In community-based nursing, the nurse focuses on "illness care" of individuals and families across the life span. The aim is to manage acute and chronic health conditions in the community, and the practice is family-centered illness care. Community-based nursing is not a specialty in nursing but rather a philosophy that guides care in all nursing specialties.

The three public health core functions are assessment, policy development, and assurance. Assessment is systematic data collecting on the population, monitoring the population’s health status, and making information available about the health of the community.

1. A clinic treating a child for otitis media is an example of which of the following?
   A. Community-oriented care
   B. Community-based care
   C. Public health care
   D. Tertiary health care

   Points Earned: 0/1
   Correct Answer: B
   Your Response:

2. A community-oriented nurse has identified obesity as a problem in the middle school. The next step in a population-focused practice is to make information available about the health of the middle school students. This describes the public health core function of which of the following?
   A. Assessment
   B. Assurance
   C. Policy development
   D. Research

   Points Earned: 0/1
   Correct Answer: A
   Your Response:

3. A state agency has received multiple complaints regarding the availability of elder transportation services to a specific county senior center. The state agency assigns a public health nurse to work with the community to evaluate their program for elder transportation services to publicly sponsored elder care programs. The public health core function applied is which of the following?
   A. Assurance
   B. Policy development
   C. Primary prevention

   Points Earned: 0/1
   Correct Answer: A
   Your Response:
The public health core function of assurance focuses on the responsibility of public health agencies to be sure that activities are appropriately carried out to meet public health goals and plans. This role requires skill in assessment, investigative functions, collaboration, consultation, and cooperation. Assurance also includes assisting communities to implement and evaluate plans and projects.

D. Public transportation

The public health core function of assurance focuses on the responsibility of public health agencies to be sure that activities are appropriately carried out to meet public health goals and plans. This role requires skill in assessment, investigative functions, collaboration, consultation, and cooperation. Assurance also includes assisting communities to implement and evaluate plans and projects.

Points Earned: 0/1
Correct Answer: A
Your Response:

4. A nurse planning a smoking cessation clinic for adolescents in the local middle schools and high schools is providing which of the following?

A. Community-oriented care
B. Community-based care
C. Secondary care
D. Tertiary care

Community-oriented nurses emphasize health protection, maintenance, and promotion and disease prevention, in addition to self-reliance among clients. Regardless of whether the client is a person, a family, or a group, the goal is to promote health through education about prevailing health problems, proper nutrition, beneficial forms of exercise, and environmental factors such as safe food, water, air, and buildings.

Points Earned: 0/1
Correct Answer: A
Your Response:

5. Public health nursing is a specialty with a distinct focus and scope of practice and requires a special knowledge base from other specialty areas of nursing. A public health nurse would first be interested in which of the following?

A. Drug treatments for diabetes
B. Populations with the highest rate of diabetes
C. Educational materials for individuals with diabetes
D. New technology for diabetic care

The primary focus that has differentiated public health nursing from other specialties has been the emphasis on the population rather than on single individuals or families.

Points Earned: 0/1
Correct Answer: B
Your Response:

6. A nurse in a clinic that provides direct care services to clients with tuberculosis would be classified as practicing which of the following?

A. Community-based nursing
B. Community-oriented nursing
C. Institutional nursing
D. Public health nursing

The nurse practicing as a community-based nurse is more likely to give direct care to people than are nurses who practice from a community-oriented framework. A community-oriented framework includes community-oriented nursing and public health nursing.
The goal of community-based nursing is to manage acute or chronic conditions while promoting self-care among individuals and families.

A public health nurse in a community clinic engaged in population-focused practice would ask the following questions:

- What is the prevalence rate of the diagnosis or condition among various age, race, and gender groups?
- Which subpopulations have the highest rates of untreated diagnosis or condition?
- What programs could reduce the problem of untreated diagnosis/condition and decrease the risk of further morbidity and mortality?

7. A school nurse teaches three middle school students with asthma conditions techniques to minimize their incidence of bronchial spasms. This is an application of which of the following?

A. Community-based nursing  
B. Community-oriented nursing  
C. Institutional nursing  
D. Public health nursing

8. The public health nurse deals with the examination of a community setting to determine its health status. Which of the following activities should be considered in the assessment phase? (Mark all that apply.)

A. Assisting communities to implement and evaluate plans and projects  
B. Building constituencies to work with the community  
C. Collecting, analyzing, and disseminating information  
D. Evaluating the social, economic, and environmental characteristics of the population  
E. Questioning the availability of health services to the community

9. In a community clinic that screens and treats individuals for cardiovascular disorders, the nurse practicing public-health/population-focused nursing would most likely ascertain which of the following?

A. Holistic treatment plan  
B. Specific clinical diagnosis  
C. Individual dietary interventions for cardiovascular disorders  
D. Prevalence rate of cardiovascular disorders among various groups

A public health nurse in a community clinic engaged in population-focused practice would ask the following questions:

- What is the prevalence rate of the diagnosis or condition among various age, race, and gender groups?
- Which subpopulations have the highest rates of untreated diagnosis or condition?
- What programs could reduce the problem of untreated diagnosis/condition and decrease the risk of further morbidity and mortality?
10. In a federally funded preschool program such as Head Start, nursing services that conduct developmental-level screening for cognitive and psychomotor development of individual children would most likely be considered community-oriented nursing care in the case of which of the following?

A. Individual results are compared with established standards for children of the same age group.
B. Program characteristics are assessed for their effectiveness in making the school population healthier.
C. Referral is provided for a child identified with delayed psychomotor development.
D. Treatment is initiated for a child with an identified learning disability.

Within federally funded programs for preschool children, from a community-oriented nursing care perspective, nursing services could be provided to individual children by conducting developmental-level screening tests to evaluate each child's level of cognitive and psychomotor development in comparison with established standards for children of the same age. This is population-focused service. A community-based nurse may deliver illness care or direct services to individual children. A public health nurse may access the program's ability to achieve the overall goal of making its population of children healthier by evaluating the characteristics of the facility, program, and its environment for their effectiveness in achieving the goal.
**Quiz Chapter 02: The History of Public and Community Health and Nursing**

Your response has been submitted successfully.

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1. The term *instructive district nursing* was coined in the nineteenth century to describe the relationship of nursing to which of the following?
   - A. Health education
   - B. Home health care
   - C. Settlement houses
   - D. Visiting nurse services

   In 1886 in Boston, two women, to improve their chances of gaining financial support for their cause, coined the term *instructive district nursing* to emphasize the relationship of nursing to health education.

   **Points Earned:** 0/1
   **Correct Answer:** A
   **Your Response:**

2. In the United States, the current system of local governments' responsibility for providing care for the disenfranchised emerged from which of the following?
   - A. Elizabethan Poor Law
   - B. Florence Nightingale
   - C. Public Health Service (PHS)
   - D. Federal Emergency Relief Administration (FERA)

   Colonial Americans established systems of care for the sick, poor, aged, mentally ill, and dependent based on the model of the Elizabethan Poor Law. Early county or township government was responsible for the care of all dependent residents, and they were strict about caring for their own residents.

   **Points Earned:** 0/1
   **Correct Answer:** A
   **Your Response:**

3. Community-oriented nursing in the twenty-first century has been influenced by recent historical events (e.g., 9/11, anthrax scare), key professional developments (e.g., nursing shortage), government reports (*Healthy People 2010*, IOM reports), and legislation that support the approach of which of the following?
   - A. Caring for the disenfranchised
   - B. Illness care
   - C. Keeping the public healthy
   - D. Preventing illness
In 2001 with airplanes flying into buildings and anthrax sent through the mail, people no longer believed they could protect themselves. The importance of keeping the public healthy became a topic for all forms of media. Resources were redirected to ensure that citizens could remain safe in their homeland. In 2002 the Institute of Medicine (IOM) published a guide to education in each of the disciplines related to public health: Who Will Keep the Public Healthy? In 2003 the Association of Community Health Educators (ACHE) and the Quad Council finalized its own set of public health nursing competencies. In 2003 the Health Insurance Portability and Accountability Act (HIPAA) was created to protect an individual’s health information while ensuring access to high-quality health care and reduction in health care errors.

4. In 1902 Lillian Wald introduced the concept of school nursing to address the problem of student absenteeism by which of the following?

- A. Enforcing the Department of Health’s rules and regulations
- B. Excluding infectious children from the school environment
- C. Providing and obtaining medical treatment for absent students
- D. Providing shoes and clothing for absent students

In New York City in 1897 school medical examination focused on excluding infectious children from school. By 1902 more than 20% of children might be absent from school on any given day because no one was focused on providing or obtaining medical treatment so that absent children could return to school. Lillian Wald introduced an English innovation by providing nurses for schools. The first school nurses made home visits to teach parents and provide follow-up care to children absent from schools.

5. In the early 1990s, official health agencies were established in rural areas to target epidemics and were staffed primarily by public health nurses who assumed which of the following?

- A. Clinical role by treating clients/patients
- B. Leadership role by collaborating with local officials and health care providers
- C. Regulatory role by enforcing health department rules and regulations
- D. Research role by collecting clinical data

In the early 1900s local health units, or official health agencies, were established in rural areas to target epidemics such as typhoid fever, diphtheria, and scarlet fever. Public health nurses who assumed a leadership role on health care issues primarily staffed these rural official health agencies. The public health nurses collaborated with local officials, nurses, and other health care providers to improve the local health status.

6. The historical nursing figure who contributed to establishing the foundation for current community health and nursing in community health by working in military field hospitals using a population-based approach that improved nursing care and environmental conditions was which of the following?

- A. Florence Nightingale
- B. Frances Root
- C. Lillian Wald
- D. Mary Breckinridge
During the Crimean War (1854-1856), the British military established hospitals for sick and wounded soldiers in Scutari in Asia Minor. The care of the soldiers was poor, with cramped quarters, poor sanitation, lice and rats, not enough food, and inadequate medical supplies. When the British public demanded improved conditions, Florence Nightingale asked to work in Scutari. Because of her wealth, social and political connections, and knowledge of hospitals, the government sent her with a contingent of ladies, hired nurses, and hired servants to Scutari. Using simple epidemiology measures, she documented decreased mortality rate from the beginning of the war to the end of the war. Florence Nightingale progressively improved the soldiers' health using a population-based approach that improved environmental conditions and nursing care.

