

- Here is some information about your test/exam :
- Webinar Name : Treatment of Stimulant Use Disorder .
- Percentage of questions you need to answer correctly to pass: 75%.
- You can take this test as many times as you wish.

1. Methamphetamine misuse is highest among those age

- A: 18-30
- B: 13-35
- C: 26-49
- D: 21-45

2. Stimulant abuse can cause adverse physical and psychological effects including

- A: All of the above
- B: Paranoia and Hostility
- C: Neurological toxicity
- D: Life threatening sepsis

3. Stimulant-related deaths in 2018 accounted for roughly \_\_\_\_\_ percent of all overdose deaths in the United States?

- A: 0.5
- B: 0.8
- C: 0.2
- D: 0.4

4. Developers of motivational interviewing define it as \_\_\_\_\_

- A: "...main goals are to teach people how to live in the moment, develop healthy ways to cope with stress, regulate their emotions, and improve their relationships with others"
- B: "a form of psychological treatment that has been demonstrated to be effective for a range of problems...and promotes self awareness and emotional intelligence"
- C: "a directive, client-centered counselling style for eliciting behavior change by helping clients explore and resolve ambivalence"
- D: "Techniques to increase psychological flexibility, or the ability to enter the present moment more fully and either change or persist in behavior when doing so serves valued ends."

5. Evidence demonstrates that use of Motivational Interviewing for people with stimulant use disorders was associated with reductions in:

- A: Number of days of stimulant use and increase in amount used per day
- B: Less lethal routes of delivery of stimulant and amount used per day
- C: Type of stimulant used and amount used per day
- D: Number of days of stimulant use and amount of stimulant used per day

6. Contingency management (CM) is a type of behavioral therapy grounded in the principles of

- A: Cognitive behavioral therapy
- B: Dialectical Behavioral Therapy
- C: Operant conditioning
- D: Information processing theory

7. Two widely used approaches in CM include:

- A: Negative consequences and punishment
- B: Fishbowl method and Voucher-based reinforcement
- C: Aversive conditioning and replacement behaviors
- D: Intermittent reinforcement schedules and restriction

8. Community reinforcement approach (CRA) was originally developed by Nathan Azrin and his colleagues for the treatment of

- A: Gambling Abuse
- B: Alcohol Abuse
- C: Hallucinogen Abuse
- D: Stimulant abuse

9. Which of the settings is not typically used in the implementation of CRA?

- A: Home visits
- B: In-patient treatment programs
- C: AA/NA support group
- D: Typical outpatient treatment programs

10. CRA includes multiple elements such as:

- A: Both A and B
- B: Spiritual belief systems
- C: Relationship counseling
- D: Analyzing clients' substance use

11. CRA recommends a \_\_\_\_\_ treatment program.

- A: 6 months
- B: 90 day
- C: 30 day
- D: 24 week

12. Professionals who possess \_\_\_\_\_ can implement this approach

- A: Caring attitude
- B: A successful clinical practice
- C: Supportiveness empathy
- D: Strong, fundamental counseling skills

13. This therapy model helps clients develop accurate assessments of circumstances and their feelings so they can develop realistic strategies

- A: None of the above
- B: Behavioral Therapy
- C: Cognitive Behavioral Therapy
- D: CM

14. Studies included in this review demonstrated that CBT or computer-based CBT for people with stimulant use disorders were associated with reductions in:

- A: All of the above
- B: More dangerous Routes of administration
- C: Quantity of stimulants consumed
- D: Amount of daily activity and selfcare

15. One of the challenges practitioners face is making a distinction between

- A: The duration of substance use
- B: Independent psychiatric disorders and psychiatric disorders as a result of the stimulant use.
- C: What type of stimulant has been used
- D: The amount of substance use

16. Individuals who intentionally or unknowingly mix stimulants with \_\_\_\_\_ have an increased risk for overdose.

- A: Marijuana
- B: Nicotine
- C: Fentanyl
- D: Ecstasy

17. Stimulant-induced psychosis is generally transient; however, methamphetamine can produce

- A: Catatonia
- B: Persistent Psychosis like Schizophrenia
- C: Autism
- D: Bi-Polar Disorder

18. Common challenges to implement treatment practices for stimulant use disorders include all of the following except:

- A: Program staff
- B: Funding
- C: Coordination of care
- D: Lack of stimulant users

19. One challenge with Coordination of care for treatment of stimulus use disorders

- A: They may have other healthcare needs
- B: Getting in touch with other care providers
- C: None of the above
- D: The lack of efficacy of the treatments

20. The CM program was initially introduced as a 12-week pilot to address the needs of

- A: Polydrug users who are currently using opiates and alcohol who were struggling with methamphetamine.
- B: Polydrug users and who are currently using opiates and struggling with methamphetamine.
- C: Polydrug users and former Alcohol users who are struggling with methamphetamine.
- D: Polydrug users and former opiate users who were struggling with methamphetamine.

21. Which program is often credited for taking the abstract concepts of spirituality and conscience and applying them in the Seven Direction Model?

- A: The Polydrug users model
- B: The Lakota Model
- C: The Conditional, alternative model
- D: The case management model

22. This program is designed to address the needs of what population who misuse methamphetamines.

- A: Gay and bisexual females
- B: Gay and bisexual men who have sex with other men
- C: Polydrug users
- D: The homeless population

23. How were the outcomes for reduction in co-occurring mental health issues in individuals with substance use disorders measured?

- A: Primary care doctors' reports
- B: Hospitals and medical facilities' administrative data
- C: Survey's
- D: Self report

24. The findings and outcomes of the Homeless Persons Health Project using the CM program showed \_\_\_\_\_

- A: Less frequent use documented through client self-report.
- B: An increase in negative urine drug screens, from 41.6 percent at baseline to 72 percent at week 48.
- C: Increased client attendance.
- D: All of the above