

# CFRP Test Prep - CFRP Questions

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## CPRP Practice Test questions with correct answers

What does WRAP stand for? - Ans - Wellness Recovery Action Plan

What elements are central to recovery as identified by SAMHSA? - Ans - Holistic, Hope, Self-direction, Individualized and person centered, empowerment, nonlinear, strengths-based, respect, peer support

Rights of Passage (ROP) - Ans - A community based model for african american youth

Interpersonal and Intrapersonal factors to consider for cultural competency are - Ans - (1) sociocultural and demographic descriptors, (2) historic and current sociopolitical context, (3) cultural values beliefs and behaviors, (4) family & kinship network, (5) acculturation and adaptation styles, (6) developmental life stage, (7) multicultural identity development, (8) individual presentation style, (9) intrapersonal variables

Who developed the WRAP? - Ans - Developed by Mary Ellen Copeland in the 1960s.

What are the components of a WRAP? - Ans - (1) triggers, (2) crisis plan, (3) daily maintenance plan, (4) early warning signs

How many principles of psychiatric rehabilitation are there? - Ans - 12

How are the principles of psychiatric rehabilitation grouped? - Ans - 1-3: Role of the Practitioner  
4-10: Best practices in the field  
11-12: Service delivery

What are principles 1-3 of Psychiatric Rehabilitation? - Ans - Principles 1-3 relate to the role of the practitioner.

(1) PRP Practitioners convey hope and respect. Believe that all individuals have the capacity for learning and growth.  
(2) PRP practitioners recognize that culture is central to recovery and strive to provide culturally appropriate and relevant services to consumers.  
(3) PRP practitioners engage in the process of informed, shared decision-making and facilitate partnerships with other people/resources the individual receiving services has identified.

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## **Psychiatric Rehabilitation Association Certified Child and Family Resiliency Practitioner (CFRP) Sample Questions (Q32-Q37):**

### **NEW QUESTION # 32**

Collaboration with a child involves

- A. reinforcing the child's effort.
- B. asking the child to identify barriers.
- C. observing the child's behaviors.
- D. instructing the child to problem solve.

### **Answer: A**

Explanation:

Collaboration with children in the CFRP framework, under interpersonal competencies, emphasizes empowering them through positive reinforcement and partnership. Reinforcing the child's effort encourages engagement and builds confidence in their ability to contribute to their recovery. The CFRP study guide states, "Collaboration with a child involves reinforcing their efforts to foster active participation and self- efficacy in the recovery process." Instructing problem-solving (option A) or asking to identify barriers (option C) may be part of collaboration but are directive rather than reinforcing. Observing behaviors (option B) is a practitioner task, not a collaborative act.

\* CFRP Study Guide (Section on Interpersonal Competencies): "Effective collaboration with children involves reinforcing their efforts to promote engagement and build self-efficacy in their recovery journey." References:

Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Interpersonal Competencies, Child-Centered Collaboration.

Psychiatric Rehabilitation Association (PRA) Guidelines on Strengths-Based Engagement.

### **NEW QUESTION # 33**

When expanding mental health programming for children and families, it is essential that children

- A. be placed in residential treatment to achieve the best outcomes.
- B. are informed of all of their available treatment options and risks.
- C. are maintained in their home environment to avoid disruption.
- D. be identified early and provided with effective services and supports.

### **Answer: D**

Explanation:

Systems competencies in the CFRP framework focus on improving mental health service delivery through proactive and effective programming. When expanding mental health programming, it is essential to identify children early and provide them with effective services and supports to prevent escalation of issues and promote recovery. The CFRP study guide states, "Expanding mental health programming requires early identification of children's needs and the provision of effective services and supports to ensure positive outcomes." Informing of treatment options (option A) is important but secondary to early intervention.

Maintaining home environments (option B) is ideal but not always feasible. Residential treatment (option C) is a last resort, not a primary strategy.

