1. At present, Family Psychoeducation has been shown to be most effective for individuals diagnosed with?

- depression
- schizophrenia
- anxiety
- Not Here

2. As families learn how to apply new information about mental illness to their lives, it is important for a Family Psychoeducation practitioner to assume the role of teacher.

- True
- False

3. Concurrently, the largest national mental illness advocacy organization, the National Alliance for the Mentally Ill (NAMI) promulgated the message that families who had long been viewed as "part of the problem" should now be considered as__________

- blamed for the problem
- not important
- part of the solution
- Not Here

4. In family psychoeducation the family becomes an object of the treatment, rather than participate in the treatment.

- True
- False

5. Family strengths have often been __________ by the professional community.

- included
- considered
- overlooked
6. The goal of Family Psychoeducation for people with severe mental illness and their families is to achieve full participation in the community by the consumer and to facilitate full and lasting recovery from mental illness.

True
False

7. Practitioners who work with consumers with severe mental illness achieve the __________ satisfaction if they routinely involve family members in the ongoing treatment and recovery effort.

greatest
least
no effect in the
Not Here

8. Family Psychoeducation has _____ Core Components of family psychoeducation

2
3
4
5

9. In Joining the practitioner establishes a respectful, trusting, and helpful relationship with family members and consumer and works to build hope for a better future.

True
False

10. In education the practitioner helps family members better understand their loved oneâ€™s illness and what they can do about it.

True
False

11. In Problem Solving the practitioner works with the family and consumer to identify strategies for handling difficult situations by making use of effective behavioral, cognitive and communication techniques to address issues caused by the illness.

True
False

12. Structural change in the treatment the practitioner works with the family and consumer to establish a strengths-based environment where all members are respectful of one another, creating an optimal environment for recovery from mental illness.
13. In Multifamily contact the practitioner creates multi-family groups in the multifamily model. In both multifamily and single family models, the practitioner recommends participation in local family support groups, such as those available through NAMI, to

True
False

14. Working with families requires that the practitioner adapt the approach to the __________ characteristics of the consumer and his or her family.

- economic
- psychological
- cultural

15. Joining, in its most general sense, _________ treatment.

- continues during all
- is used only once in
- is used at the beginning of

16. Family Psychoeducation is family therapy

True
False

17. Each joining session begins with and ends with ____________ which helps to decrease the family’s anxiety.

- an assessment
- socializing,
- discussions
- Not Here

18. Education consists of sharing information with family, other caretakers, and consumers themselves about the underlying biological and social processes.

True
False

19. In order for families to successfully solve problems of illness management, they must understand the ____________ and psychology of disorders at a basic level.

- physiology
20. The challenge for practitioners is to adapt the participant to the educational process.

True
False

21. The first and second group sessions are designed to help the participants and co-facilitators learn about each other and bond as a group.

True
False

22. It may be necessary for co-facilitators ___________ reluctant group members.

force
ignore
to prompt
Not Here

23. Chairs should be arranged in a ________ or around a table so everyone can easily see and hear each other.

circle
square
triangle
Not Here

24. Unpleasant family background, like criminal activity, addictions, etc., is of little help in problem solving and, if presently under control, is not especially relevant.

True
False

25. Early on, it is _________ to introduce humor into the group dynamic.

not necessary
destructive
unproductive
Not Here

26. Practitioners should not share as much as possible about their own professional and personal experiences.
27. Problem solving is a ______ step approach helps breaks down problems into a manageable form, so that a solution can be implemented in easy-to-follow steps, usually with more success.

four
tfive
six
Not Here

28. Step 6 is: Choose the solution that best fits the situation.

True
False

29. Defining the problem, while sometimes viewed as a rather simple process, is often the most ______ step in the psycho educational multifamily group process.

simpler
easier
difficult
Not Here

30. Defining the problem, while sometimes viewed as a rather simple process, is often the most ______ step in the psycho educational multifamily group process.

simpler
easier
difficult
Not Here

31. It is natural for family members to disagree at times, but when the disagreement becomes intense, outside help may be necessary.

True
False

32. When faced with a difficult situation, many people find it _________ to make a list of possible solutions.

helpful
not helpful
not neccessary
Not Here

33. When a problem has been defined in a way that is acceptable to each member of the family, the
practitioner asks the recorder to write it down and read it back to the group.

True
False

34. After the possible solutions have been listed, the practitioners move on to first discuss the ____________ of each solution.

- similarities
- advantages and then the disadvantages
- differences
- Not Here

35. In the use of medication, As is consistent with the model, the first efforts are educational in nature and involve directly talking with the consumer and family about the issue of medication usage.

True
False