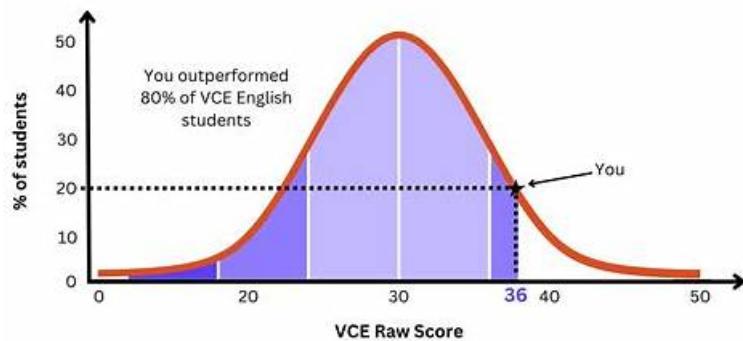


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Psychiatric Rehabilitation Association Certified Child and Family Resiliency Practitioner (CFRP) Sample Questions (Q80-Q85):

NEW QUESTION # 80

Assessment, planning, linking, and monitoring are core functions of

- A. case management.
- B. medication management.
- C. psychiatric care.
- D. care coordination.

Answer: A

Explanation:

In the CFRP framework, community integration involves connecting families to resources through structured processes. Assessment, planning, linking, and monitoring are core functions of case management, which ensures families access appropriate services and supports. The CFRP study guide states, "Case management includes the core functions of assessment, planning, linking, and monitoring to connect children and families with community resources." Medication management (option A) focuses on pharmaceuticals, psychiatric care (option B) involves clinical treatment, and care coordination (option C) is a broader term that overlaps but is less specific than case management.

* CFRP Study Guide (Section on Community Integration): "The core functions of case management- assessment, planning, linking,

and monitoring-facilitate access to community resources for children and families." References: CFRP Study Guide, Section on Community Integration, Case Management. Psychiatric Rehabilitation Association (PRA) Guidelines on Community Resource Linkage.

NEW QUESTION # 81

When the concept of being strengths-based is translated into action, families will focus on

- A. standards of performance.
- B. unique skills and characteristics.
- C. symptom management.
- D. specific problems and barriers.

Answer: B

Explanation:

The strengths-based approach is a cornerstone of the CFRP framework, particularly within strategies for facilitating recovery. This approach shifts the focus from deficits and problems to the inherent strengths, skills, and characteristics of individuals and families. According to the CFRP study guide, a strengths-based approach involves "identifying and building upon the unique skills, abilities, and characteristics of families to promote resilience and recovery." This contrasts with focusing on symptom management (option A), which is more aligned with traditional medical models, or specific problems and barriers (option D), which emphasizes deficits. Standards of performance (option C) are unrelated to the strengths-based approach, as they imply external benchmarks rather than individualized strengths.

* CFRP Study Guide (Section on Strategies for Facilitating Recovery): "A strengths-based approach translates into action by focusing on the unique skills, abilities, and characteristics of families, empowering them to build resilience and achieve recovery goals." References:

Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Strategies for Facilitating Recovery, Strengths-Based Approach.

Psychiatric Rehabilitation Association (PRA) Principles of Strengths-Based Practice.

NEW QUESTION # 82

Assessment of suicidal risk is important because

- A. there is a need to distinguish between attention-seeking behavior and suicidality.
- B. there is a continuum of suicidality that determines the level of risk for children.
- C. non-suicidal self-harm should not be considered a predictive suicide risk factor.
- D. children with suicidal thoughts frequently make an attempt within days of the disclosure.

Answer: B

Explanation:

In the CFRP framework, assessment, planning, and outcomes include thorough evaluation of suicidal risk to ensure appropriate interventions. Assessing suicidal risk is critical because there is a continuum of suicidality, ranging from ideation to attempts, which helps determine the level of risk and guide interventions for children. The CFRP study guide states, "Suicidal risk assessment is essential due to the continuum of suicidality, which allows practitioners to determine the level of risk and tailor interventions accordingly." Non-suicidal self-harm (option A) is a risk factor, contrary to the statement. Distinguishing attention-seeking behavior (option C) is relevant but secondary. Immediate attempts (option D) are not universally true and overstate the timeline.

* CFRP Study Guide (Section on Assessment, Planning, and Outcomes): "Assessment of suicidal risk is critical because suicidality exists on a continuum, enabling practitioners to gauge risk levels and implement appropriate supports for children." References: CFRP Study Guide, Section on Assessment, Planning, and Outcomes, Suicide Risk Assessment.

Psychiatric Rehabilitation Association (PRA) Guidelines on Suicide Prevention.

NEW QUESTION # 83

Entitlement programs are defined as government programs that

- A. provide benefits to eligible persons.
- B. inform legislative policy decisions.
- C. prevent generational poverty.

- D. oversee non-profit organizations.

Answer: A

Explanation:

Systems competencies in the CFRP framework involve understanding government programs that support families. Entitlement programs are government initiatives that provide benefits to eligible persons, such as Medicaid or Social Security, based on specific criteria. The CFRP study guide explains, "Entitlement programs are government programs designed to provide benefits to eligible individuals, supporting families' access to essential resources." Preventing poverty (option A) is a potential outcome, not a definition. Informing policy (option B) or overseeing non-profits (option C) are not the primary functions of entitlement programs.

* CFRP Study Guide (Section on Systems Competencies): "Entitlement programs are defined as government programs that provide benefits to eligible persons, ensuring access to critical resources for families." References:

CFRP Study Guide, Section on Systems Competencies, Government Support Programs.

Psychiatric Rehabilitation Association (PRA) Guidelines on Social Services Systems.

NEW QUESTION # 84

Generational poverty is defined as a

- A. financial event affecting an entire generation.
- B. downward trend in socio-economic status.
- **C. family having been in poverty for two or more generations.**
- D. life event that causes poverty for a family lasting up to 20 years.

Answer: C

Explanation:

Systems competencies in the CFRP framework include understanding socio-economic factors like generational poverty, which impacts family resilience. Generational poverty is defined as a family having been in poverty for two or more generations, reflecting entrenched economic challenges. The CFRP study guide states, "Generational poverty is defined as a family experiencing poverty for two or more consecutive generations, creating systemic barriers to resilience." A life event causing poverty (option A) or a financial event (option D) is situational, not generational. A downward trend (option B) is too vague to define generational poverty.

* CFRP Study Guide (Section on Systems Competencies): "Generational poverty refers to a family having been in poverty for two or more generations, posing significant systemic challenges to family well-being." References:

CFRP Study Guide, Section on Systems Competencies, Socio-Economic Factors.

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

NEW QUESTION # 85

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