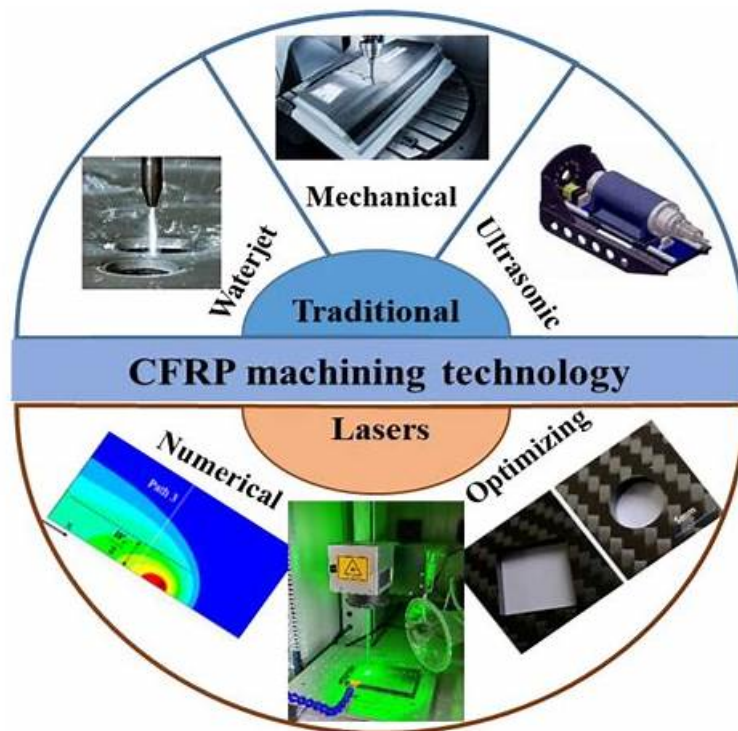


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>> CFRP認證考試 <<

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最新的 PRA Certification CFRP 免費考試真題 (Q51-Q56):

問題 #51

A primary reason for the lack of early intervention when a child presents with distress-related mental health issues is due to the belief that

- A. it will resolve with age.
- B. nothing can be done.
- C. stigma will occur.
- D. it is typical behavior.

答案： D

解題說明：

In the CFRP framework, supporting health and wellness involves addressing barriers to early intervention for mental health issues. A primary reason for delayed intervention is the belief that distress-related behaviors in children are typical behavior for their age, leading caregivers to overlook the need for support. The CFRP study guide notes, "The belief that distress-related mental health issues in children are typical behavior is a primary reason for the lack of early intervention, delaying access to necessary services." Stigma (option A), believing nothing can be done (option B), or expecting resolution with age (option D) are concerns but less prevalent than misinterpreting behaviors as typical.

* CFRP Study Guide (Section on Supporting Health and Wellness): "A key barrier to early intervention is the belief that children's distress-related mental health issues are typical behavior, preventing timely access to support." References:

Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Supporting Health and Wellness, Early Intervention Barriers.

Psychiatric Rehabilitation Association (PRA) Guidelines on Mental Health Screening.

問題 #52

At what age does a typical child progress from concrete to formal operational thinking?

- A. Age 13-14
- B. Age 15-16
- C. Age 11-12
- D. Age 9-10

答案： C

解題說明：

Supporting health and wellness in the CFRP framework includes understanding developmental milestones, such as cognitive development stages outlined by Piaget. A typical child progresses from concrete operational thinking (focused on tangible, observable events) to formal operational thinking (involving abstract reasoning and hypothetical thinking) around age 11-12. The CFRP study guide notes, "According to Piaget's theory, the transition from concrete to formal operational thinking typically occurs around ages 11 to 12, enabling abstract and hypothetical reasoning." Ages 9-10 (option A) are generally within the concrete stage, while ages 13-14 (option C) and 15-16 (option D) are typically after the transition.

* CFRP Study Guide (Section on Supporting Health and Wellness): "The shift from concrete to formal operational thinking, as per Piaget, typically begins around ages 11-12, marking the onset of abstract reasoning capabilities." References:

CFRP Study Guide, Section on Supporting Health and Wellness, Cognitive Development.

Psychiatric Rehabilitation Association (PRA) Guidelines on Developmental Psychology.

