

OT Mastery

Behavior Management Across the Lifespan

1. What is OT's role in behavior management?

- A. Teaching patients coping skills and healthier alternatives to maladaptive behaviors
- B. Managing patient behaviors so they can better engage in functional activities
- C. None of the above
- D. Both A & B

2. What is the difference between mental health and behavioral health?

- A. Behavioral health is an umbrella term that covers any treatment related to behavior; mental health pertains to someone's emotions and cognitive functions
- B. They are the same and can be used interchangeably
- C. Mental health is an umbrella term that covers any treatment related to behavior; behavioral health pertains to someone's emotions and cognitive functions
- D. All of the above

3. What is not a theory used as the basis of behavior management?

- A. Operant Conditioning Theory
- B. Equity Theory of Motivation
- C. Motor Learning Theory
- D. Social Learning Theory

4. What behavioral theory suggests that each person has an innate need for affiliation, achievement, and power?

- A. Social Learning Theory
- B. The Acquired Needs Theory
- C. Maslow's Hierarchy of Needs
- D. Equity Theory of Motivation

5. What is not a step within Social Learning Theory?

- A. Lacking motivation to replicate someone else's actions
- B. Consistently attending to someone else's actions
- C. Observing what others do
- D. Retaining information about the other person's actions

6. What is the difference between punishment and reinforcement?

- A. Reinforcement involves adding something to a child's environment while punishment involves removing stimulus from a child's environment
- B. Punishment is aimed at increasing the occurrence of positive behaviors while reinforcement is intended to lessen the occurrence of problematic behaviors
- C. Punishment is intended to lessen the occurrence of problematic behaviors while reinforcement is aimed at increasing the occurrence of positive behaviors
- D. Reinforcement is given internally and punishment comes from an external source

7. How might a balanced token economy be used?

- A. With patients who attend group therapy in a psychiatric unit
- B. Children who attend a therapeutic day school and work toward certain prizes
- C. Employees in a typical workplace
- D. Both A & B

8. What is an example of cognitive dissonance?

- A. A child who asks their mom repeatedly for a snack even though there is no food allowed an hour before bed
- B. Someone who actively smokes cigarettes despite telling their children not to smoke because it's unhealthy
- C. A teenager who asks to go out with friends despite being grounded
- D. A therapist asking her patient to stop engaging in unhealthy behaviors

9. How might an OT encourage their patient to generalize the skill of having appropriate conversation with someone in a clinic?

- A. Having a conversation with the front desk at the clinic
- B. Role playing a conversation with a cashier at the store
- C. Practice having a conversation with someone in line at the grocery store
- D. All of the above

10. What is not considered a type of behavior therapy?

- A. CBT
- B. PMR
- C. CBPT
- D. DBT

11. What's the difference between CBT and CBPT?

- A. CBT is intended for people with anxiety and depression; CBPT is intended for those experiencing psychosis
- B. CBT was designed for those with eating disorders; CBPT is for those with chronic pain
- C. CBT is cognitive behavioral therapy that focuses on talk therapy to identify and adjust negative thought patterns, emotions, and behaviors; CBPT is cognitive behavioral play therapy that uses a more interactive approach to get kids to talk about their feelings
- D. CBT is a type of psychoeducation that involves education on coping strategies; CBPT is cognitive based practice therapy that involves putting the coping strategies into practice

12. How does ACT assist with behavior modification?

- A. ACT encourages healthy behaviors by teaching someone to accept things that are out of their control and commit to changing things in their control
- B. ACT teaches patients to act more appropriately in front of others, but to be themselves in the privacy of their own homes
- C. ACT is assistive community integration that helps someone with difficult behaviors integrate into the community more effectively
- D. ACT is assertive communication training that helps individuals with difficult behaviors interact with others more successfully