7. The environmental conditions of immigrants in tenement houses and sweatshops were familiar features of urban life across the northeastern United States and the upper Midwest. Which of the following factors assisted such community-oriented nursing pioneers such as Lillian Wald to develop approaches and programs to solve the health care and social problems of their times? (Mark all that apply.)
   A. Community health's focus on teaching and prevention
   B. Establishment of settlements houses
   C. Establishment of the Town and Country Nursing Services in large cities
   D. Lack of public interest in limiting disease
   E. Middle- and upper-class fear of diseases

In the 1890s, the public was interested in limiting disease among all classes of people, partly for religious reasons, partly for charity, but also because the middle and upper classes were afraid of the diseases that seemed to be brought in by the large communities of European immigrants. Nurses began to establish settlement houses and neighborhood centers, which became hubs for health care and social welfare programs. From the beginning, community health nursing practice included teaching and prevention. Community-oriented interventions led to improved sanitation, economic improvements, and better nutrition. These interventions were credited with reducing the incidence of acute communicable diseases. Pioneers in public health nursing, such as Lillian Wald, took advantage of the public's concern and existing practice models to solve health care and social problems that reduced the incidence of acute communicable diseases in immigrant communities.

8. In 1925 Mary Breckinridge established the Frontier Nursing Service (FNS) based on a system of care used in the Highlands and islands of Scotland. Changes in public support for community and public health nursing and from individual commitment and private financial support led to innovations in health care delivery in the twentieth century especially for underserved populations. One of Breckinridge's contributions to health care in the United States was which of the following?
   A. Federal Emergency Relief Administration (FERA)
   B. Introduction of the first nurse-midwives
   C. Nursing process
   D. Occupational health nursing

The unique pioneering spirit of the FNS influenced the development of public health programs to improve the health care of the rural and often inaccessible populations in the Appalachian sections of southeastern Kentucky. FNS nurses were trained in nursing, public health, and midwifery. Breckinridge, the founder of the FNS, introduced the first nurse-midwives into the United States.
9. The post-Depression shift in Congress to the practice of categorical funding that provides federal money for priority diseases or groups produced what negative effect on the delivery of health care services, which continues to affect public health?

A. Beginning of 2-year associate degree programs in nursing
B. Duplication of services among agencies
C. End of insurance company support for visiting nurses
D. Rise in hospital-based care

The shift in Congress to categorical funding provides federal money for priority diseases or groups rather than for a comprehensive community health program. Thus local health departments designed programs to fit the funding priorities that led to duplication among official health agency programs.

Points Earned: 0/1
Correct Answer: B
Your Response:

10. Many nurses work in the community. Some bring a public health population-based approach and have as their goal preventing illness and protecting health. Other nurses have a community-oriented approach and deal primarily with the health care of individuals, families, and groups in the community. Still other nurses bring a community-based approach that focuses on illness care of individuals and families in the community. Which statement accurately reflects the current status of nursing in community health?

A. Each type of nurse is needed in today’s communities.
B. Community health serves only clients with chronic conditions.
C. Comprehensive reform of health care is required.
D. People no longer believe they can protect themselves.

Many nurses work in the community. Some bring a public health population-based approach and have as their goal preventing illness and protecting health. Other nurses have a community-oriented approach and deal primarily with the health care of individuals, families, and groups in the community. Still other nurses bring a community-based approach that focuses on “illness care” of individuals and families in the community. Each type of nurse is needed in today’s communities. The latter two groups are growing and will continue to do so, because so much health care is being provided in community rather than inpatient settings. What is necessary is the extension of public health services to prevent illness, promote health, and protect the public. Without this extension a large gap would exist in the design of a comprehensive program for health care.

Points Earned: 0/1
Correct Answer: A
Your Response:
1. A parish nurse decides to use a community-oriented primary care (COPC) model to approach care within the church community served. The parish nurse would do which of the following?
   A. Collaborate with community physicians to set goals
   B. Base goals on available research literature for this population
   C. Set goals based on an analysis of available governmental data
   D. Work with the community to set priorities and select solutions

Community-oriented primary care (COPC) is a community-responsive model of health care delivery that integrates primary care and public health. It combines the care of individuals and families in the community with a focus on the community and its subgroups in planning, providing, and evaluating services. A community-based practice must involve community members by allowing them to set their own priorities and solutions.

Points Earned: 0/1
Correct Answer: D
Your Response:

2. The federal agency most involved in health care is which of the following?
   A. Department of Commerce
   B. Department of Agriculture
   C. Food and Drug Administration
   D. U.S. Department of Health and Human Services

The U.S. Department of Health and Human Services (USDHHS) is the federal agency most heavily involved with the health and welfare concerns of the U.S. citizens. The department comprises Office of the Secretary, 11 agencies, and a program support center. It is charged with regulating health care and overseeing the health status of America.

Points Earned: 0/1
Correct Answer: D
Your Response:

3. A nurse works in a free clinic for uninsured low-wage employees in the community. The free clinic setting operates in a primary health care (PHC) strategy. The nurse would most likely focus on which of the following?
   A. Incidence of the disease
   B. Physician orders for the individual
   C. Pathophysiology of the disease
   D. Self-care/management
Primary health care (PHC) generally is defined more broadly than primary care. It includes a comprehensive range of services including public health, prevention, and diagnostic, therapeutic, and rehabilitative services. PHC is essential care made universally accessible to individuals and families in a community. Health care is made available to them with their full participation and is provided at a cost that the community and county can afford. PHC encourages self-care and self-management in health and the social welfare of daily life.

4. Parents can expect their child to be immunized for communicable diseases before entering kindergarten in the local school system for which of the following reasons?
   A. Primary care clinics focus on prevention.
   B. Primary care clinics maintain adequate supplies of immunization.
   C. Public health system has mandates for immunization.
   D. Public health system provides good access to immunization clinics.

Although the goal of the public health system is to ensure that the health of the community is protected, promoted, and ensured, overlap exists between this system and the primary care system. The overlap comes both from the primary care system, which provides health promotion and disease prevention, and through the public health system, which provides personal primary care services for those who cannot afford to receive care elsewhere. The public health system is mandated through laws developed at the national, state, and local level. Examples of public health laws instituted to protect the community are laws mandating immunization for all children entering kindergarten or laws requiring the constant monitoring of the local water supply to make sure that it meets set standards.

5. A nurse questions whether a particular activity in her job description is within her scope of practice would look to which government jurisdiction or agency to seek the clarification?
   A. Federal system
   B. State system
   C. Department of Labor
   D. U.S. Department of Health and Human Services

Every state has a board of examiners of nurses. The board may be in the department of licensing board of the health department or in an administrative agency of the governor's office. Created by legislation known as a state practice act, the examiners' board is made up of nurses and consumers and in a few states other providers and/or administrators. The functions of the board are described in the practice act of each state and generally include licensing and examination of registered nurses and licensed practical nurses; approval of schools of nursing in the state; revocation, suspension, and denial of licenses; and writing of regulations about nursing practice and education.

6. Primary care refers to personal health care for the most common needs of members of a community. Which of the following descriptions also differentiates primary care from primary health care? (Mark all that apply.)
   A. Consists of a multidisciplinary team
   B. Directs interventions primarily toward the pathophysiological process
   C. Encourages self-care and self-management
Primary care refers to personal health care that provides first contact and continuous, comprehensive, and coordinated care. It deals with the most common needs of members of community by providing preventive, curative, and rehabilitative services. Although primary care practitioners are encouraged to consider the clients’ social and environmental attributes in diagnosis, interventions are directed primarily toward the pathophysiological process. Primary health care is defined more broadly than primary care. Primary health care is "essential care" made universally accessible to individuals and families in a community with the full participation of the community and provided at a cost that the community/county can afford. The primary health care workforce is a multidisciplinary team that includes providers from multiple disciplines, community outreach workers, allied health professionals, translators, and community members.

The USDHHS, directed by the Secretary of Health, is organized into 12 functional units:
1. Administration for Children and Families (ACF)
2. Administration on Aging (AOA)
3. Centers for Medicare and Medicaid (CMS)
4. Agency for Health Research and Quality (AHRQ)
5. Centers for Disease Control and Prevention (CDC)
6. Agency for Toxic Substances and Disease Registry (ATSDR)
7. Food and Drug Administration (FDA)
8. Health Resources and Services Administration (HRSA)
9. Indian Health Service (IHS)
10. National Institutes of Health (NIH)
11. Substance Abuse and Mental Health Services Administration (SAMHSA)
12. Program Support Center (PSC)

The U.S. Department of Agriculture is involved in health care primarily through administering the Food and Nutrition Services, which oversees a variety of food assistance activities in collaboration with state and local government welfare agencies to provide food stamps to needy persons to increase their food purchasing power as well as school breakfast and lunch programs, SupPLEMENTAL Food Program for Women, Infants, and Children (WIC), and grants to states for nutrition education training.

D. Provides first contact, continuous, comprehensive, and coordinated care
E. Provides preventive, curative, and rehabilitative services
9. When a community-oriented nurse continues to gain input from the community to determine if their health care plan is workable and if resources are sufficient to implement the plan, the nurse is using which community-oriented primary care model (COPC) step?

A. Define and characterize the community
B. List community health problems and needs
C. Help community leaders develop interventions
D. Coordinate and manage services

The third step of the COPC model is to do the following:
- Help community leaders develop interventions that match the community diagnosis proposed in step two, including personal health care services, health promotion, and disease prevention activities
- Encourage interdisciplinary teamwork to gain maximum benefits from human resources
- Continue to gain input from the community to determine if the plan is workable and if resources are there

10. The most effective and sustainable individual and system changes come when the people who live in the community actively participate in the process regardless of who initiates the process, best explains which of the following?

A. Community-based process
B. Community-oriented primary care (COPC)
C. Primary care process
D. Public health process

Community participation is absolutely essential to the COPC model. The COPC process of inviting community member participation, although effective, differs from what has generally been called the "community-based" health care approach, which is a process initiated by the community members. The most effective and sustainable individual and system changes come when the people who live in the community actively participate, regardless of who initiates the process. This is also an important element of primary health care.
1. Why should nurses understand the nontraditional healing practices of their clients?
   A. Folk practices are usually ineffective.
   B. Nurses can refer clients to the appropriate local folk healers.
   C. Safe, effective nontraditional healing methods can be blended with Western medicine.
   D. The nurse must understand them to help the client give them up.

   Nurses need to understand the nontraditional healing practices that their clients use. Many of these treatments have proven effective and can be blended with traditional Western medicine. The key is to know what practices are being used so that the blending can be done knowledgeably.

   **Points Earned:** 0/1
   **Correct Answer:** C
   **Your Response:**

2. A nurse demonstrates cultural competence by using statements such as which of the following?
   A. "I know how you feel."
   B. "Tell me about your health care beliefs."
   C. "Let me show you the way you should do this."
   D. "You can do things in a more modern way now."

   Cultural competence includes acknowledging the fundamental differences in the ways patients and families respond to illness and treatment from what might be the typical response or more generalized Western health care response. Culturally competent nursing care is grounded in the following four principles:
   - Care is designed for the specific client.
   - Care is based on the uniqueness of the person's culture and includes cultural norms and values ("Tell me about your health care beliefs").
   - Care includes self-empowerment strategies to facilitate client decision making in health behavior.
   - Care is provided with sensitivity and is based on the cultural uniqueness of clients.

