

Free PDF Psychiatric Rehabilitation Association - Marvelous CFRP - Valid Certified Child and Family Resiliency Practitioner (CFRP) Test Camp

CFRP and CPRP Exam Study Guide: Best Practices in Psychiatric Rehabilitation Exam questions with correct answers

1. **In psychiatric rehabilitation, we define the desired outcome as:** recovery - a life of meaning and purpose for people who live with mental health conditions.
2. **To know whether a practice is effective, research and evaluation must::**
-Demonstrate that the practice does achieve the outcome desired. When a certain threshold of research evidence is reached, showing that one practice has better outcomes than alternatives, the practice is evidence-based.
3. **Evidence-Based Practices::** Specific interventions and service models that have been shown effective through multiple high-quality research studies by different research teams
4. **Best Practices::** Those approaches, tools, and techniques that are recognized as desirable and effective, but have not yet been studied adequately and so lack evidence.
5. **The Four Over-Arching Themes of Psychiatric Rehabilitation::** 1. Services that are person-centered
2. Services focused on full integration and participation in a person's community of choice.
3. Vigilance and activism to combat prejudice and discrimination.
4. Effective and ongoing training that is relevant to the field and targeted towards developing the attitudes, knowledge, and skill needed to be an effective psychiatric rehabilitation practitioner.
6. **Person-Centered Services are Built On::** Self-determination, choice, and promote individual responsibility.
7. **Service Plans in Psychiatric Rehabilitation are Designed to::** Define and achieve goals that are personally relevant and valuable.
8. **Assessment and Interventions in Psychiatric Rehabilitation Target::** The skills and supports needed to achieve personal goals.
9. **Psychiatric Rehabilitation Services focus on::** the whole of a person and what is needed to promote overall wellness in all life domains.

1 / 22

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Psychiatric Rehabilitation Association Certified Child and Family Resiliency Practitioner (CFRP) Sample Questions (Q52-Q57):

NEW QUESTION # 52

Playing card games with a transition-age youth is a cognitive training exercise that increases

- A. intellect.
- B. peer support.
- **C. memory.**
- D. social communication.

Answer: C

Explanation:

Within the CFRP framework, transition-age youth services include activities like cognitive training to enhance mental skills. Playing card games is a cognitive training exercise that primarily increases memory, as it requires recalling rules, strategies, and card sequences. The CFRP study guide notes, "Playing card games with transition-age youth serves as a cognitive training exercise that enhances memory by engaging recall and strategic thinking." Intellect (option A) is too broad, social communication (option C) is a secondary benefit, and peer support (option D) is unrelated to the cognitive focus of card games.

* CFRP Study Guide (Section on Transition-Age Youth Services): "Card games are effective cognitive training exercises for transition-age youth, primarily increasing memory through engagement with rules and sequences." References:
CFRP Study Guide, Section on Transition-Age Youth Services, Cognitive Skill Development.
Psychiatric Rehabilitation Association (PRA) Guidelines on Cognitive Interventions for Youth.

NEW QUESTION # 53

During a session, a child receiving services becomes verbally aggressive, insulting, and threatening. The practitioner's initial effort to de-escalate the situation would be to

- A. practice safety first and remove himself from the situation.
- B. establish boundaries using a loud and firm voice.
- **C. respond slowly and confidently in a gentle, caring way.**
- D. ignore the behaviors and continue the session.

Answer: C

Explanation:

Interpersonal competencies in the CFRP framework include managing challenging behaviors with de-escalation techniques. When a child becomes verbally aggressive, insulting, and threatening, the practitioner's initial effort to de-escalate is to respond slowly and confidently in a gentle, caring way, which helps calm the situation and maintain trust. The CFRP study guide states, "To de-escalate verbal aggression in a session, practitioners should initially respond slowly and confidently in a gentle, caring manner to reduce tension and preserve the therapeutic relationship." Ignoring behaviors (option A) may escalate the situation. Using a loud voice (option B) can intensify aggression. Removing oneself (option C) is a last resort if safety is at risk, not the initial step.