問題 #53

Wraparound for children and youth is a

- A. self-designed intervention and wellness tool for the child and family.
- B. community-based, individualized service that focuses on the strengths and needs of the child and family.
- C. collaborative plan designed by a clinician, teacher, and case manager.
- D. community-based, collaborative service that focuses on preventing hospitalization and suicide risk.

答案： B

解題說明：

In the CFRP framework, Wraparound is a key approach within assessment, planning, and outcomes, designed to support children and families holistically. Wraparound is a community-based, individualized service that focuses on the strengths and needs of the child and family, involving tailored plans and community resources.

The CFRP study guide states, "Wraparound is a community-based, individualized service that builds on the strengths and addresses the needs of the child and family to promote resilience and recovery." It is not self-designed (option A), as it involves professional facilitation. It is not limited to clinicians, teachers, and case managers (option C) or focused solely on preventing hospitalization and suicide (option D), but rather encompasses broader family-driven goals.

* CFRP Study Guide (Section on Assessment, Planning, and Outcomes): "Wraparound is a community-based, individualized service that focuses on the strengths and needs of the child and family, fostering resilience through collaborative, tailored planning." References:

CFRP Study Guide, Section on Assessment, Planning, and Outcomes, Wraparound Services.

問題 #54

Which of the following sequence of events is considered best practice during a practitioner's initial meeting with a child and family?

- A. Completing forms, interviewing, and observation
- B. Goal setting, review, and skills training
- **C. Orientation, rapport building, and information gathering**
- D. Assessment, planning, and goal setting

答案： C

解題說明：

This question pertains to the Assessment, Planning, and Outcomes domain, which outlines best practices for initiating services with children and families. According to the PRA CFRP Study Guide 2024-2025, the initial meeting is critical for establishing trust and setting the foundation for effective psychiatric rehabilitation. Best practice prioritizes building a therapeutic relationship before engaging in formal assessment or planning.

Option D (Orientation, rapport building, and information gathering) is correct. The PRA guidelines specify that the initial meeting should focus on orienting the family to the practitioner's role, building rapport to foster trust, and gathering preliminary information about the child's and family's needs. This sequence aligns with trauma-informed and family-centered principles, ensuring the family feels heard and respected before delving into structured processes like assessment or goal setting.

Option A (Assessment, planning, and goal setting) is incorrect because conducting a formal assessment or setting goals in the first meeting can overwhelm families and hinder rapport. The PRA study guide advises delaying these steps until trust is established.

Option B (Completing forms, interviewing, and observation) is incorrect because prioritizing administrative tasks like form completion in the initial meeting can alienate families. The PRA framework emphasizes relationship-building over paperwork in the first encounter.

Option C (Goal setting, review, and skills training) is incorrect because these activities are premature for an initial meeting. The PRA training materials note that skills training and goal setting require a foundation of trust and a thorough understanding of the family's needs, which are developed after the first meeting.

References:

Psychiatric Rehabilitation Association, CFRP Study Guide 2024-2025, Section on Assessment, Planning, and Outcomes: Initial Engagement.

PRA Certification Candidate Handbook, Competency Domain 4: Assessment, Planning, and Outcomes.

PRA Code of Ethics, Principle 1: Building Therapeutic Relationships.

問題 #55

To encourage a child's self-worth, a practitioner needs to

- **A. demonstrate empathy.**
- B. reinforce the child's perception.
- C. identify the child's emotions.
- D. display sympathy.

答案： A

解題說明：

Encouraging a child's self-worth is a critical strategy for facilitating recovery in the CFRP framework.

Demonstrating empathy, which involves understanding and validating the child's feelings, fosters a sense of value and self-worth. The CFRP study guide notes, "To encourage a child's self-worth, practitioners must demonstrate empathy, showing genuine understanding of the child's experiences to build their sense of value." Identifying emotions (option A) is a step but less impactful than empathy. Reinforcing perception (option B) may not always be positive, depending on the child's self-view. Displaying sympathy (option D) involves pity and is less empowering than empathy.

* CFRP Study Guide (Section on Strategies for Facilitating Recovery): "Demonstrating empathy is essential for encouraging a child's self-worth, as it validates their experiences and promotes a sense of value and self-esteem." References:

Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Strategies for Facilitating Recovery, Self-Worth Building.

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

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