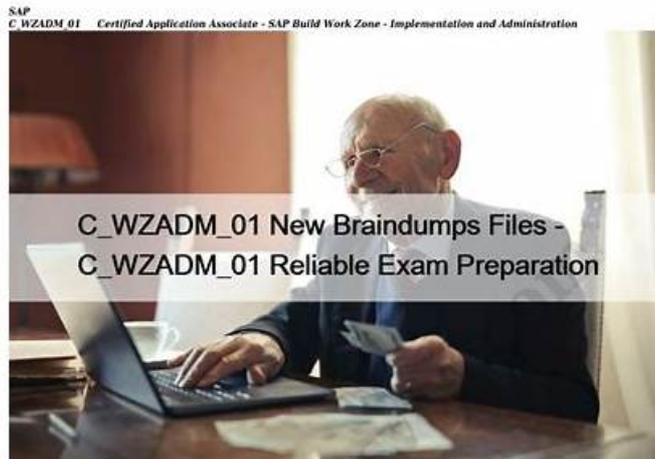


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Psychiatric Rehabilitation Association Certified Child and Family Resiliency Practitioner (CFRP) Sample Questions (Q59-Q64):

NEW QUESTION # 59

Which of the following interventions would be the MOST appropriate to help a family access needed services?

- A. Provide the family with a prepared plan to ensure they receive the services they need.
- B. Enroll the family in services based on needs identified by the practitioner.
- C. Work with the family to identify barriers to service utilization.
- D. Encourage the family to find support services on their own to foster independence.

Answer: C

Explanation:

The Systems Competencies domain focuses on collaborating with families to navigate and access community resources effectively. The PRA CFRP Study Guide 2024–2025 emphasizes family-centered practice, where practitioners partner with families to identify barriers (e.g., transportation, stigma, or lack of information) and develop tailored solutions to access services. This approach empowers families and ensures services align with their needs.

Option B (Work with the family to identify barriers to service utilization) is correct. The PRA guidelines highlight that identifying barriers collaboratively respects family autonomy and builds trust. This intervention enables the practitioner to address specific obstacles, such as logistical issues or mistrust, ensuring sustainable access to services.

Option A (Provide the family with a prepared plan to ensure they receive the services they need) is incorrect because a practitioner-imposed plan disregards family input, violating the PRA's family-centered principles.

Option C (Enroll the family in services based on needs identified by the practitioner) is incorrect because unilateral enrollment bypasses family collaboration. The PRA Code of Ethics requires involving families in decision-making.

Option D (Encourage the family to find support services on their own to foster independence) is incorrect because it places undue burden on the family, especially if barriers like lack of knowledge or resources exist.

The PRA framework emphasizes guided support over unsupported independence.

:

Psychiatric Rehabilitation Association, CFRP Study Guide 2024–2025, Section on Systems Competencies:

Accessing Community Resources.

PRA Certification Candidate Handbook, Competency Domain 6: Systems Competencies.

PRA Code of Ethics, Principle 2: Family-Centered Practice.

NEW QUESTION # 60

A practitioner would invite a sibling of a service recipient to participate in a session when doing so

- A. addresses conflict.
- B. provides respite for the parents.
- C. extends treatment to family members.
- D. augments treatment.

Answer: D

Explanation:

In the CFRP framework, family involvement is a key strategy for facilitating recovery, as it promotes resilience and supports the recovery process of the service recipient. Inviting a sibling to participate in a session is appropriate when it augments the treatment of the primary service recipient, such as by enhancing family dynamics, providing peer support, or reinforcing therapeutic goals. The CFRP study guide states that

"including siblings in sessions can augment treatment by fostering family cohesion and supporting the recovery process of the child receiving services." Providing respite for parents (option A) is not the primary purpose of involving a sibling in a therapeutic session. Addressing conflict (option B) may be a secondary outcome but is not the primary reason unless specified. Extending treatment to family members (option C) is inaccurate, as the focus remains on the service recipient's treatment, not treating the sibling.

