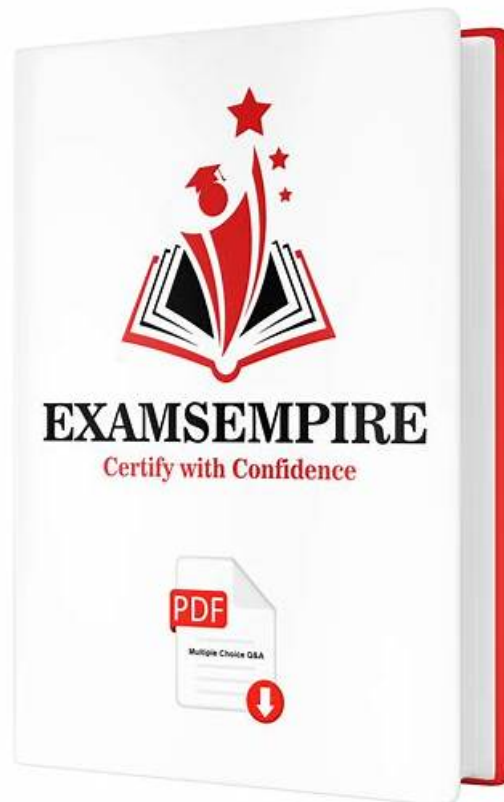


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Psychiatric Rehabilitation Association Certified Child and Family Resiliency Practitioner (CFRP) Sample Questions (Q74-Q79):

NEW QUESTION # 74

To nurture resilience in children, practitioners must

- A. teach the development realistic goals.
- B. emphasize performance over learning.
- C. emphasize that mistakes are opportunities for growth.
- D. avoid using humor to minimize disappointment.

Answer: C

Explanation:

Fostering resilience is a core strategy for facilitating recovery in the CFRP framework. Practitioners nurture resilience in children by emphasizing that mistakes are opportunities for growth, which encourages a growth mindset and perseverance. The CFRP study guide states, "To nurture resilience, practitioners should emphasize that mistakes are opportunities for growth, helping children develop a positive approach to challenges." Emphasizing performance (option A) can increase pressure and hinder resilience. Teaching realistic goals (option C) is important but less directly tied to resilience. Avoiding humor (option D) is not a resilience strategy and may limit emotional connection.

* CFRP Study Guide (Section on Strategies for Facilitating Recovery): "Nurturing resilience in children involves emphasizing that mistakes are opportunities for growth, fostering a growth mindset and adaptability." References:

CFRP Study Guide, Section on Strategies for Facilitating Recovery, Resilience Building.
Psychiatric Rehabilitation Association (PRA) Guidelines on Strengths-Based Resilience.

NEW QUESTION # 75

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

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

Answer: A

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.

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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 # 76

A 9-year-old does not get selected for the school all-star baseball team. This child seeks social support from his peers to manage his disappointment. This is an example of what type of coping strategy?

- A. Cognitive focused
- B. Emotion focused

- C. Problem focused
- D. Process focused

Answer: B

Explanation:

The Strategies for Facilitating Recovery domain includes understanding coping strategies to support resiliency. The PRA CFRP Study Guide 2024-2025 defines emotion-focused coping as strategies that manage emotional distress, such as seeking social support to process feelings, as opposed to addressing the problem directly.

Option A (Emotion focused) is correct because seeking peer support to manage disappointment focuses on regulating emotions rather than solving the problem (non-selection for the team). The PRA framework highlights this as a healthy coping mechanism for children.

Option B (Cognitive focused) is incorrect because cognitive-focused coping involves reframing thoughts, not seeking social support.

Option C (Process focused) is incorrect because "process focused" is not a recognized coping category in the PRA framework.

Option D (Problem focused) is incorrect because problem-focused coping addresses the issue directly (e.g., practicing to make the team next time), not managing emotions through support.

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Psychiatric Rehabilitation Association, CFRP Study Guide 2024-2025, Section on Strategies for Facilitating Recovery: Coping Strategies.

PRA Certification Candidate Handbook, Competency Domain 5: Strategies for Facilitating Recovery.

PRA Code of Ethics, Principle 4: Strengths-Based Interventions.

NEW QUESTION # 77

A strategy that seeks to affiliate high-risk youth with healthy adult role models from outside their immediate families is known as

- A. social activation.
- B. peer support.
- **C. community mentoring.**
- D. transitional reinforcement.

Answer: C

Explanation:

Community integration in the CFRP framework involves connecting youth with supportive community resources to promote positive development. Community mentoring is a strategy that affiliates high-risk youth with healthy adult role models outside their families to provide guidance and positive influence. The CFRP study guide explains, "Community mentoring is a key strategy for high-risk youth, connecting them with healthy adult role models from outside their immediate families to foster resilience and positive outcomes." Transitional reinforcement (option A) and social activation (option B) are not recognized terms in this context. Peer support (option D) involves peers, not adult role models.

* CFRP Study Guide (Section on Community Integration): "Community mentoring affiliates high-risk youth with healthy adult role models outside their families, promoting positive development and resilience." References:

CFRP Study Guide, Section on Community Integration, Mentoring Programs.

Psychiatric Rehabilitation Association (PRA) Guidelines on Community-Based Youth Support.

NEW QUESTION # 78

A family is refusing to work with a practitioner, stating they already have too many service providers. They do not want another new person working with their child. What is the BEST course of action for the practitioner to take?

- A. Encourage the family to work with the practitioner for at least one month.
- **B. Coordinate a meeting with the family and all of the service providers.**
- C. Accept the family's decision and move on to the next referral.
- D. Call the other service providers and request they close services with the family.

Answer: B

Explanation:

This question falls under the Systems Competencies domain, which focuses on collaboration with families, service providers, and community systems to support the child's recovery. The PRA CFRP Study Guide 2024-2025 emphasizes that practitioners must prioritize family-centered care and coordinate services to reduce fragmentation and

overwhelm, especially when families feel burdened by multiple providers.

Option C (Coordinate a meeting with the family and all of the service providers) is the best course of action.

The PRA guidelines highlight that when a family resists additional services due to provider overload, the practitioner should facilitate collaboration among existing providers to streamline care. Coordinating a meeting allows the practitioner to clarify roles, align goals, and address the family's concerns, fostering trust and reducing redundancy. This approach aligns with the PRA's emphasis on systems integration and family empowerment.

Option A (Accept the family's decision and move on to the next referral) is incorrect because it dismisses the family's needs without exploring solutions. The PRA Code of Ethics requires practitioners to advocate for families and seek collaborative resolutions rather than disengaging.

Option B (Encourage the family to work with the practitioner for at least one month) is incorrect because it disregards the family's expressed concerns about provider overload. The PRA study guide advises against pressuring families, as this can erode trust and engagement.

Option D (Call the other service providers and request they close services with the family) is incorrect because it oversteps the practitioner's role and disregards the family's autonomy. The PRA framework emphasizes that decisions about service closure should involve the family and be based on their needs, not unilateral action by the practitioner.

References:

Psychiatric Rehabilitation Association, CFRP Study Guide 2024-2025, Section on Systems Competencies: Collaboration and Service Coordination.

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

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

NEW QUESTION # 79

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