* CFRP Study Guide (Section on Interpersonal Competencies): "The initial de-escalation strategy for a child's verbal aggression is to respond slowly and confidently in a gentle, caring way, promoting calm and maintaining trust." References:
CFRP Study Guide, Section on Interpersonal Competencies, De-Escalation Techniques.
Psychiatric Rehabilitation Association (PRA) Guidelines on Managing Challenging Behaviors.

NEW QUESTION # 54

Empathy is

- A. feeling pity or sorrow for someone's misfortune.
- **B. understanding a person on a cognitive and emotional level.**
- C. sharing a similar experience with someone else.
- D. being concerned with the well-being of another.

Answer: B

Explanation:

Interpersonal competencies in the CFRP framework highlight empathy as a key skill for building therapeutic relationships. Empathy is defined as understanding a person on both a cognitive (intellectual comprehension) and emotional (feeling with) level, enabling deep connection. The CFRP study guide states, "Empathy involves understanding a person on a cognitive and emotional level, fostering trust and validation in interactions." Feeling pity (option A) describes sympathy, not empathy. Sharing experiences (option C) is not required for empathy, and concern for well-being (option D) is too broad.

* CFRP Study Guide (Section on Interpersonal Competencies): "Empathy is the ability to understand a person on both cognitive and emotional levels, creating a foundation for trustful relationships." References:

CFRP Study Guide, Section on Interpersonal Competencies, Empathy in Practice.

Psychiatric Rehabilitation Association (PRA) Guidelines on Therapeutic Communication.

NEW QUESTION # 55

Collaboration with a child involves

- A. observing the child's behaviors.
- B. asking the child to identify barriers.
- **C. reinforcing the child's effort.**
- D. instructing the child to problem solve.

Answer: C

Explanation:

Collaboration with children in the CFRP framework, under interpersonal competencies, emphasizes empowering them through positive reinforcement and partnership. Reinforcing the child's effort encourages engagement and builds confidence in their ability to contribute to their recovery. The CFRP study guide states, "Collaboration with a child involves reinforcing their efforts to foster active participation and self- efficacy in the recovery process." Instructing problem-solving (option A) or asking to identify barriers (option C) may be part of collaboration but are directive rather than reinforcing. Observing behaviors (option B) is a practitioner task, not a collaborative act.

* CFRP Study Guide (Section on Interpersonal Competencies): "Effective collaboration with children involves reinforcing their efforts to promote engagement and build self-efficacy in their recovery journey." References:

Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Interpersonal Competencies, Child-Centered Collaboration.

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

NEW QUESTION # 56

Transition-age youth with serious mental illnesses are more likely than their typical peers to

- **A. be involved in the legal system and attempt suicide.**
- B. abuse drugs and alcohol and become homeless.
- C. engage in cyberbullying and drop out of school.
- D. become involved in abusive relationships and self-harm

Answer: A

Explanation:

In the CFRP framework, transition-age youth services address the heightened risks faced by youth with serious mental illnesses. These youth are more likely than their typical peers to be involved in the legal system (e.g., due to behavioral issues) and attempt suicide (due to mental health challenges). The CFRP study guide states, "Transition-age youth with serious mental illnesses face increased risks of legal system involvement and suicide attempts compared to their peers, necessitating targeted interventions." While drug abuse and homelessness (option A), cyberbullying and dropout (option B), and abusive relationships and self- harm (option C) are risks, legal system involvement and suicide attempts are more consistently documented as prevalent outcomes.

* CFRP Study Guide (Section on Transition-Age Youth Services): "Compared to their typical peers, transition-age youth with serious mental illnesses are more likely to be involved in the legal system and attempt suicide, requiring specialized support."

References:

CFRP Study Guide, Section on Transition-Age Youth Services, Risk Factors.

Psychiatric Rehabilitation Association (PRA) Guidelines on Transition-Age Youth Mental Health.

NEW QUESTION # 57

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