* CFRP Study Guide (Section on Strategies for Facilitating Recovery): "Involving siblings in sessions can augment treatment by

strengthening family support systems and enhancing the recovery process for the child receiving services." References: Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Strategies for Facilitating Recovery, Family Involvement. Psychiatric Rehabilitation Association (PRA) Guidelines on Family-Centered Practice.

NEW QUESTION # 61

During assessment, it is important to encourage children to talk about their experiences and perceptions because children often

- A. are excited to talk about themselves.
- **B. are unaware of their strengths and weaknesses.**
- C. hide important information about themselves.
- D. repress their memories and feelings.

Answer: B

Explanation:

In the CFRP framework, assessment, planning, and outcomes emphasize engaging children in the assessment process to gain insight into their needs and strengths. Encouraging children to talk about their experiences and perceptions is critical because they are often unaware of their strengths and weaknesses, which can inform tailored interventions. The CFRP study guide states, "During assessments, practitioners should encourage children to share their experiences and perceptions, as children are often unaware of their strengths and weaknesses, providing valuable insights for planning." While children may be excited to talk (option A), repress memories (option C), or hide information (option D), these are less universal and less directly tied to the purpose of identifying strengths and weaknesses.

* CFRP Study Guide (Section on Assessment, Planning, and Outcomes): "Encouraging children to discuss their experiences during assessments is essential, as they are often unaware of their strengths and weaknesses, which informs effective planning." References: Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Assessment, Planning, and Outcomes, Child-Centered Assessments.

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

NEW QUESTION # 62

Practitioners play a critical role as members of a treatment team. This role includes

- A. managing medication to ensure compliance.
- B. recommending discontinuation of medications.
- C. providing subjective assessment of medication side-effects.
- **D. supporting family communication about medication concerns.**

Answer: D

Explanation:

In the CFRP framework, professional role competencies emphasize the practitioner's role within a treatment team, which includes facilitating family-driven care. Practitioners support family communication about medication concerns, helping families express questions and preferences to medical professionals. The CFRP study guide states, "As treatment team members, practitioners play a critical role in supporting family communication about medication concerns, ensuring families are informed and engaged." Managing medication (option B) or recommending discontinuation (option D) falls to medical professionals, not CFRP practitioners. Providing subjective assessments of side-effects (option C) is not a primary role, as this requires clinical expertise beyond the practitioner's scope.

* CFRP Study Guide (Section on Professional Role Competencies): "Practitioners contribute to treatment teams by supporting family communication about medication concerns, fostering informed decision-making." References: Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Professional Role Competencies, Treatment Team Roles.

Psychiatric Rehabilitation Association (PRA) Guidelines on Collaborative Care.

NEW QUESTION # 63

Gender studies show that negative and irritable temperament in infants and toddlers are predictors of increased risks of what in adolescent boys?

- **A. Oppositional behaviors**
- B. Abusive behaviors
- C. Psychotic behaviors
- D. Illegal behaviors

Answer: A

Explanation:

The CFRP framework includes understanding developmental risk factors to support health and wellness.

Gender studies cited in the CFRP study guide indicate that negative and irritable temperament in infants and toddlers is a predictor of oppositional behaviors in adolescent boys, such as defiance and aggression, which are characteristic of conditions like Oppositional Defiant Disorder (ODD). The guide states, "Negative and irritable temperament in early childhood is a risk factor for oppositional behaviors in adolescent boys, often manifesting as defiance or conflict with authority." Psychotic behaviors (option A) are linked to severe mental illnesses, not temperament. Illegal (option C) and abusive behaviors (option D) may occur later but are not directly predicted by early temperament as strongly as oppositional behaviors.

* CFRP Study Guide (Section on Supporting Health and Wellness): "Gender studies highlight that negative and irritable temperament in infants and toddlers predicts increased risk of oppositional behaviors in adolescent boys, such as defiance and aggression."

References:

Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Supporting Health and Wellness, Developmental Risk Factors.

Psychiatric Rehabilitation Association (PRA) Guidelines on Child and Adolescent Mental Health.

NEW QUESTION # 64

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