   **Points Earned:** 0/1
   **Correct Answer:** B
   **Your Response:**

3. A nurse claims proudly to other nurses at the agency, "The care I provide is the same for everyone. I treat everyone the same." In fact, this nurse is demonstrating what inhibitor to developing cultural competence?
   A. Culture blindness
4. A nurse who speaks only English has just gotten a new client for an intake interview. The client is a refugee who has very limited English proficiency (LEP). The nurse should do which of the following?

A. Get an interpreter.
B. See if another nurse, who is more comfortable with refugees, will work with the patient.
C. See what helpful information is on the Internet.
D. Try to communicate with hand gestures.

5. A nurse overhears the doctor saying, "Let's not give him codeine, he is Asian." The nurse reflects on the comment and determines which of the following? (Mark all that apply.)

A. Doctor is culturally competent
B. Doctor is prejudiced.
C. Doctor should have called an interpreter.
D. Doctor's ability to assess pain based on culture may be limited.
E. Doctor is planning care based on racial enzymatic differences.

6. The development of cultural competence is an ongoing process that is challenging and sometimes painful as nurses struggle to adopt new ways of thinking and performing. The nurse in community health who understands the basis of his or her own behaviors and how those behaviors help or hinder the delivery of competent care to persons from cultures other than their own is demonstrating what cultural competence development process construct?

A. Cultural awareness
B. Cultural desire  
C. Cultural encounter  
D. Cultural skill

The five constructs that explain the process of developing cultural competence are cultural awareness, cultural knowledge, cultural skill, cultural encounter, and cultural desire. Cultural awareness is self-examination and in-depth exploration of one's own beliefs and values as they influence behavior. Nurses who are receptive to learning about cultural dimensions understand the basis of their own behaviors and how they help or hinder the delivery of competent care and recognize that health is expressed differently across cultures have developed cultural awareness.

7. A nurse in community health seeks to determine whether the visit with an elderly Asian woman is successful. The nurse has not encountered many clients from this culture. An effective way to judge whether a cultural encounter has been effective would include the nurse's sense that the visit was successful, nurse and client experience little or no stress, and which of the following?

A. The client says thank you.  
B. The client nods frequently.  
C. The client’s family members do not complain.  
D. Tasks are performed efficiently.

Points Earned: 0/1  
Correct Answer: D  
Your Response:

8. In caring for a young adult from West Africa, the community nurse is introduced to another individual, who is referred to as "auntie," with the young adult. A culturally competent nurse who is aware of the basic organizing factor of culture related to social organization would do which of the following?

A. Assess the competence of the "auntie" to care for the young adult.  
B. Assume that the "auntie" is related to one of the young adult's parents.  
C. Declare that the young adult is capable of making his or her own health decisions.  
D. Find out who is considered to be a member of the family.

Points Earned: 0/1  
Correct Answer: D  
Your Response:
9. A public health service nurse working for the Indian Health Service is working with a client diagnosed with cancer. The client utilizes sweat lodges to "cure the disease." The nurse understands that within the culture, disease often is perceived as disharmony with other forces and clients may look to hot or cold treatments to resolve or cure a cancerous condition. The nurse is integrating her knowledge of what cultural organizing factor?

A. Biological variations  
B. Communication  
C. Environmental control  
D. Space

Cultures that view a human harmony with nature may perceive illness as a disharmony with other forces and that medicine can only relieve the symptoms rather than cure the disease. They would use the mind-body-spirit connection to heal from within. Such cultures look to naturalistic solutions such as herbs, hot and cold treatments, or acupuncture to resolve or cure a cancerous condition.

Points Earned: 0/1  
Correct Answer: C  
Your Response:

10. A community-based hospice nurse has an Asian male client with terminal stage cancer. The client complains that he is in continuous pain and receives no relief from the codeine prescribed by his primary care practitioner (PCP). The nurse contacts the client's PCP to discuss replacing the prescription of codeine with another pain-reducing, non-codeine-based drug. The nurse is demonstrating her knowledge of what cultural organizing factor?

A. Biological variance  
B. Communication  
C. Space  
D. Time perception

Research findings suggest that sensitivity to codeine varies with ethnic background and that Asian men experience significantly weaker effects from the drug than European men. Asian men are missing an enzyme called CYP2D6 that allows the body to metabolize codeine into morphine, which is responsible for the pain relief provided by codeine. When an individual is missing the enzyme, no amount of codeine will lessen the pain, and other pain-reducing chemicals should be explored.

Points Earned: 0/1  
Correct Answer: A  
Your Response:

Continue
1. The aging population is expected to affect health services more than any other demographic factor. Another demographic population factor that affects health care costs can be related to which of the following?

   A. Consumer demand  
   B. Illnesses such as AIDS  
   C. Marketing practices for new drugs  
   D. Technology advancement

Because the majority of older adults and other special populations receive services through publicly funded programs, the growing health needs among these populations have a great effect on costs, payments, and providers associated with Medicaid and Medicare programs.

   X Points Earned: 0/1  
   Correct Answer: B  
   Your Response:

2. Health care costs are influenced by factors related to demographic changes, new technology, resource intensity, and which of the following?

   A. Chronic illness  
   B. Market practices  
   C. Nursing shortage  
   D. Professional competition

The factors that influence health care costs are demographic changes, technology, resource intensity, and chronic illness. More than 44% of total health care costs in 1996 are related to the top 15 highest-cost conditions. The highest-cost conditions are identified as those with the highest costs, utilization of bed days, work-loss days, and activity impairments.

   X Points Earned: 0/1  
   Correct Answer: A  
   Your Response:

3. If a small-business employer desires to control company benefit expenditures by turning health care decision-making control over to its employees, the insurance reform effort that best addresses the shifting of responsibility, knowledge, and decision-making involvement to the individual receiving the care would be which of the following?

   A. Health savings accounts (HSA)  
   B. Managed care  
   C. Medical savings account (MSA)
Medical savings accounts (MSAs) are touted as a way of turning health care decision-making control over to the individual receiving the care. MSAs are tax-exempt accounts available to individuals who work for small companies, established usually through a bank or insurance company, that enable individuals to save money for future medical needs and expenses. The employer contributes money to an MSA, and the initial money put into an MSA does not come out of taxable income. Also interest is earned in MSAs tax-free, and unused MSA money can be held in the account from year to year until the money is used. This transfers responsibility for knowledge, decision making, and decisions made to the individual regarding cost/quality tradeoffs.

4. Of the four major factors that affect health care—personal behavior/lifestyle, environmental factors (physical, social, economic), human biology, and the health care system—medical services are said to have the least effect. Yet the U.S. health care system remains reactionary with high-cost, high-technology, and disease-specific “sickness care.” This statement supports the need for increase investment in which of the following?
   A. Managed care
   B. Primary prevention
   C. Secondary prevention
   D. Tertiary prevention

Behavior and lifestyle have been shown to have the greatest effect, with the environment and biology accounting for 70% of all illness; yet most health care dollars are spent on secondary and tertiary care. A more proactive investment in disease prevention and health promotion targeted to improving behaviors, lifestyle, and environment has the potential to improve health status, thereby improving the quality of life while reducing health care costs.

5. A useful way to distinguish between Medicare Part A and Medicare Part B is to recognize which of the following? (Mark all that apply.)
   A. Part A covers outpatient hospital care.
   B. Part A covers limited skilled nursing care.
   C. Part A is hospital insurance.
   D. Part B is noninstitutional care insurance.
   E. Part B is a voluntary supplemental program.

The Medicare program, established in Title XVIII of the Social Security Act of 1965, provides hospital insurance and medical insurance to persons aged 65 years and older, permanently disabled persons, and persons with end-stage renal disease. Medicare has two parts: Part A (hospital insurance) covers hospital care, home care, and limited skilled nursing care and Part B (noninstitutional care insurance) covers medical care, diagnostic services, and physiotherapy. Part B is a voluntary supplemental program available to Medicare-eligible recipients.

6. The 1989 changes to Medicaid required states to provide care for children younger than 6 years and to pregnant women under 133% of the poverty level. These changes also ensure adequate access to qualified providers by which of the following?
Any state participating in the Medicaid program is required to provide the following:

- Inpatient and outpatient hospital care
- Laboratory and radiology services
- Physician services
- Skilled nursing care at home or in a nursing home for people older than 21 years
- Early periodic screening, diagnosis, and treatment (EPSDT) for those younger than 21 years
- Family planning

In 1989 changes in Medicaid required states to provide care for children younger than 6 years and to pregnant women under 133% of the poverty level. These changes also ensure adequate access to qualified provider to meet the demand of the required changes by providing reimbursement for pediatric and family nurse practitioners.

**Points Earned:** 0/1
**Correct Answer:** C
**Your Response:**

7. The concept of managed care is most often associated with processes such as utilization management, disease prevention, health promotion, wellness, and which of the following?

A. Ambulatory payment classes (APCs)
B. Consumer education
C. Retrospective payment
D. Third-party payer

The concept of managed care is based on the notion that use of costly care could be reduced if consumers had access to care and services that would prevent illness through consumer education and health maintenance. Therefore managed care uses disease prevention, health promotion, wellness, and consumer education. Managed care also makes use of utilization management that often includes using less expensive alternative services to redirect care away from hospital care, preauthorization of inpatient admissions when essential, and reducing length of stay.

**Points Earned:** 0/1
**Correct Answer:** B
**Your Response:**

8. Since 1998, nurse practitioners (NPs) and clinical nurse specialists (CNSs) are reimbursed by Medicare Part B at a rate that is ______% of physician rates for the same service.

A. 50%
B. 70%
C. 85%
D. 95%

Spurred by efforts to control the costs of medical care, effective January 1, 1998, nurse practitioners (NPs) and clinical nurse specialists (CNSs) were granted third-party reimbursement for Medicare Part B services only. The reimbursement rate was set at 85% of physician rates for the same service. The new law was an extension of previous legislation that allowed the same rate of reimbursement rate to NPs and CNSs practicing in rural areas.

**Points Earned:** 0/1
**Correct Answer:** C
Rationing of health care is a public health issue. When care is not provided, the public health system and nurses must ensure that essential clinical services are available.

9. When health care providers in the community refuse to accept Medicare clients, this implies reduced access to care and potential decreases in acceptable quality of services offered and is a form of health care rationing. Health care rationing becomes a public health and nursing issue because of which of the following?

A. Medicare reimbursement needs to be higher.
B. Proactive primary prevention orientation is cost effective.
C. Public health systems and nurses must ensure that essential clinical services are available.
D. Sufficient resources are available in the public health system to meet the unmet need.

