

Psychiatric Rehabilitation Association CFRP

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2	Certified in Peer Support	45	1500
3	4-year degree or higher in Behavioral Health	30	1000
4	4-year degree with a major or minor in Psychiatric Rehabilitation	0	0
5	Current PRA Certification (CPRP or CFRP seeking dual certification)	0	0

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Psychiatric Rehabilitation Association Certified Child and Family Resiliency Practitioner (CFRP) Sample Questions (Q97-Q102):

NEW QUESTION # 97

Assessment of suicidal risk is important because

- A. non-suicidal self-harm should not be considered a predictive suicide risk factor.

- B. there is a need to distinguish between attention-seeking behavior and suicidality.
- **C. there is a continuum of suicidality that determines the level of risk for children.**
- D. children with suicidal thoughts frequently make an attempt within days of the disclosure.

Answer: C

NEW QUESTION # 98

To communicate empathically, the listener needs to go through which of the following cycles?

- A. Encouraging, assuring, and responding
- B. Maintaining eye contact, considering feelings, and sympathizing
- C. Respecting, acknowledging, and repeating back
- **D. Attending, understanding, and responding**

Answer: D

Explanation:

Empathic communication is a cornerstone of the Interpersonal Competencies domain, emphasizing the practitioner's ability to connect with children and families in a supportive, non-judgmental manner.

According to the PRA CFRP Study Guide 2024-2025, empathic listening involves a cycle of attending (actively focusing on the speaker), understanding (grasping the speaker's emotions and perspective), and responding (providing feedback that validates the speaker's feelings). This cycle fosters trust and ensures the speaker feels heard.

Option D (Attending, understanding, and responding) is correct because it directly reflects the PRA's framework for empathic communication. The study guide specifies that attending includes nonverbal cues like nodding, understanding involves interpreting both verbal and emotional content, and responding entails verbal affirmations or reflective statements.

Option A (Encouraging, assuring, and responding) is incorrect because, while encouraging and assuring are supportive, they are not specific to the empathic listening cycle. The PRA framework prioritizes understanding over assurance.

Option B (Maintaining eye contact, considering feelings, and sympathizing) is incorrect because maintaining eye contact is not universally appropriate (as noted in Question 1) and sympathizing focuses on the listener's emotions rather than the speaker's. The PRA emphasizes empathy (understanding the speaker's perspective) over sympathy.

Option C (Respecting, acknowledging, and repeating back) is partially correct but incomplete. While acknowledging and repeating back (reflective listening) are components of empathy, "respecting" is too broad and not a specific phase of the empathic cycle per PRA guidelines.

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Psychiatric Rehabilitation Association, CFRP Study Guide 2024-2025, Section on Interpersonal Competencies: Empathic Communication.

PRA Certification Candidate Handbook, Competency Domain 1: Interpersonal Competencies.

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

NEW QUESTION # 99

For a child whose goal is to make more friends, joining Girl Scouts would be an example of:

- A. Practicing interventions.
- B. Facilitating collaboration.
- **C. Promoting individual choice.**
- D. Maintaining personal wellness.

Answer: C

Explanation:

The Community Integration domain emphasizes connecting children with community resources and activities to support social inclusion and personal goals. According to the PRA CFRP Study Guide 2024-2025, promoting individual choice involves empowering children to select activities that align with their interests and goals, such as joining a group like Girl Scouts to foster social connections.

Option A (Promoting individual choice) is correct because joining Girl Scouts reflects the child's agency in choosing a community-based activity to achieve their goal of making friends. The PRA framework highlights that practitioners should support children in making self-directed choices to enhance engagement and ownership.

Option B (Facilitating collaboration) is incorrect because collaboration refers to coordinating with other providers or stakeholders, not the act of joining a group. The PRA study guide distinguishes collaboration as a systems-level activity.

OptionC(Practicing interventions) is incorrect because joining Girl Scouts is a community-based activity, not a clinical intervention. The PRA framework categorizes interventions as targeted therapeutic strategies.

OptionD(Maintaining personal wellness) is incorrect because, while social connections support wellness, the primary focus of joining Girl Scouts in this context is social integration, not wellness maintenance per the PRA guidelines.

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Psychiatric Rehabilitation Association,CFRP Study Guide 2024-2025, Section on Community Integration:
Empowering Choice.

PRA Certification Candidate Handbook, Competency Domain 3: Community Integration.

PRA Code of Ethics, Principle 3: Respect for Autonomy.

NEW QUESTION # 100

A practitioner is meeting with a parent who wants her son to be sent to a residential treatment facility because he is acting out and threatening his younger siblings. How should the practitioner proceed?

- A. Refer the child to an anger management class.
- B. Refer the child to a residential treatment facility.
- C. Request a treatment team meeting including the child and family.
- D. Call the authorities to remove the child from the family home.

Answer: C

Explanation:

In the CFRP framework, assessment, planning, and outcomes prioritize family-driven and collaborative approaches. When a parent requests residential treatment due to a child's threatening behavior, the practitioner should first request a treatment team meeting including the child and family to assess the situation, explore alternatives, and develop a plan. The CFRP study guide states, "When a parent seeks residential treatment for a child's challenging behaviors, the practitioner's first step is to request a treatment team meeting with the child and family to collaboratively assess needs and explore less restrictive options." Immediate referral to residential treatment (option A) or anger management (option B) bypasses assessment.

Calling authorities (option D) is premature and escalates unnecessarily.

* CFRP Study Guide (Section on Assessment, Planning, and Outcomes): "For requests for residential treatment due to behavioral issues, practitioners should first convene a treatment team meeting with the child and family to assess and plan collaboratively."

References:

CFRP Study Guide, Section on Assessment, Planning, and Outcomes, Collaborative Planning.

Psychiatric Rehabilitation Association (PRA) Guidelines on Family-Centered Interventions.

NEW QUESTION # 101

When using the collaborative approach to family recovery and resiliency, the practitioner would focus on the

- A. barriers to change.
- B. solution.
- C. problem.
- D. motivation to change.

Answer: B

Explanation:

The collaborative approach in the CFRP framework, under strategies for facilitating recovery, emphasizes working with families to identify and pursue solutions, aligning with strengths-based and family-driven principles. The practitioner focuses on the solution to empower families toward resiliency. The CFRP study guide explains, "In a collaborative approach to family recovery and resiliency, practitioners focus on solutions, partnering with families to build on strengths and achieve goals." Motivation (option A) and barriers (option B) are considered but not the primary focus. Emphasizing the problem (option C) is deficit-based, contrary to the approach.

* CFRP Study Guide (Section on Strategies for Facilitating Recovery): "The collaborative approach to family recovery focuses on solutions, empowering families to leverage strengths for resiliency." References:

CFRP Study Guide, Section on Strategies for Facilitating Recovery, Collaborative Approach.

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

NEW QUESTION # 102

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