d. the manner in which men are socialized.
- e. a matriarchal society.

65. Feminist therapy:

- a. was the first approach to take into consideration the social and political milieu in which people live as a cause of distress.
- b. challenged the assumption that distress was due to individual pathology.
- c. is based on the premise that lasting psychological change must address contextual issues as well as individual issues.
- d. is based on the principle of the “ personal as political.”
- e. all of the above

66. Which of the following is not a technique generally used by feminist therapists?

- a. gender-role analysis
- b. gathering early recollections
- c. bibliotherapy
- d. taking social and political action
- e. reframing a client’s concerns

67. Which of the following is considered to be a basic tenet of feminist therapy?

- a. Gender-role socialization is healthy for women and men.
- b. Therapy needs to be based on a diagnostic framework.
- c. The main goal of therapy is to teach clients how to dispute faulty thinking.

d. The personal is political.

e. Patriarchy is good for human relationships.

68. Regarding the use of traditional diagnosis from a feminist perspective, which of the following statements is false?

a. Without an accurate formal diagnosis, there is no basis for effective therapy.

b. The DSM-IV-TR reflects the dominant culture's definition of pathology and health.

c. Sexism, racism, and classism are embodied in traditional diagnosis.

d. Diagnostic labels generally locate the source of a client's problems in the person, rather than in the environment.

e. Many feminist therapists avoid using traditional diagnostic practices.

69. When the feminist therapist intervenes to increase insight about how societal gender-role expectations adversely affect women, the therapist is using:

a. reframing.

b. cognitive restructuring.

c. gender-role and power analysis.

d. social action strategies.

e. exploration of injunctions and early decisions.

70. Operating from a social constructionist's perspective, the therapist would likely take what stand on making a diagnosis ?

a. It is essential to develop a treatment plan.

b. It is useful to set the climate for therapy.

c. The therapist would collaborate with Ruth on assigning an appropriate diagnosis.

- d. The therapist would develop a working diagnosis which would be firmed up by the third session.
- e. Both (a) and (b)

71. At the first session, the social constructionist therapist would primarily be interested in:

- a. establishing a DSM-IV-TR diagnosis.
- b. explaining the theoretical orientation and techniques to be used.
- c. what Ruth wants for her future.
- d. background pertaining to the development of the problem.
- e. giving a battery of psychological tests.

72. The social constructionist therapist:

- a. sees herself in a non-expert position in relation to what is the correct path.
- b. views her expertise in the area of language and meaning.
- c. proposes that reality is created in language between people.
- d. all of the above
- e. none of the above

73. The solution-focused therapist:

- a. asks questions about the “ news of difference.”
- b. attempts to get Ruth to shift from problem-talk to solution-talk.
- c. avoids giving Ruth compliments, since doing so can make her dependent on the therapist.
- d. makes a tentative diagnosis for treatment purposes before the end of the initial session.
- e. both (a) and (b)

74. A narrative therapist's would be based on the assumption that:

- a. change will occur more effectively if the therapist adopts a nondirective stance.
- b. mental health is best defined in terms of dominant cultural values.
- c. Ruth needs to become the senior partner in the collaborative relationship with the therapist.
- d. using techniques tends to undermine the client's self-direction.
- e. both (a) and (b)

75. Narrative therapists believe that " The person is not the problem, but the problem is the problem." This phrase illustrates which of the following interventions?

- a. mapping the effects
- b. deconstruction of a problem-saturated story
- c. co-authoring alternative stories
- d. externalizing conversation
- e. building an audience as a witness to an emerging preferred story

76. The narrative therapist will likely listen respectfully to client's story, examine with her the problem influences in a systematic way, and will assist in moving away from the harmful effects of the problem. This intervention is best known as:

- a. making use of scaling questions.
- b. mapping the effects of the problem story.
- c. documenting the evidence.
- d. conducting a functional assessment.
- e. formulating a tentative diagnosis.

77. A narrative therapist would maintain that problems can best be understood:

- a. by examining how she originally acquired a problem in the first place.
- b. analyzing the role of her parents in contributing to her present dysfunctions.
- c. through understanding the socio-cultural and relational contexts.
- d. by focusing on her cognitive distortions.
- e. exploring her feelings toward the therapist.

78. A female client appears to be unable to define herself separately from her husband and her children. Her struggle with identity leads the family therapist to examine her process of _____ as a central issue.

- a. boundary disturbance
- b. differentiation
- c. transference reactions
- d. maintaining homeostasis
- e. idealization

79. Husband and Wife are often not able to discuss emotionally charged issues in their relationship. At different times, most of their discussions focus on one of their children. This illustrates:

- a. a triangular process.
- b. a struggle to achieve autonomy.
- c. a process of separation and individuation.
- d. a healthy way of dealing with problems.
- e. a process of working through transference.

80. A _____ is an organized map, or diagram, that demonstrates one's family over three generations.

- a. life style assessment
- b. behavioral assessment
- c. schema
- d. technique known as " The Miracle Question"
- e. genogram

81. Regarding cultural diversity, which statement(s) is(are) true?

- a. Becoming immersed in the study of cultural diversity can have certain problems.
- b. Accepting stereotypes and applying general characteristics of a particular group to every individual within that group is problematic.
- c. The differences among individuals within a given ethnic group can be as great as the differences between populations.
- d. Knowledge of the client's cultural values is only the beginning.
- e. All of the above are true.

82. If a client were of from different cultural background than her therapist, which assumption is correct?

- a. For therapy to be effective, the therapist would need to share the client's culture.
- b. It can be assumed that religion is important to Ruth.
- c. It can be assumed that Ruth will be resistant to therapy?
- d. Ruth will interpret any questions about her family life as intrusive.
- e. none of the above

83. A central tenet of multicultural counseling holds that cultural competence is reflected in the therapist's:

- a. awareness of his or her own cultural values and biases.
- b. awareness of how his or her culture might impact working with the client.

- c. knowledge of the client's cultural values and beliefs.
- d. skills in making appropriate interventions.
- e. all of the above

84. Which approach would be guided by the principles of choice theory?

- a. family systems approach
- b. cognitive-behavior therapy
- c. person-centered therapy
- d. reality therapy
- e. Adlerian therapy

85. Which approach would focus on lifestyle, examine early recollections, and be interested in family constellation?

- a. psychoanalytic therapy
- b. narrative therapy
- c. solution-focused brief therapy
- d. reality therapy
- e. Adlerian therapy

86. Which approach would provide the most techniques in helping manage stress, become more assertive, and learn to relax?

- a. psychoanalytic therapy
- b. behavior therapy
- c. existential therapy
- d. Adlerian therapy
- e. person-centered therapy

87. Which approach would focus on co-creating a preferred new story to replace problem-saturated story?

- a. narrative therapy

- b. cognitive behavior therapy
- c. Gestalt therapy
- d. Adlerian therapy
- e. family systems therapy

88. Which approach would most likely be most appropriate in challenging client to find meaning in her life?

- a. psychoanalytic therapy
- b. behavior therapy
- c. existential therapy
- d. cognitive-behavior therapy
- e. solution-focused brief therapy

89. Which approach would focus on the degree to which a client has become differentiated from her significant others?

- a. psychoanalytic therapy
- b. behavior therapy
- c. Adlerian therapy
- d. cognitive-behavior therapy
- e. family systems therapy

90. Which approach would most pay attention to signs of unfinished business in life, as evidenced by ways in which the client reaches impasses in therapy?

- a. Gestalt therapy
- b. behavior therapy
- c. cognitive-behavior therapy
- d. solution-focused brief therapy
- e. narrative therapy