Rationing of health care is a public health issue. When care is not provided, the public health system and nurses must ensure that essential clinical services are available.

Points Earned: 0/1
Correct Answer: C
Your Response: 

Continue
Clinical medicine focuses on the diagnosis and treatment of individuals. Epidemiology is the study of populations to monitor the health of the population, understand the determinants of health and disease in communities, and investigate and evaluate interventions to prevent disease and maintain health.

1. Clinical medicine and epidemiology differ in which major aspect?
   A. Practice focus
   B. Health monitoring
   C. Determinants of health and disease
   D. Evaluation of interventions

   Clinical medicine focuses on the diagnosis and treatment of individuals. Epidemiology is the study of populations to monitor the health of the population, understand the determinants of health and disease in communities, and investigate and evaluate interventions to prevent disease and maintain health.

   **Points Earned:** 0/1
   **Correct Answer:** A
   **Your Response:**

2. Notable events in the history have contributed to the science of epidemiology. List in order of occurrence the events that contributed to this science (earliest to most recent event).
   A. Germ theory and pasteurization developed
   B. Influence of personal characteristics, place, and time on health
   C. Anthrax threats
   D. Development of antibiotics and vaccines

   (2) Hippocrates in the *fourth century* examined health and disease in a community by looking at geography, climate, the seasons of the year, the food and water consumed, and the habits and behaviors of the people. (1) Louis Pasteur in the *nineteenth century* developed both the germ theory and pasteurization. (4) During the *twentieth century*, the Great Depression, WWII, and the development of antibiotics and vaccines were some of the major events. (3) In the *twenty-first century*, the emergence of SARS, treatment-resistant strains of TB and *Escherichia coli*, and terrorists' biological agent threats have had a major impact on epidemiology.

   **Points Earned:** 0/4
   **Correct Answer:** A, B, C, D
   **Your Response:**

3. Nurses in community health often use epidemiology because in the community it is often difficult to control the environment. Which of the following statements demonstrates an epidemiologic strategy for monitoring disease trends?
   A. A nurse in community health conducts a newly diagnosed diabetic education class.
   B. A nurse in community health investigates a breakout of whooping cough in a local middle school.
   C. A nurse in community health organizes a health fair at the community health center.
Nurses are a key part of the interdisciplinary team in community settings and often use epidemiology to look at health and disease causation and how to prevent and treat illness.

**Points Earned:** 0/1  
**Correct Answer:** B  
**Your Response:**

4. One of the basic concepts in epidemiology is the concept of risk. Risk refers to which of the following?

A. Prevalence of an event occurring  
B. Probability that an event will occur within a specified time period  
C. Population most likely to develop a disease  
D. Rate of development of new cases

Risk refers to the probability that an event will occur within a specified time period.

**Points Earned:** 0/1  
**Correct Answer:** B  
**Your Response:**

5. Twenty people attended a church picnic the previous weekend. By Monday, four individuals exhibited symptoms of food poisoning. On Tuesday, the nurse in community health records the addition of two new cases. The incidence rate would be which of the following?

A. Two new cases divided by 16 at risk  
B. Two new cases divided by 20  
C. Six cases divided by 20  
D. Four cases divided by 16

An incidence rate quantifies the rate of development of new cases in a population at risk (persons without the event or outcome of interest but who are at risk of experiencing it).

**Points Earned:** 0/1  
**Correct Answer:** A  
**Your Response:**

6. A breast cancer screening program screened 8000 women and discovered 35 women previously diagnosed with breast cancer, and 20 with no history of breast cancer were diagnosed as a result of the screening. The prevalence proportion would reflect which of the following?

A. Current and past breast cancer events in this population of women  
B. Newly diagnosed cases of breast cancer in this population of women  
C. Past breast cancer events in this population of women  
D. Population of women that had no evidence of breast cancer

The prevalence proportion is a measure of existing disease in a population at a particular time (i.e., the number of existing cases divided by the current population).

**Points Earned:** 0/1
Correct Answer: A
Your Response:

7. A business executive develops symptoms of the flu 1 day after returning by air from a cross-Atlantic business trip that ran for 2 consecutive stressful 10-hour days. This individual's development of flu symptoms illustrates the relationship between which of the following?

A. Host and agent
B. Host, agent, and environment
C. Risk and causality
D. Morbidity and disease

Epidemiologists understand that disease results from complex relationships among causal agents, susceptible persons, and environmental factors. These three elements—agent, host, and environment—are called the epidemiologic triangle. Changes in one of the elements of the triangle can influence the occurrence of disease by decreasing or increasing a person's risk of disease.

Points Earned: 0/1
Correct Answer: B
Your Response:

8. A nurse in community health who teaches an asthmatic client to recognize and avoid exposure to asthma triggers and assists the family to implement specific protection strategies such as removing carpets and avoiding pets is intervening at the level of which of the following?

A. Assessment
B. Primary prevention
C. Secondary prevention
D. Tertiary prevention

Primary prevention refers to interventions that promote health and prevent the occurrence of disease, injury, or disability. Interventions at this level are aimed at individuals and groups who are susceptible to disease but have no discernible pathology (state of prepathogenesis).

Points Earned: 0/1
Correct Answer: B
Your Response:

9. A nurse is concerned about the accuracy of PPD test in identifying cases of TB exposure for follow-up chest x-ray. The nurse's concern is addressing the validity measure of which of the following?

A. Reliability
B. Sensitivity
C. Specificity
D. Variation

Validity of a screening test is measured by sensitivity and specificity. Sensitivity quantifies how accurately the test identifies those with the condition or trait. Sensitivity represents the proportion of persons with the disease whom the test correctly identifies as positive (true positives). High sensitivity is needed when early treatment is important and when identification of every case is important.

Points Earned: 0/1
Correct Answer: B
Your Response:
Analytic epidemiology differs from descriptive epidemiology because it searches for which of the following?

A. "When" of disease patterns
B. "Where" of disease patterns
C. "Why" of disease patterns
D. "Who" of disease patterns

Descriptive epidemiology describes the distribution of disease, death, and other health outcomes in the population according to person, place, and time—who, where, when of disease patterns. Analytic epidemiology, on the other hand, searches for the determinants of the patterns observed—how and why of disease patterns.

Points Earned: 0/1
Correct Answer: C
Your Response:
1. Which of the following best supports the concept of community-oriented nursing practice? (Mark all that apply.)
   - A. Direct nursing care of individuals with tuberculosis (TB)
   - B. Hospice home care for a terminally ill individual and family
   - C. Nursing interventions to stop elder abuse
   - D. Nutrition education program for teenagers and their families
   - E. Wound care for a homebound individual

Community-oriented nursing often has been considered unique because of its target of practice. Independent of the location of practice, if the target of practice is the community as a whole, the practice is community oriented. If the target of practice is the individual or family, the practice is not community oriented even when individuals or families are living in the community. Community-oriented nursing interventions should result in changes that are intended to affect the whole community.

Points Earned: 0/3
Correct Answer: A, C, D
Your Response:

2. Migrant workers and their families that reside in a specific mobile home park during the summer months would best be classified as which of the following?
   - A. Community
   - B. Group
   - C. Setting of practice
   - D. Target population

In most definitions the concept of community includes people, place/time, and function.

Points Earned: 0/1
Correct Answer: A
Your Response:

3. A nurse in community health contacts three individuals that have had sexual encounters with an individual recently diagnosed with syphilis. What is the concept basic to community-oriented nursing practice that is best described by this intervention?
   - A. Community
   - B. Community as client
   - C. Individual as client
   - D. Partnership
When the community is the client, the results of nursing interventions should produce changes that affect the community as a whole, such as reducing the spread of sexually transmitted diseases (STDs).

**Points Earned: 0/1**

**Correct Answer: B**

**Your Response:**

4. The nurse in community health reviews the monthly and year-to-date health service use report for the local community to monitor trends as correlates of the community’s health. The nurse is viewing community health through the dimension of which of the following?

   A. Partnership  
   B. Process  
   C. Status  
   D. Structure

Community health has three dimensions: status, structure, and process. The dimension of structure would define the community’s health in terms of community characteristics such as services and resources.

**Points Earned: 0/1**

**Correct Answer: D**

**Your Response:**

5. A Latino outreach program works with the nurse in community health to train lay Latino health care workers to provide basic services and education within the local Latino community. The concept basic to community-oriented nursing practice that is best described by this intervention is which of the following?

   A. Community  
   B. Community client  
   C. Community health  
   D. Community partnerships

Partnerhips for health mean the active participation and involvement of the community or its representatives in healthful change. It involves the informed, flexible, and negotiated distribution or redistribution of power among all participants in the process of change for improved community health.

**Points Earned: 0/1**

**Correct Answer: D**

**Your Response:**

6. While conducting a community health assessment, a nurse in community health meets with local religious leaders to understand the values, norms, and perceived needs, and influence structures within the community. This process of data collection can best be described as which of the following?

   A. Data gathering  
   B. Data generation  
   C. Data interpretation  
   D. Problem identification

Data generation in a community health assessment is the process of developing data that do not already exist, through interaction with community members, individuals, families, and groups such as community knowledge and beliefs, values, goals, perceived needs, norms, problem-solving processes, power, leadership, and influence structures. This activity parallels the assessment phase of the nursing process.
5. Two useful methods of data collection are informant interviews; participation observation; windshield survey; secondary analysis of existing data; and surveys. Windshield surveys are the motorized equivalent of simple observation. While driving a car or riding public transportation, the nurse can observe many dimensions of a community's life and environment through the windshield.

7. Two nurses in community health schedule a day to ride through a low-income community to better understand the community, and its boundaries, trends, rhythm, stability, and changes that can affect the health of that community. This direct data collection method is often referred to as which of the following?

A. Composite database
B. Participant observation
C. Secondary analysis
D. Windshield survey

8. The nurse in community health identifies an elder abuse problem because of caregiver stress among families in the local community resulting from lack of caregiver support services. The next step in the community-oriented nursing process would be which of the following?

A. Analyze the community problem
B. Establish priorities
C. Establish goals and objectives
D. Identify intervention activities

9. A nurse in community health is invited to work with a coalition of churches to address safety concerns for children in the local community. The nurse provides training in problem-solving skills, manages conflict, and facilitates which implementation role?

A. Change agent
B. Change partner
C. Group leader
D. Data collector
Evaluation begins in the planning phase, when goals and measurable objectives are established and goal-attaining activities are identified. After implementation of the intervention, only the accomplishment of objectives and the effects of the intervention activities have to be assessed. The nurse will evaluate whether the objectives were met and whether the intervention activities were effective.

**10.** The nurse in community health defines goals and measurable objectives during the planning phase of a community health intervention. This also marks the beginning of which of the following?

