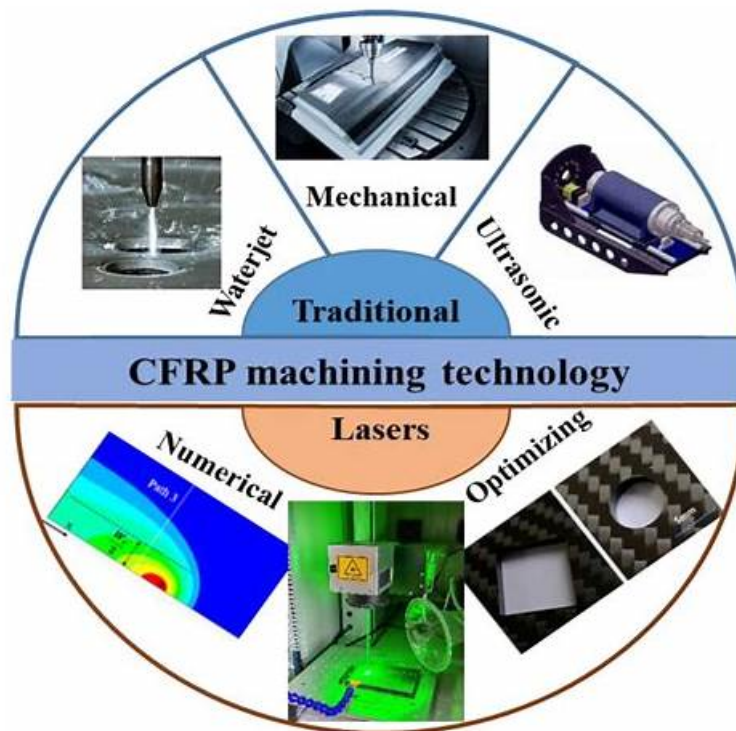


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Psychiatric Rehabilitation Association Certified Child and Family Resiliency Practitioner (CFRP) Sample Questions (Q39-Q44):

NEW QUESTION # 39

The MOST significant factor contributing to a child's healthy growth and well-being is

- A. socioeconomic status.
- B. genetics.

- C. culture.
- **D. strong relationships.**

Answer: D

Explanation:

Supporting health and wellness in the CFRP framework emphasizes the foundational role of relationships in child development. Strong relationships, particularly with caregivers and supportive adults, are the most significant factor contributing to a child's healthy growth and well-being, providing emotional security and resilience. The CFRP study guide notes, "Strong relationships with caregivers and supportive adults are the most significant factor in promoting a child's healthy growth and well-being, fostering emotional and social development." Socioeconomic status (option A), culture (option B), and genetics (option D) influence well-being but are secondary to the impact of relationships.

* CFRP Study Guide (Section on Supporting Health and Wellness): "The most significant factor for a child's healthy growth and well-being is strong relationships, which provide the emotional foundation for resilience and development." References:

CFRP Study Guide, Section on Supporting Health and Wellness, Relational Factors.

Psychiatric Rehabilitation Association (PRA) Guidelines on Child Development.

NEW QUESTION # 40

A practitioner engages and interacts in ways that invite a curious exploration of potential. This is an example of which of the following approaches?

- **A. Strength-based**
- B. Culture-based
- C. Individual-based
- D. Family-based

Answer: A

Explanation:

The CFRP framework emphasizes a strength-based approach within strategies for facilitating recovery, which involves engaging individuals in ways that highlight their potential and encourage exploration of possibilities.

A practitioner inviting a curious exploration of potential exemplifies a strength-based approach, focusing on the child's or family's capabilities and aspirations. The CFRP study guide notes, "A strength-based approach involves engaging and interacting in ways that invite a curious exploration of potential, empowering individuals to discover their strengths." Culture-based (option A) focuses on cultural contexts, individual-based (option C) is less specific, and family-based (option D) emphasizes family dynamics rather than potential exploration.

* CFRP Study Guide (Section on Strategies for Facilitating Recovery): "Engaging in ways that invite a curious exploration of potential is a hallmark of the strength-based approach, fostering empowerment through discovery of strengths." References:

CFRP Study Guide, Section on Strategies for Facilitating Recovery, Strength-Based Practices.

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

NEW QUESTION # 41

A teacher is requesting that the practitioner refer a six-year-old child to a psychiatrist to determine if medication is needed. What is the practitioner's first course of action?

- A. Refer the child to a psychiatrist as requested.
- **B. Discuss this request with the family.**
- C. Discuss this request with the school counselor.
- D. Request to view the child's school file.

Answer: B

Explanation:

In the CFRP framework, assessment, planning, and outcomes prioritize family-driven and collaborative decision-making. When a teacher requests a psychiatric referral for a six-year-old to evaluate medication needs, the practitioner's first course of action is to discuss this request with the family to ensure their involvement, understand their perspectives, and respect their authority in decision-making. The CFRP study guide states, "When external parties, such as teachers, request a psychiatric referral for a child, the practitioner's first step is to discuss the request with the family to align with family-driven principles." Directly referring the child (option A) bypasses family consent. Discussing with the school counselor (option C) or reviewing the school file (option D) may be

subsequent steps but are not the priority.

* CFRP Study Guide (Section on Assessment, Planning, and Outcomes): "The practitioner's first action when a teacher requests a psychiatric referral is to discuss the request with the family, ensuring their involvement in decisions about the child's care."

References:

Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Assessment, Planning, and Outcomes, Family-Driven Decision-Making.

Psychiatric Rehabilitation Association (PRA) Guidelines on Collaborative Care.

NEW QUESTION # 42

The system of care model emphasizes the importance of a strengths-based, empathetic, nonjudgmental approach to a:

- A. Provider alliance.
- **B. Collaborative partnership.**
- C. Congenial relationship.
- D. Family practice.

Answer: B

Explanation:

The Systems Competencies domain underscores the system of care model, which prioritizes collaborative, family-centered approaches. The PRA CFRP Study Guide 2024-2025 defines a collaborative partnership as a strengths-based, empathetic, and nonjudgmental relationship between practitioners, families, and other stakeholders to support the child's recovery.

Option A (Collaborative partnership) is correct because the PRA framework emphasizes partnerships that empower families and integrate services, aligning with the system of care principles.

Option B (Congenial relationship) is incorrect because "congenial" implies friendliness but lacks the depth of collaboration required by the PRA.

Option C (Family practice) is incorrect because this term refers to medical practice, not the system of care model.

Option D (Provider alliance) is incorrect because it focuses on providers, not the family-centered partnership central to the PRA guidelines.

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

System of Care Model.

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

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

NEW QUESTION # 43

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

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

Answer: C

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.

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