13. How might an SLP assist with behavior management?

- A. Speech-language pathologists run groups focused on psychotherapy related to topics such as anger management and behavior change
- B. Speech-language pathologists can teach someone better communication skills to improve their self-expression and ability to meet their needs
- C. Speech-language pathologists prescribe medications to encourage better emotion regulation and, in turn, improved behavior management
- D. Speech-language pathologists work to improve a patient's daily living skills as they pertain to behavior management

14. If an OT is using active listening to engage with a patient, what would they not do?

- A. Focus fully on the patient while they are talking
- B. Use nonjudgmental language
- C. Paraphrase their words to validate them
- D. Ask the patient to write down how they are feeling

15. Which of the following is not considered a first-line aggression control technique?

- A. Competing response training
- B. Humor
- C. CBT
- D. Communicating with "I" statements

16. If an OT is working with a patient who has a phobia of crowds, which technique might come first?

- A. Systematic desensitization
- B. Aversion therapy
- C. Covert sensitization
- D. Biofeedback

17. If a therapist instructs a patient about an activity, offers a tactile cue, notes the patient's response, gives an appropriate consequence or response, and takes a slight break before moving on to another trial, what behavioral strategy is this considered?

- A. Spaced retrieval
- B. Positive programming
- C. Role playing
- D. Discrete trial training

18. Which of the following patients might benefit from the Premack Principle?

- A. A middle-aged man recovering from substance use disorder
- B. An elderly woman with dementia who wanders
- C. A child with ASD who struggles without structure
- D. A teenager who does not understand the concept of role playing and needs an alternative strategy

19. What might warrant a therapist creating a behavioral contract?

- A. The patient wanting to change their own behaviors but not knowing how to go about it
- B. A patient in a mental health unit refuses to shower or go to group therapy
- C. A teenager wants to give the therapist a gift at the holidays and doesn't understand that the therapist doesn't celebrate
- D. A child comes to therapy but expects a prize at the end of each session

20. What diagnoses might parent management training (PMT) be effective for?

- A. Autism Spectrum Disorder
- B. Conduct disorder
- C. Oppositional defiant disorder
- D. Both B & C

21. What treatments assist with behavioral changes related to eating disorders?

- A. DBT
- B. CBT

- C. Supervised weight gain program
- D. All of the above

22. Cognitive behavioral therapy is least likely to be effective on a individual with what diagnosis?

- A. Obsessive-Compulsive Disorder
- B. Antisocial personality disorder
- C. Anorexia nervosa
- D. Bulimia nervosa

23. What is not considered a category of addiction?

- A. Substance addiction
- B. Behavioral addiction
- C. Medication addiction
- D. Impulse addiction

24. Sensory strategies can be effective for what types of behaviors?

- A. Head banging
- B. Skin picking or excoriation
- C. Stimming
- D. All of the above

25. What might be a treatment modification for someone who has akathisia?

- A. Allowing plenty of space for movement
- B. Focusing on improving sitting tolerance
- C. Both A & D
- D. Breaking up fine motor tasks with gross motor tasks

26. How can a therapist decrease difficult behaviors in individuals with dementia?

- A. Offer exposure to sunlight throughout the day
- B. Keep routines intact as much as possible
- C. Minimize how many activities are done in one day
- D. All of the above

27. How can a therapist promote learning in patients with apraxia?

- A. CBT
- B. Tactile cueing
- C. Physical activity
- D. Focus on only preferred, familiar tasks

28. What diagnosis responds well to a modified version of CBT?

- A. Oppositional defiant disorder
- B. Depression
- C. Tourette syndrome
- D. Bulimia nervosa

29. What health concern might make a patient a poor fit for group therapy?

- A. Detoxing from substances
- B. Active psychosis
- C. Echolalia
- D. All of the above

30. What type of strategies are most ideal for helping manage the behaviors of individuals with neurocognitive disorders?

- A. Environmental modifications
- B. Talk therapy
- C. Using familiar objects
- D. Both A & C

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