- A. Evaluation phase
- B. Implementation phase
- C. Needs assessment
- D. Problem analysis

Evaluation begins in the planning phase, when goals and measurable objectives are established and goal-attaining activities are identified. After implementation of the intervention, only the accomplishment of objectives and the effects of the intervention activities have to be assessed. The nurse will evaluate whether the objectives were met and whether the intervention activities were effective.

**Points Earned:** 0/1

**Correct Answer:** A

**Your Response:**
Quiz Chapter 15: Program Management

Your response has been submitted successfully.

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1. A nurse in community health has determined a need for a program for teenage fathers who want to learn about childcare. The next step in the program management process would be which of the following?
   A. Conduct a survey to determine how many children the fathers have.
   B. Determine if the fathers have benefited from this type of program before.
   C. Meet with community members to form a planning body.
   D. Provide the fathers with community resources.

   The program management process is like the nursing process. One is applied to a program, whereas the other is applied to clients. After the assessment, planning for the program should occur.

   **Points Earned:** 0/1
   **Correct Answer:** C
   **Your Response:**

2. The nurse in community health is meeting with staff to systematically plan for a new outreach program. Doing so assists them to do which of the following?
   A. Assess the needs of potential outreach clients
   B. Recognize the special needs of vulnerable people in the area
   C. Identify how the problems of similar programs will not be repeated
   D. Identify the resources and activities that will help them meet their program objectives

   Systematic planning for meeting client needs assists in identifying the resources and activities that are needed to meet the objectives of client services.

   **Points Earned:** 0/1
   **Correct Answer:** D
   **Your Response:**

3. A 3-year smoking cessation program for teens has just concluded. What type of evaluation will the staff conduct?
   A. Formative evaluation
   B. Informal evaluation
   C. Ongoing evaluation
   D. Summative evaluation

   Summative evaluations assess program outcomes or are a follow-up of the results of the program activities.

   **Points Earned:** 0/1
Quality assurance audits are prime examples of formative program evaluation in health care delivery.

A community health index is a summary of the health indicators of a community such as mortality and morbidity data, which are probably cited more frequently than any other single index for program evaluation at a community level.

A program can be continued if resources exist for the program. When programs are funded as a demonstration project or funded through outside sources, programs will require ongoing funding to survive after the initial funding or timeframe for the demonstration project has ended.

4. The nurse engaging in formative program evaluation would most likely do which of the following?
   A. Conduct medical record audits for quality assurance
   B. Make a home visit before a client is discharged from the program
   C. Participate in new client evaluation
   D. Write policy for risk management

Correct Answer: D
Your Response: 

Points Earned: 0/1
Correct Answer: A
Your Response: 

5. The major evaluation source for a nurse to use to determine the effectiveness of a teen driver safety program's effectiveness is which of the following?
   A. Centers for Disease Control and Prevention (CDC) reports
   B. Community health index
   C. Recent census data
   D. Voter registration records

Correct Answer: B
Your Response: 

Points Earned: 0/1
Correct Answer: B
Your Response: 

6. A nurse in community health becomes aware that a teen smoking-cessation program offered at the health department is a demonstration project. In evaluating this program, the nurse would be concerned with which of the program's characteristics?
   A. Efficiency
   B. Impact
   C. Relevance
   D. Sustainability

Correct Answer: D
Your Response: 

Points Earned: 0/1
Correct Answer: D
Your Response: 

7. Local officials have requested a program evaluation of a comprehensive teen sex education program offered in the local schools in preparation for potential budget discussions. A nurse in community health conducts a program evaluation and determines that the teen pregnancy rate has gradually declined over the years that the program has been in place. The community is
A program evaluation may be able to determine whether a program provides better benefits at a lower cost than a similar program or whether the benefits to the clients or number of clients served justifies the costs of the program. This is a measure of the efficiency of a program. A reduction in teen pregnancies can represent significant cost savings to the overall health of the community.

8. What are the major sources of information for program evaluation? (Mark all that apply.)
   - A. Community indicators
   - B. Media reports
   - C. Program clients
   - D. Program providers
   - E. Program records

9. A nurse in community health is participating on a community service board strategic team that is currently assessing the community's strengths, the local public mental health system, the community's mental health status, and other variables. This best describes what strategic program planning model used today in the public health arena?
   - A. Assessment Protocol for Excellence in Public Health (APEXPH)
   - B. Health Evaluation Data Information System (HEDIS)
   - C. Mobilizing for Action Through Planning and Partnership (MAPP)
   - D. Planning Approach to Community Health (PATCH)

10. A nurse in community health seeks a low-cost evaluation method to learn the perspectives of the largest number of persons regarding a proposed local safe haven program for unwanted infants. The best evaluation method to meet the criteria would be which of the following?
    - A. Community forum
    - B. Focus groups
Community forums have the advantage of being low cost and capturing the perspectives of a large number of persons. Focus groups and key informant methods limit the number of persons expressing their perspectives. Surveys are expensive and technically demanding.

**Points Earned:** 0/1
**Correct Answer:** A
**Your Response:**
1. One of the members of a breast cancer survivors' group frequently disagrees with the other members. The nurse should do which of the following?
   A. Ask that member to leave the group
   B. Change the group focus to a debate format
   C. Ask the member to keep dissenting ideas to herself
   D. Determine if the disagreement is helpful to the group

   Personal differences can increase group cohesion if they support complementary functioning or provide contrasting viewpoints necessary for decision making.

   Points Earned: 0/1
   Correct Answer: D
   Your Response:

2. A support group of teenage mothers spends the initial 10 minutes of the group talking about their social lives then focuses on the care of their babies. The nurse recognizes that which of the following is true of this group?
   A. Does not need the nurse to facilitate
   B. Is committed to the task norm
   C. Is demonstrating resistance to group process
   D. Would rather have a social group

   The commitment to return to the central goals is the task norm; its strength determines the group's keeping to its work.

   Points Earned: 0/1
   Correct Answer: B
   Your Response:

3. A nurse in community health is thinking of forming a stress management group for people already in a support group for mothers with autistic children. The nurse can expect which of the following?
   A. Recruiting members from an existing group can be the most difficult type of recruiting.
   B. Some members might want to leave their support group to have time for the new group.
   C. These members will have a strong potential to influence each other.
   D. Using an existing group will ensure the best outcome.

   Established groups have a strong potential for influencing members.

   Points Earned: 0/1
4. Members of a community neighborhood task force are disagreeing about where to put the new playground. People begin raising their voices at each other. The most helpful comment for the group chairperson to make is which of the following?

A. "Let's adjourn the meeting now and plan to meet again next week."
B. "I need to ask those of you who are out of order to please leave the group."
C. "I understand that there are strong emotions about this topic, but everyone will get time to speak."
D. "I recognize that this type of behavior is to be expected when people have strong opinions, but let's focus on the playground location."

Correct Answer: C
Your Response:

5. An army nurse is in charge of a decontamination team in a disaster drill. An effective style of leadership for this task is which of the following?

A. Authoritarian
B. Collaborative
C. Democratic
D. Humanistic

Patriarchal and paternal styles of leadership are authoritarian. These styles are effective for groups such as a disaster team, in which the immediate task accomplishment or high productivity is the goal.

Correct Answer: A
Your Response:

6. A community group involves representatives from the local agencies such as board of aging, the senior center, several privately owned assisted living facilities and nursing homes, Alzheimer's Association chapter, academic medical center, and school of nursing. The goal of a group is to do which of the following?

A. Collectively explore areas of common interest
B. Control for media misrepresentation
C. Foster separate positions to maintain autonomy
D. Strategize to avoid change to current systems

A community working alliance or coalition brings together diverse interest groups who share a common interest in potential, actual, or perceived threat to community health. These groups are both units of community analysis and vehicles for change.

Correct Answer: A
Your Response:
7. Which of the following are examples of community groups that nurses in community health can work with to make needed health changes? (Mark all that apply.)

A. Neighborhood Watch  
B. Better Business clubs  
C. School boards  
D. Antique auto club  
E. Lions Club

8. Nurses are frequently asked to participate in a community group to "help address a problem." The nurse can best serve the group by which of the following?

A. Elevating the group's goal and objectives to a higher purpose  
B. Settling group conflict by refereeing  
C. Taking the position of group leader  
D. Utilizing the same interventions used in individual groups

9. Individuals live within a social structure of significant others that provide the context in which values, beliefs, and attitudes are formed. Using groups to promote the health of individuals is effective because which of the following is true of people?

A. They consider the responses of others in decisions affecting their welfare.  
B. They learn what to do in their early, formative years.  
C. They do what the health care provider tells them to do.  
D. They are basically indecisive and easily influenced by authority.

10. During a group discussion, one member of the group reacts to another member who is speaking about general behaviors that are offensive in the group setting by stating, "You are accusing me of being disruptive." The group members intervene by stating that the group should address
The group norm that relates to members' perceptions of reality is the reality norm. Through socialization, individuals learn how to gather information, assign meaning, and react to the situation in a way that satisfies the whole group's needs, and group participation rules are defined. This best defines what group norm?

A. Maintenance  
B. Reality  
C. Task  
D. Culture

The group norm that relates to members' perceptions of reality is the reality norm. Through socialization, individuals learn how to gather information, assign meaning, and react to situations in a way that satisfies needs. Individuals look to others to reinforce or to challenge and correct their ideas of what is real.

Points Earned: 0/1  
Correct Answer: B  
Your Response: Continue
1. An urban city uses the local media (radio and TV) and local newspapers to post ratings of air quality on days when the air quality is poor. This notification is directed toward the elderly, the very young, and those with chronic breathing problems. These groups are an example of which of the following?
   A. Disenfranchised populations
   B. Disadvantaged populations
   C. Vulnerability
   D. Vulnerable populations

Vulnerable populations are those groups who have an increased risk to develop adverse outcomes. A vulnerable population group is a subgroup of the population that is more likely to develop health problems as a result of exposure to risk or to have worse outcomes from a health problem than the rest of the population. The risks are often cumulative risks from environmental hazards, personal behavior, or biological or genetic makeup.

X Points Earned: 0/1
Correct Answer: D
Your Response:

2. A poor elderly Native Alaskan woman lives in a small, remote village near the Canadian border. She has been diagnosed with hypertension and diabetes but rarely makes it to the regional clinic in a distant town for checkups. This woman is most at risk for which of the following?
   A. Disenfranchisement
   B. Health disparities
   C. Loss of independence
   D. Resilience

Vulnerable populations often are more likely than the general population to suffer from health disparities (i.e., wide variations in health services and health status among certain population groups). The less-than-adequate care experienced by these groups can be defined by age, gender, race or ethnicity, education or income, disability, geography, or sexual orientation. Members of racial or ethnic minority populations that have been targeted for initiatives to reduce their higher-than-average burden from poor health are African-Americans, Hispanics, Native Americans, Native Alaskans, and Asian-Pacific Islanders. Race and ethnicity are not thought to be causes of disparities at this time, but poverty and low education levels are more likely to contribute to health disparities.