\* CFRP Study Guide (Section on Systems Competencies): "Essential to expanding mental health programming is the early identification of children and the delivery of effective services and supports to promote recovery and resilience." References:

CFRP Study Guide, Section on Systems Competencies, Mental Health Programming.

Psychiatric Rehabilitation Association (PRA) Guidelines on Early Intervention Systems.

### **NEW QUESTION # 34**

One of the best strategies a practitioner can teach parents of a transition-age youth is to communicate in a manner that is

- A. rational and in-depth.
- B. detailed and illustrative.
- C. short and to the point.
- D. slow and deliberate.

**Answer: C**

Explanation:

In the CFRP framework, transition-age youth services include equipping parents with effective communication strategies to support their youth. Teaching parents to communicate in a manner that is short and to the point is one of the best strategies, as it respects the youth's need for autonomy and clarity while avoiding overwhelming them. The CFRP study guide explains, "A key strategy for parents of transition-age youth is to communicate in a short and to-the-point manner, fostering clear and respectful interactions." Slow and deliberate (option A), detailed and illustrative (option B), or rational and in-depth (option C) communication may be less effective, as they can feel overbearing or disengaging to youth.

\* CFRP Study Guide (Section on Transition-Age Youth Services): "Practitioners should teach parents of transition-age youth to communicate in a short and to-the-point manner to promote effective and respectful engagement." References:

CFRP Study Guide, Section on Transition-Age Youth Services, Parent Communication Strategies.

Psychiatric Rehabilitation Association (PRA) Guidelines on Youth and Family Engagement.

**NEW QUESTION # 35**

Family enmeshment describes the

- A. extent of the family's involvement in treatment.
- B. extent of the family's involvement in the community.
- C. lack of quality family interpersonal communication.
- **D. lack of individuation of family members.**

**Answer: D**

Explanation:

In the CFRP framework, interpersonal competencies include understanding family dynamics, such as enmeshment. Family enmeshment describes a lack of individuation among family members, where boundaries are blurred, and individual identities are overly intertwined, often impacting emotional health. The CFRP study guide states, "Family enmeshment refers to a lack of individuation among family members, characterized by overly close emotional bonds and weak personal boundaries." Involvement in the community (option A) or treatment (option B) does not define enmeshment. Poor communication (option D) may be a consequence but is not the core definition.

\* CFRP Study Guide (Section on Interpersonal Competencies): "Family enmeshment is defined as a lack of individuation among family members, where emotional boundaries are blurred, impacting family functioning." References:

Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Interpersonal Competencies, Family Dynamics. Psychiatric Rehabilitation Association (PRA) Guidelines on Family Systems.

**NEW QUESTION # 36**

According to the Adverse Childhood Experience (ACE) Study, adverse childhood experiences have been linked to the following health problems.

- **A. Cancer, sexually transmitted diseases, and depression**
- B. Diabetes, acne, and anxiety
- C. Attention deficit hyperactivity disorder, eczema, and asthma
- D. Obesity, psoriasis, and head trauma

**Answer: A**

Explanation:

Supporting health and wellness in the CFRP framework includes understanding the long-term impacts of adverse childhood experiences (ACEs). The ACE Study links ACEs to health problems such as cancer, sexually transmitted diseases, and depression, due to their influence on physical and mental health outcomes.

The CFRP study guide states, "The Adverse Childhood Experience Study demonstrates that ACEs are associated with increased risks of cancer, sexually transmitted diseases, and depression, reflecting their broad impact on health." Options A, B, and D include conditions (e.g., acne, psoriasis, eczema) not directly linked to ACEs in the study's findings.

\* CFRP Study Guide (Section on Supporting Health and Wellness): "Per the ACE Study, adverse childhood experiences are linked to health issues like cancer, sexually transmitted diseases, and depression, highlighting their significant health consequences."

References:

CFRP Study Guide, Section on Supporting Health and Wellness, Adverse Childhood Experiences.

Psychiatric Rehabilitation Association (PRA) Guidelines on Trauma and Health Outcomes.

## NEW QUESTION # 37

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