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Psychiatric Rehabilitation Association Certified Child and Family Resiliency Practitioner (CFRP) Sample Questions (Q41-Q46):

NEW QUESTION # 41

A primary reason for the lack of early intervention when a child presents with distress-related mental health issues is due to the belief that

- **A. it is typical behavior.**
- B. stigma will occur.
- C. it will resolve with age.
- D. nothing can be done.

Answer: A

Explanation:

In the CFRP framework, supporting health and wellness involves addressing barriers to early intervention for mental health issues. A primary reason for delayed intervention is the belief that distress-related behaviors in children are typical behavior for their age, leading caregivers to overlook the need for support. The CFRP study guide notes, "The belief that distress-related mental health issues in children are typical behavior is a primary reason for the lack of early intervention, delaying access to necessary services." Stigma (option A), believing nothing can be done (option B), or expecting resolution with age (option D) are concerns but less prevalent than misinterpreting behaviors as typical.

* CFRP Study Guide (Section on Supporting Health and Wellness): "A key barrier to early intervention is the belief that children's distress-related mental health issues are typical behavior, preventing timely access to support." References:

Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Supporting Health and Wellness, Early Intervention Barriers.

Psychiatric Rehabilitation Association (PRA) Guidelines on Mental Health Screening.

NEW QUESTION # 42

Supporting transition-age youth in their efforts to understand how media, music, and beliefs impact their interpretation of mental health challenges is an example of

- **A. cultural competency.**
- B. collaborative understanding.
- C. supportive therapy.
- D. social networking.

Answer: A

Explanation:

Within the CFRP framework, transition-age youth services emphasize culturally competent practices that address how societal and cultural factors influence mental health. Supporting youth in understanding how media, music, and beliefs shape their mental health perceptions is an example of cultural competency, as it involves exploring cultural influences on their worldview. The CFRP study guide notes, "Cultural competency includes helping transition-age youth understand how media, music, and cultural beliefs impact their interpretation of mental health challenges." Collaborative understanding (option B) is not a recognized term. Supportive therapy (option C) is a clinical intervention, not specific to cultural factors. Social networking (option D) involves peer connections, not cultural analysis.

* CFRP Study Guide (Section on Transition-Age Youth Services): "Cultural competency involves supporting transition-age youth in

exploring how media, music, and beliefs influence their understanding of mental health challenges." References:
CFRP Study Guide, Section on Transition-Age Youth Services, Cultural Competency.
Psychiatric Rehabilitation Association (PRA) Guidelines on Cultural Influences in Youth Mental Health.

NEW QUESTION # 43

To nurture resilience in children, practitioners must

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

Answer: D

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 # 44

Stimulant medication, when used in children with an attention deficit disorder, is likely to result in

- A. increased acceptable behavior.
- B. decreased academic achievement.
- C. decreased mood stability.
- D. increased appetite.

Answer: A

Explanation:

Within the CFRP framework, supporting health and wellness includes understanding the effects of evidence-based interventions, such as stimulant medications for children with attention deficit disorders (ADD/ADHD).

Stimulant medications, such as methylphenidate, are known to improve attention and impulse control, leading to increased acceptable behavior in social and academic settings. The CFRP study guide states, "Stimulant medications for children with attention deficit disorders typically result in increased acceptable behavior by enhancing focus and reducing impulsivity." Decreased mood stability (option A) is not a common outcome when medications are properly managed. Decreased academic achievement (option C) is unlikely, as improved focus often supports academic performance. Increased appetite (option D) is incorrect, as stimulants commonly reduce appetite as a side effect.

* CFRP Study Guide (Section on Supporting Health and Wellness): "Stimulant medications, when used for attention deficit disorders, are likely to increase acceptable behavior by improving attention and reducing impulsive actions in children." References:
Certified Child and Family Resiliency Practitioner (CFRP) Study Guide, Section on Supporting Health and Wellness, Pharmacological Interventions.
Psychiatric Rehabilitation Association (PRA) Guidelines on ADHD Management.

NEW QUESTION # 45

Assessment of suicidal risk is important because

- A. there is a continuum of suicidality that determines the level of risk for children.
- B. there is a need to distinguish between attention-seeking behavior and suicidality.
- 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: A

NEW QUESTION # 46

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