X Points Earned: 0/1
Correct Answer: B
Your Response:

3. A young adult with a history of prior parental abuse has recently been diagnosed with a stress-
related illness. The individual works at a local convenience store, earning a little more than the federal poverty level but receives no health benefits. This individual is predisposed to the development of which of the following?

A. Poverty  
B. Resilience  
C. Risk  
D. Vulnerability

Some predisposing factors to the development of vulnerability are poverty, being uninsured or underinsured, age (both ends of the age continuum), changes in normal physiology, and life experiences, especially early life experiences.

4. A nurse participates on a community planning board addressing housing strategies and future community needs. The nurse is aware that the community has a population of homeless families that are served by local churches. The nurse is also aware that this agricultural community relies on migrant workers during seasonal harvesting of local produce. The nurse is concerned that these disenfranchised populations may be which of the following?

A. Complicated to address  
B. Costly to serve  
C. Invisible to the community  
D. Resilient to the community

Disenfranchisement refers to a feeling of separation from mainstream society. Groups such as the poor, the homeless, and migrant workers are “invisible” to society as a whole and forgotten in health and social planning. Vulnerable populations are at risk for disenfranchisement because their social supports are generally weak as are their links with formal community organizations.

5. A nurse volunteering at the free clinic in her community informs a client seeking treatment for hypertension that the family's children may qualify for enrollment in the State Children's Health Insurance Program (SCHIP). The nurse's intervention can reduce health disparities for these vulnerable children by making a referral to a program that provides which of the following?

A. Direct financial subsidies for children  
B. Funds to insure currently uninsured children  
C. Outreach efforts to enroll eligible children in Medicaid  
D. Prospective payments for child services

Title XXI of the Social Security Act, enacted in 1983, provides for the State Children's Health Insurance Program (SCHIP) to provide funds to insure currently uninsured children. Individuals receiving services at a free clinic are typically the uninsured working poor. Children in these families may qualify for the SCHIP program. This program addresses health disparities.
6. The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 creates a prescription drug benefit as Part D of Medicare that can be purchased through private companies with their own formularies. This design benefits individuals in the low-income category but may provide only limited relief for individuals earning more than the low-income level. This new benefit is decreasing health disparities by addressing the predisposing vulnerability factor of which of the following?

A. Disadvantaged populations
B. Disenfranchised populations
C. Resilience
D. Underserved populations

Medicare Part D insurance can be purchased through private companies, each with their own formulary. People in the low-income category receive clear benefits (no premium or deductible and very limited copay). This assists about 13 million people that fall into this poverty category. Those earning above the poverty level will receive some (75%) coverage to $2250 in annual drug costs. There is no coverage between $2251 and $5100 in annual drug costs. Annual costs in excess of $5100 are covered at 95%. The insurance provides the most relief for those individuals with the most limited resources (poverty category) that are considered disadvantaged. This reduces health disparities.

Points Earned: 0/1
Correct Answer: A
Your Response:

7. The most critical strategy that can be used by nurses in community health to improve the health status of migrant workers that spend only a few months in a geographic location is to do which of the following?

A. Conduct a comprehensive assessment and formulate a plan for treatment
B. Establish a long-term trust relationship to prevent disappointment
C. Schedule appointments for appropriate immunizations for the children
D. Use every opportunity to teach about preventive health care

Focus on prevention. Use every opportunity to teach about preventive health care.

Points Earned: 0/1
Correct Answer: D
Your Response:

8. Factors that may contribute to vulnerability are which of the following? (Mark all that apply.)

A. Exercise habits
B. Crime
C. Peeling lead paint
D. Social isolation
E. Illiteracy

Individual and social factors may contribute to vulnerability. Risks come from the environment, personal behaviors, or biological or genetic makeup. Some risks are related to social factors such as homelessness, neighborhood crime, abuse, and violence. Others are related to isolation, geography, language, and education barriers.

Points Earned: 0/5
Correct Answer: A, B, C, D, E
Your Response:
Advocacy refers to those actions one undertakes on behalf of another. Vulnerable populations may require the active participation of the nurse to ensure access to available services. Because of the high degree of stressors in vulnerable populations, negotiation of the maze of local health care services may increase their vulnerability. Nurses should support vulnerable populations to increase their resilience.

9. A nurse in community health directly contacts a mammography clinic to arrange an appointment for a female migrant worker with limited English language abilities. The nurse communicates with the client through an interpreter to ensure that the client's appointment is scheduled to meet her needs and the client understands the procedure to be performed. This strategy used with vulnerable populations can best be described as which of the following?
   A. Advocacy
   B. Culturally competent care
   C. Partnership
   D. Social justice

   Advocacy refers to those actions one undertakes on behalf of another. Vulnerable populations may require the active participation of the nurse to ensure access to available services. Because of the high degree of stressors in vulnerable populations, negotiation of the maze of local health care services may increase their vulnerability. Nurses should support vulnerable populations to increase their resilience.

   Points Earned: 0/1
   Correct Answer: A
   Your Response:

10. Health education is often used as a strategy in working with vulnerable populations. A group's or individual's benefits of health education can be affected greatly by which of the following?
   A. Cycle of dependency
   B. Health literacy
   C. Level of income
   D. Race and ethnicity

   A new concern for public nurses and nurses in community health is whether the populations with whom they work have adequate health literacy to benefit from health education. It may be necessary to collaborate with an educator, an interpreter, or an expert in health communications to design messages that vulnerable individuals and groups can understand and use.

   Points Earned: 0/1
   Correct Answer: B
   Your Response:
1. When determining whether a geographical area is rural or urban, the nurse should recognize which of the following?

   A. Rural and urban areas by relative nature occur on a continuum.
   B. Rural regions have fewer than six persons per square mile.
   C. Rural residents feel isolated.
   D. Rural areas are recreational, retirement, or resort communities.

2. A nurse in community health is working in a rural setting. In planning for programs to address the population's needs, the nurse should be aware that, in general, rural populations do which of the following?

   A. Engage in physical activity during leisure time
   B. Engage in preventive behaviors
   C. Perceive their overall health as less favorable
   D. Use seat belts

3. When using the health measure of death rates for working-age adults, the nurse could expect to find the highest rates in which areas?

   A. Large metropolitan areas
   B. Most rural and highly populated urban areas
   C. Most rural and suburban areas
   D. Small suburban and all urban areas
Death rates for working-age adults are higher in the most rural and the most highly populated urban areas.

**4.** Within a state, counties designated as health professional shortage areas (HPSAs) tend to have a high proportion of racial minorities and fewer specialists. This factor may explain conflicting data within a state related to which of the following?

A. Adult immunization rates  
B. Chronic respiratory illnesses rates  
C. Maternal/infant morbidity rates  
D. Obesity rates

**Points Earned:** 0/1  
**Correct Answer:** B  
**Your Response:**

HPSA areas tend to have a high proportion of racial minorities and fewer specialists, such as pediatricians, obstetricians, and gynecologists.

**5.** Rural residents appear to have a more persistent, endemic level of depression. The factors that may contribute to this level of depression may be related to which of the following? (Mark all that apply.)

A. Crisis intervention  
B. Gaps in continuum of mental health services  
C. Sufficient number of mental health services  
D. Tolerance for destructive coping behaviors  
E. Trust in the health care professionals

**Points Earned:** 0/2  
**Correct Answer:** B, D  
**Your Response:**

There appears to be more persistent, endemic level of depression among rural residents. Factors that relate to this level of depression are high rate of poverty, economic difficulties, economic recession, geographical isolation, insufficient number of mental health professionals, delays in seeking treatment, tolerance of destructive coping behaviors, lack of trust in mental health professionals, and gaps in the continuum of mental health services.

A migrant farmworker is a person whose principal employment is in agriculture on a seasonal basis, who has been employed within the last 24 months, and who establishes for the purpose of such employment a temporary abode. Most are either American citizens or are authorized to work in the United States. Seasonal farmworkers work cyclically in agriculture but do not migrate.
**7.** The local hospital emergency room has recently experienced an increase in gastroenteritis cases among migrant farmworkers. The local health department is informed of this rise in cases and schedules a case mapping of what local places?

   A. Bars frequented by migrant workers
   B. Farm fields employing migrant workers
   C. Housing for migrant workers
   D. Restaurants frequented by migrant workers

**8.** An undocumented migrant farmworker has been diagnosed with tuberculosis (TB). The local health department initiates treatment by dispensing the first month's supply of medication and educates the client on the need to continue treatment for 6 to 12 months. A major challenge that the client may face related to ongoing treatment for TB is which of the following?

   A. Affordable care
   B. Discrimination
   C. Fragmented services
   D. Language barriers

**9.** A school nurse is asked to assess a 13-year-old child because of excessive drowsiness and inattention in class. The nurse determines that this is a child of migrant workers in a local produce farm. Based on the nurse's knowledge of migrant worker families, the nurse should first explore the child's potential involvement in which of the following?

   A. Delinquent behavior
   B. Drug use
   C. Field work
   D. Migrant Education Program
Nurses working in rural areas, including those working with migrant farmworkers, have opportunities to use many skills of nursing in community health. One of the first and most important is that of prevention. Given the barriers to receiving health care in rural areas, the ideal situation is to prevent health disruptions whenever possible. Case management and community-oriented primary health care are two effective models to address some of those deficits and resolve rural health disparities.

10. A district health nurse is assigned to two rural counties in the state. To achieve the best outcomes possible in reducing the health disparities for the large number of frail elder clients in the two counties, the nurses should consider using what community-oriented nursing skill?

A. Assessment  
B. Case management  
C. Geriatrics  
D. Tertiary prevention

Nurses working in rural areas, including those working with migrant farmworkers, have opportunities to use many skills of nursing in community health. One of the first and most important is that of prevention. Given the barriers to receiving health care in rural areas, the ideal situation is to prevent health disruptions whenever possible. Case management and community-oriented primary health care are two effective models to address some of those deficits and resolve rural health disparities.

Points Earned: 0/1  
Correct Answer: B  
Your Response: 
Quiz Chapter 23: Homelessness, Poverty, Mental Illness, and Teen Pregnancy

Your response has been submitted successfully.

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1. A recent movie release portrays a criminal as an African-American female drug user whose abusive boyfriend has two children by different women, living in the riot-torn inner city of a large metropolitan area with high levels of poverty and unemployment. This best demonstrates what factor that influences poverty?

   A. Cultural
   B. Environmental
   C. Political
   D. Social

Cultural attitudes are the beliefs and perspectives that a society values. Perspectives about individual responsibility for health and well-being are influenced by the prevailing cultural attitudes. The media communicate thoughts and attitudes through literature, film, art, television, and newspapers.

