The Book of Ethics: 
Expert Guidance for Professionals Who Treat Addiction

Questions from chapter 1

1) The 2007 National Survey on Drug use and Health found that _____ of the U.S. population met the criteria for either substance abuse or dependence.
   a) 9.2%
   b) 14.2%
   c) 19.2%
   d) 24.2%

2) The ethical duty to “do no harm” is
   a) beneficence
   b) truth telling
   c) compassion
   d) nonmaleficence

3) The first, and most powerful aspect of addiction is
   a) stigma
   b) tolerance
   c) deception
   d) financial

4) Which is NOT a general exception to confidentiality regulations?
   a) the patient has an infectious disease
   b) the patient is developmentally disabled
   c) the patient reports child abuse
   d) there is a medical emergency

Questions from chapter 2

5) Which is an empirically supported treatment for alcohol and drug use which is based on accurate clinician empathy and reflective listening?
   a) rational emotive therapy
   b) Rogerian CD Method
   c) intentional mirroring
   d) motivational interviewing

6) “Self-disclosure on the part of the clinician in a therapy session” is an example of a
   a) boundary violation
   b) boundary crossing
   c) boundary overlap
   d) boundary distortion

7) Tarasoff v. Board of Regents of the University of California mandates that clinicians
   a) protect individuals from the threat of serious violence by their patients
   b) not engage in dual relationships which can harm patients
   c) are responsible for the impact of HIPAA violations
   d) shall not be denied prescriptive authority with sufficient training
8) Volkow (2003) reported that between 30 and 60 percent of drug abusers have a
   a) legal history
   b) co-occurring mental illness
   c) past due mortgage
   d) chronic physical illness

**Questions from chapter 3**

9) Arguably the first harm reduction controversies in modern substance abuse treatment is
   a) the use of methadone therapy
   b) the use of opioids to treat addicts with chronic pain
   c) involuntary commitment for inpatient CD treatment
   d) a goal of moderation rather than abstinence from alcohol

10) Which of the following ethical questions about a specific harm reduction practice is a moral
    consideration?
    a) Is the practice inherently unacceptable regardless of its consequences?
    b) Is the practice possible or feasible?
    c) How likely is the practice itself to cause harm that would not otherwise occur?
    d) How likely is the practice to actually prevent or reduce harm or yield other benefits?

11) “A Mormon or Muslim provider being unwilling to help a patient pursue moderate drinking” is an
    example of which type of consideration?
    a) feasibility
    b) potential for harm
    c) potential for benefit
    d) acceptability

**Questions from chapter 4**

    are a/an
    a) side effect
    b) anomaly
    c) expectation
    d) tragedy

13) What is described as “a fundamental method of conveying respect and ensuring beneficence at
    the initial contact”?
    a) welcoming
    b) intake paperwork
    c) direct eye contact
    d) a private waiting room

14) Which strategy for co-occurring disorders is mentioned by Geppert & Minkoff (2003)?
    a) medication education and management
    b) integrated screening and assessment processes
    c) strategies for contingency management
    d) strategies to manage trauma-related issues
15) Which resource is written for substance abuse treatment providers?
   a) TIP 42  
   b) SIP 16  
   c) HAL 9000  
   d) PARC 3333

16) Which was developed originally as a special program for adults who have severe mental illness and varying degrees of substance abuse?
   a) SOCRATES 8A  
   b) IDDT toolkit  
   c) SASSI  
   d) MAC-R

Questions from chapter 5

17) Regarding ethics and culture, Fowers and Davidov (2006) invite practitioners to adopt the view of _____ ethics.
   a) multicultural  
   b) virtue  
   c) rainbow  
   d) value

18) According to Derald Wing Sue, multicultural competence incorporates all of the following except
   a) awareness  
   b) knowledge  
   c) experience  
   d) skills

19) Hansen et al. (2000) suggests that the good will of a practitioner is enough to create a multiculturally competent practice.
   a) True  
   b) False

20) Which ethical principle requires that culturally appropriate treatment options be available to all those in need of addiction treatment?
   a) respect for persons  
   b) therapeutic alliance  
   c) nonmaleficence  
   d) justice

21) Which is recommended regarding spirituality and addiction treatment?
   a) ask the patient about his or her spiritual beliefs  
   b) avoid expressing bias for or against spirituality/religion  
   c) address countertherapeutic beliefs with factual information and respect  
   d) all the above

Questions from chapter 6

22) The Americans with Disabilities Act of 1990 treats alcoholism differently from dependence on illegal drugs.
   a) True  
   b) False
23) Private sector employers frequently follow federal guidelines for testing looking for the presence of active drugs or metabolites in all the following groups EXCEPT
   a) alcohol
   b) marijuana
   c) morphine
   d) amphetamines

24) Regarding the insanity defense in addicted patients, most states and the U.S. Government use some variation of the ______ which is purely a cognitive test for insanity.
   a) House, Tree, Jello test
   b) Minnesota Insanity Survey
   c) M'Naughen Test
   d) Frenetic Family Drawing Test

**Questions from chapter 7**

25) Which type of sexism described by Glick (2001) views women as “pure creatures who ought to be protected, supported, and adored and whose love is necessary to make a man complete”?  
   a) beatific
   b) maternal
   c) paternalistic
   d) benevolent

26) The most negative stereotype of substance abusers are for
   a) males who abuse alcohol
   b) females who abuse alcohol
   c) males who abuse illicit drugs
   d) females who abuse illicit drugs

27) About _____ of American women meet the criteria for alcohol abuse or dependence.
   a) 2%
   b) 5%
   c) 9%
   d) 14%

28) According to Roberts and Dunn (2003) ______ reflects the level at which a patient has the ability to act with autonomy in decisions of care.
   a) voluntarism
   b) beneficence
   c) confidentiality
   d) informed consent

**Questions from chapter 8**

29) What term is used to describe a youth who possesses the requisite cognitive and emotional abilities to provide informed consent?
   a) mature minor
   b) emancipated youth
   c) precocious teen
   d) parentified child
30) Measures to protect against unintended disclosures in family therapy include all the following EXCEPT
   a) maintaining separate records for each family member
   b) documenting data only about the identified patient
   c) deleting sensitive material from the record before discharging it to a third party
   d) avoiding HMO's and EAP's which require records to be disclosed

31) Which is not one of the three conditions which must be present to waive parental permission requirements and allow minors to consent to be in research?
   a) the research involves no more than minimal risk
   b) the minor is capable of independently making this judgment
   c) the waiver of parental permission will not adversely affect the welfare of the research participant
   d) the research project could not be practically carried out without the waiver of parental permission

Questions from chapter 9

32) Which is the leading cause of disability claims in the United States?
   a) alcoholism
   b) anxiety
   c) back pain
   d) arthritis

33) The signs and symptoms of addiction can closely resemble the behaviors seen in the patient who remains in severe pain and is undertreated, which is known as
   a) phantom pain
   b) pseudoaddiction
   c) secondary addiction
   d) break through addiction

34) “Focusing on function rather than relief of pain” is an example of which ethical principle?
   a) autonomy
   b) beneficence
   c) nonmaleficence
   d) justice