X Points Earned: 0/1
Correct Answer: A
Your Response:

2. A nurse in community health working in an inner-city clinic with high poverty and unemployment rates recognizes the need for programs for pregnant women because these women often receive late or no prenatal care and deliver which of the following?

   A. At home
   B. Full term
   C. Identical twins or triplets
   D. Low-birthweight babies

Poor pregnant women are more likely than other women to receive late or no prenatal care and to deliver low-birthweight babies, premature babies, or babies with birth defects.

X Points Earned: 0/1
Correct Answer: D
Your Response:

3. A case management nurse for a locally funded program for special needs children is increasingly concerned about a recent referral for a 1-year-old child with a congenital illness, who is residing in poverty-stricken community. The nurse knows that this child may be at higher risk for the most harmful effects of poverty, including which of the following?

   A. Developmental delays
Young children (newborn to age 5 years) are at greater risk for the most harmful effects of poverty, especially in regard to adequate nutrition and brain development.

Points Earned: 0/1
Correct Answer: A
Your Response:

For the homeless, health care is usually crisis oriented and sought in emergency rooms. The most difficult challenge for nurses treating this vulnerable population is to recognize which of the following client traits?

A. Limitations in following treatment protocols
B. Limited number of transient treatment facilities
C. Transition to persistent poverty
D. Use and abuse of tobacco, alcohol, and illicit drugs

Points Earned: 0/1
Correct Answer: A
Your Response:

It is estimated that 1 in 15 males becomes a father during their teen years. The nurse should be aware that many young men facing paternity have specific challenges, such as which of the following? (Mark all that apply.)

A. Acting as though they are interested when they are disinterested
B. Avoiding prenatal care involvement
C. Desiring and needing to be involved with their children
D. Rejection by the young woman's family
E. Rejection of their role as a father

Points Earned: 0/2
Correct Answer: C, D
Your Response:

The nurse must ask about violence at each prenatal and postpartum visit, especially with vulnerable populations (such as teenagers), as well as observe for signs of violence on each visit. The nurse should be aware that the peak for postpartum intimate partner violence may be observed at various times by ethnic group such as which of the following?
Violence that begins in pregnancy may continue for several years after, with increasing severity. Variations by ethnicity have also been observed during this postpartum period: intimate partner violence may peak at 3 months postpartum among African-American and Hispanic/Latino new mothers and at 18 months for white mothers.

A. Six months for white mothers  
B. Ten months for white mothers  
C. Three months for African-Americans and Hispanic/Latino mothers  
D. Twelve months for African-Americans and Hispanic/Latino mothers

7. A nurse in community health is following a pregnant teenager who attends school. The nurse plans to discuss self-care activities that will be important for the teen during her pregnancy. The discussion should include which of the following?
   A. Carrying heavy book bags  
   B. Changing to home education  
   C. Decreasing fluid intake to avoid nausea  
   D. Keeping up her grades

If teens return to school, it is important for the nurse to discuss these needs: (1) using the bathroom frequently, (2) carrying and drinking more fluids or snacks to relieve nausea, (3) climbing stairs and carrying heavy book bags, (4) fitting comfortably behind stationary desks.

8. The goal of deinstitutionalization was to improve the quality of life for people with mental disorders by providing services in the communities where they lived rather than in large institutions. At what program level did this change in locus of care fail?
   A. Assessment level  
   B. Design level  
   C. Evaluation level  
   D. Implementation level

Although deinstitutionalization was noble in conception, it was bankrupt in implementation. Families and communities were not prepared to take on the treatment responsibilities they had to assume, and little education was available. Care settings such as nursing homes, personal care settings, supervised apartments, rooming houses, single-occupancy hotels, and other similar settings were either not available or not educated or prepared to deal with this population.

9. A hospice nurse is working with a cancer patient and his family. The client’s 7-year-old son has developed recent school and peer problems. Understanding the risk for disruption of normal development, the nurse plans to first screen the child for which of the following?
   A. Developmental disorders  
   B. Mental health problems
C. Parental neglect
D. Violence potential

Children are at risk for disruption of normal development by biological, environmental, and psychosocial factors that impair their mental health, interfere with their education and social interactions, and keep them from realizing their full potential as adults. Children can develop a depression or behavior problems in response to an actual or potential loss.

10. A nurse in community health conducts quarterly mental health promotion and depression screening programs at the local senior center. The nurse is aware that older adults are at increased risk for developing depression. Using such an intervention also addresses what trait of older adults?

A. Dependence on their primary care provider
B. Normal sensory losses
C. Reduced social contacts
D. Underutilization of the mental health system

Older adults underutilize the mental health system and are more likely to be seen in primary care or to be the recipient of care in institutions. The nurse can reach them by organizing health promotion programs through senior settings or other community-based settings.

Points Earned: 0/1
Correct Answer: D
Your Response:
A health care approach to ATOD problems is the health reduction model. This is a new public health model that nurses can utilize to treat individuals, families, and communities. To develop a therapeutic attitude, the nurse must realize that any drug can be abused, that anyone may develop drug dependence, and drug addiction can be successfully treated.

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1. For nurses to develop a therapeutic attitude toward the treatment of alcohol, tobacco, and other drug (ATOD) problems in the community, the nurse must realize drug addiction can be successfully treated, anyone may develop drug dependence, and which of the following?

   A. Any drug can be abused.
   B. Illegal drugs are the category of abused drugs.
   C. Prescription drugs rarely cause dependence.
   D. Over-the-counter (OTC) drugs are "good drugs."

   A health care approach to ATOD problems is the health reduction model. This is a new public health model that nurses can utilize to treat individuals, families, and communities. To develop a therapeutic attitude, the nurse must realize that any drug can be abused, that anyone may develop drug dependence, and drug addiction can be successfully treated.

   **Points Earned:** 0/1
   **Correct Answer:** A
   **Your Response:**

2. A long-distance truck driver being assessed by a nurse in a community-based clinic states, "I smoke three packs of cigarettes a day. I use coffee and diet pills from the drugstore to stay awake on the road. That makes it difficult to sleep when I do pull over, so I use a prescription sleeping pill from my doctor to sleep for 4 hours. It's giving me palpitations." The nurse's assessment should include a diagnosis of which of the following?

   A. Drug abuse
   B. Drug addiction
   C. Substance abuse
   D. Adverse drug reaction

   Substance abuse is the use of any substance that threatens a person's health or impairs social or economic functioning. This definition is more objective and universal than the government's definition of drug abuse, which is the use of a drug without a prescription or any use of an illegal drug.

   **Points Earned:** 0/1
   **Correct Answer:** C
   **Your Response:**

3. The nurse is evaluating a new home health client for ongoing management at home after back surgery for a traumatic injury. The client has been receiving a morphine-based drug for long-term pain management over the past 6 months. The nurse's assessment should include a plan for addressing which of the following client traits?
A. Drug dependence
B. Drug addiction
C. Substance abuse
D. Opiate addiction

Drug dependence is a state of neuroadaptation caused by the chronic, regular administration of a drug. This is a physiological change in the central nervous system; therefore the drug must be continued to prevent withdrawal symptoms. The morphine should be gradually tapered rather than abruptly stopped to prevent withdrawal symptoms.

4. Marijuana (*Cannabis sativa or C. indica*) is the most widely used illicit drug in the United States. The nurse should be aware that marijuana can cause which of the following? (Mark all that apply.)
   A. Decreased appetite
   B. Development of tolerance
   C. Highly toxic
   D. Lacking in quality control
   E. Safe therapeutic agent

Compared with the other psychoactive drugs, marijuana has little toxicity and is one of the safest therapeutic agents known. However, because of its illegal status, there is little quality control, and a user may consume contaminated marijuana that may cause problems. Tolerance can develop in addition to physical dependence; however, withdrawal is benign.

5. An eighth grader is brought to the emergency room by a parent for unusual skin blistering and discoloration around the nose and lips. The parent states the child will not state what caused the injury. The nurse should consider the possible use of which of the following?
   A. Crystallized methamphetamine
   B. Inhalants
   C. MDMA (Ecstasy)
   D. PCP (phencyclidine)

Inhalants are often among the first drugs that young children use. Recent surveys show that about 6% of American children have tried inhalants by the fourth grade, with use peaking around the eighth grade. Dangers with administration of gases increase when inhaling from pressurized tanks because the gas is very cold and can cause frostbite to the nose, lips, and vocal cords.

6. The harm-reduction approach to substance abuse focuses on health promotion and disease prevention. A primary prevention strategy that can be used by the nurse to address substance abuse under this approach is to do which of the following?
   A. Assess for recreational drug use
Nurses are experts in medication administration and understand the potential dangers of indiscriminant drug use and the inherent inability of drugs to cure problems. Nurses can influence the health of clients by destroying the good drugs versus bad drugs myth. This means (1) teaching clients that no drug is completely safe and that any drug can be abused and (2) helping persons learn how to make informed decisions about their drug use to minimize potential harm.

The role of the nurse in secondary prevention is to accurately assess the client to identify substance abuse and plan appropriate interventions. A progression in drug-use patterns and related problems warn about the possibility of addiction. Denial is a primary symptom of addiction and can be demonstrated by the following: lying about use; minimizing use patterns; blaming or rationalizing; intellectualizing; changing the subject; using anger or humor; and “going with the flow” (agreeing that a problem exists, stating behavior will change, but not demonstrating any behavior change).

Methadone maintenance is a harm-reduction intervention because it reduces deviant behavior (needle-sharing practices) and introduces addicted persons to the health care system. This may ultimately lead to total abstinence. The advantages of methadone are that it is long acting, effective orally, and inexpensive with few known side effects.

A client is back for his follow-up appointment and says to the nurse: "I know. I know. I drink too much, but the job is so stressful that I need to find a way to unwind at the end of the day. You would too!" The nurse should recognize that this is a primary symptom of addiction known as which of the following?

A. Denial  
B. Social drug use patterns  
C. Setting variable  
D. Coping

Methadone maintenance for heroin addiction is a harm-reduction strategy because it reduces deviant behavior and which of the following?

A. Avoids costly residential programs  
B. Introduces addicted persons to the health care system  
C. Prevents relapse  
D. Provides total abstinence

Indiscriminate use of "good drugs" has caused more health problems from adverse reactions, drug interactions, dependence, addiction, and overdoses than the use of "bad drugs." The high-risk population group that most experiences the negative consequences identified above is which of the following?

A. Adolescents
Older adults consume more prescribed and OTC medications than any other age group. Problems with alcohol consumption, including interactions with prescribed and OTC drugs, far outnumber any other substance abuse problem among older adults. Factors such as slowed metabolic turnover of drugs, age-related organ changes, enhanced drug sensitivities, a tendency to use drugs over longer periods, and a more frequent use of multiple drugs all contribute to greater negative consequences from drug use among older adults.

Drug addiction is often a family disease. People in close relationship with the addict often develop unhealthy coping mechanisms to continue the relationship. This is known as codependency, a stress-induced preoccupation with the addicted person’s life, leading to extreme and excessive concern with the addict. Codependents try to meet the addict’s needs at the expense of their own. Codependency may underlie medical complaints and emotional stress seen by health care providers such as ulcers, skin disorders, migraine headaches, chronic colds, and backaches.

B. Injection drug users
C. Older adults
D. Pregnant women

10. A nurse in community health is following an older woman who complains frequently of migraine headaches, backaches, and GI disturbances. During a recent visit, the woman states that her adult son now lives with her. He was recently let go from his job. He enjoys hanging out with his old buddies. When he feels better, he will look for a new job. Despite the added burden she really enjoys having her son around again. The nurse should explore this further to determine if the family is which of the following?

A. Abusive
B. Codependent
C. Coping
D. Estranged
1. Violence is a major public health problem in our communities that causes premature mortality and life-long disability. Violence-related morbidity is a significant factor in which of the following?

   A. Community deterioration
   B. Health care costs
   C. Juvenile delinquency
   D. Population density

   Violence is a public health problem that has emotional and physical effects. Violence is the major cause of premature mortality and lifelong disability, and violence-related morbidity is a significant factor in health care costs. Violent behavior is predictable and therefore it is preventable, especially with community action.

2. A large industrial plant has recently laid off a significant portion of its workforce because of cutbacks in production. The occupational health nurse proposes education sessions with the remaining employees about effective strategies for managing stress during economic downturns. This suggestion to management is based on the nurse’s understanding that increases in aggression and violence at home and work may be triggered by which of the following?

   A. Competition
   B. Unemployment
   C. Survivor guilt
   D. Work-related stress

   During economic downturns, people hesitate to give up jobs that are frustrating, boring, or stressful. Family needs may necessitate that individuals keep the hated job, which promotes a feeling of being trapped and resentment toward family members who are dependent on that job.

3. Larger class sizes mean that teachers are often spending more time and energy monitoring and disciplining children than challenging and stimulating them to learn. Corporal punishment, still used within many schools, reinforces the child's tendency to strike out at others to resolve issues. These two statements would support that violence is primarily which of the following?

   A. Learned behavior
   B. Innate aggressive drive
Unfortunately, schools contribute to violence through the use of corporal punishment and the need for teachers to function as monitors and disciplinarians instead of teachers. In these scenarios, violence is a learned behavior. However schools can also be positive contributors to nonviolence through classes that teach peaceful conflict resolution and discuss date rape and potential sexual abuse.

4. A nurse in community health is working with a parent whose spouse has been called up for active duty in the military reserve. The family is experiencing financial strain as a result of decreased income. The extended family lives at a distance. The parent is struggling to manage the family in the spouse’s absence. The family consists of four children (three preschool and one preteen). The preteen is very bright in school and actively involved in community and school activities. In this situation, it would be important for the nurse to further explore the potential for which of the following?
   A. Child abuse
   B. Depression
   C. Intimate partner abuse
   D. Parent’s resentment of the preteen

Parents with low social support, a tendency toward depression, multiple stress factors, and a history of abuse are at risk for abusing their children.

5. A nurse in community health conducting a home visit notices a 4-year-old girl sitting on a stool in an adjoining room. The girl is quiet and withdrawn, rarely makes eye contact, and does not leave the room. The nurse proceeds to ask about the child and attempts to engage the child in conversation. The nurse is assessing for what indicators of child abuse?
   A. Emotional abuse
   B. Emotional neglect
   C. Physical abuse
   D. Physical neglect

Neglect is more difficult to assess than abuse. Emotional neglect is the omission of basic nurturing, acceptance, and caring essential for healthy personal development. These children are largely ignored or in many cases treated as a non-person. It is difficult for a neglected child to feel a great deal of self-worth because the parents have not demonstrated that they value the child. Astute observations of children, their homes, and the way they relate to their caregivers can provide clues of neglect.

6. A father brings his stepdaughter to the family clinic for an immunization update prior to the new school year. The nurse notices the interaction between a young girl and her stepfather. The child appears tense and cautious and wraps her arms around herself in a protective manner. The child
Incest occurs in all races, religious groups, and socioeconomic classes. A typical pattern is as follows. The daughter involved in the parental incest is usually 9 years of age at the onset and is often the oldest or only daughter. The father seldom uses force. He is more likely to use threats, bribes, intimidations, or misrepresentation of moral standards. These children may have difficulty in social situations and demonstrate avoidance behaviors; they may also attempt to cover or protect their bodies. Therefore the nurse must be aware of these indicators to conduct an appropriate assessment and plan appropriate interventions.

The abuse of female partners has the most serious community health ramifications because of the greater prevalence, the greater potential for homicide, the effects on the children in the household, and the more serious long-term emotional and physical consequences. As a woman tries to leave the abusive relationship, the risk of homicide increases, creating a catch-22. A nurse encountering severe abuse needs to consider the safety of the woman and her children as the priority. Rough handling by caregivers can lead to bruises and bleeding into body tissues because of the fragility of the older client's skin and vascular systems. It is often difficult to determine if the injuries of older adults result from abuse, falls, or other natural causes. Careful assessment both through observation and discussion can help determine the cause of injuries so that proper plans for interventions can be made.

7. All adults should be assessed for violence in their primary intimate relationships. The abuse of female partners has the most serious community health ramifications because of the greater prevalence, the more serious long-term emotional and physical consequences, and the greater potential for which of the following?
   A. Fleeing to a shelter
   B. Homicide
   C. Possessive behavior
   D. Spontaneous abortion

8. The nurse at the adult day care center notices bruises on the wrists of a 90-year-old client. Besides the physical assessment of the client, the nurse should do which of the following?
   A. Confront the daughter when she arrives to pick the father up.
   B. Discuss the findings with the caregivers to determine the cause of the injuries.
   C. Educate the staff about indications of elder abuse.
   D. Make a referral to the primary care provider for follow-up.
9. In giving care to the survivors of violence, the nurse should demonstrate respect and caring for all family members, insist that safety is the first priority, and demonstrate intolerance for behavior of violence. Additionally, the nurse should be which of the following?

A. Absolutely honest about what will be reported and what the family can expect
B. Authoritarian in approach of the problem
C. Cautious in reporting unconfirmed reports of violence
D. Sincere in concern for the victims

The principles of giving care to families who have experienced violence include the following: intolerance of the violence; respect and caring for all family members; safety as the first priority; absolute honesty; and empowerment. The nurse must use a nurse-family partnership rather than a paternalistic or authoritarian approach.

Points Earned: 0/1
Correct Answer: A
Your Response:

10. A nurse new to the community evaluates the resources available to a father that has sought help with his escalating abuse and threats of violence to his family. After making the referral, the nurse approaches the local newspaper about running a series on the nature and extent of human abuse in the community. This strategy would do which of the following?

A. Advocate for government programs to treat survivors
B. Demonstrate the provider's commitment to address the need for services
C. Increase awareness of community resources to address violence and abuse
D. Increase the number of individuals identified as perpetrators

Referral is an important component of tertiary prevention. Nurses should know about available community resources for abuse victims and perpetrators. If attitudes and resources are inadequate, it is often helpful to work with local radio and television stations and newspapers to provide information about the nature and extent of human abuse as a community health problem. People do not seek services early in an abusive situation because they simply do not know what is available to them.

Points Earned: 0/1
Correct Answer: C
Your Response:
1. Public health programs are designed with the goal of improving a population’s health status. Which of the following statements apply to public health? (Mark all that apply.)

A. Branch of medicine
B. Funded at a local level
C. Health status monitored at the state level
D. Implemented at the federal level
E. Organized community approach

2. As a result of recent social policy changes, public health agencies have shifted their emphasis from a focus on primary health care services to a focus on core public health activities because of new and reemerging public health issues. A critical aspect of ensuring the public health system’s ability to address these issues is which of the following?

A. Additional regulations
B. Adequate funding
C. Bioterrorism strategy
D. Media coverage

3. The nurse in community health serves as a bridge between the at-risk populations and the community’s health care resources. This role is based on the nurse’s responsibility to do which of the following?
A. Collect and analyze data on programs.
B. Ensure that all populations have access to affordable, quality health care.
C. Monitor and assess critical health status indicators.
D. Provide evidence-based use of resources.

Nurses in community health retain responsibility for ensuring that all populations have access to affordable, quality health care services. Despite the shift in focus in recent years from a direct service model, nurses in community health may provide direct services to populations that are underserved/not served and conduct case management activities to link at-risk populations to appropriate community services.

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4. A current dramatic trend in nursing in community health is which of the following?
   A. Clinical surveillance
   B. Shifts in research focus
   C. Special needs programs
   D. Vulnerable population shifts

Although vulnerable populations have always benefited from nursing services, the populations that are most acutely in need of public health services have changed dramatically over the past two decades (i.e., young women and their partners that have risky behaviors and put their pregnancy or children at high risk for injury or abuse).

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5. A major emerging public health issue facing nursing in community health is which of the following?
   A. Bioterrorism
   B. Health literacy
   C. Health ministries
   D. Welfare reform

The major emerging issues in public health that affect nursing in community health are increased rates of drug-resistant community-acquired pathogens; social issues (e.g., welfare reform); health care disparities; behaviorally influenced issues (e.g., chronic disease, violence, substance abuse); and access to service issues (e.g., gaps in service).

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6. The nurse in community health prepares a community assessment for the local planning commission and presents data that indicate an increase in violence among young children and teens within the community. The nurse projects the cost of care related to violence in ER visits, treatment of stabbing and gunshot wounds, and rehabilitation. The nurse also produces information on school absenteeism, graduation rates, teenage rape, and pregnancy. The planning commission creates a task force to explore the community outlets for child and teen recreation and the current community education programs available to families and students related to violence prevention, negotiation, and mediation. This can best be described as an example of which of the following?
Partnerships and collaborations between groups are much more powerful in making change than an individual client and nurse working alone. Nurses can facilitate an appropriate community response by providing information in a manner that stimulates community action to address specific problems at a population level to ultimately improve the health care status of the community.

Many of the core public health competencies are provided by nurses who have learned these skills in the workplace while gaining knowledge through years of practice. Rapid changes in public health are providing challenges to nurses in that neither the time nor the staff is available to provide as much on-the-job training as is needed to learn or upgrade skills and knowledge of staff. The ability to provide a strong public health system is dependent on preparing nurses at the baccalaureate and master's level.

The federal government sets the agenda for the Healthy People 2010 objectives and provides funding initiatives to encourage states to improve the health status of their populations. State health departments play a key role in implementing the Healthy People 2010 objectives by setting the goals, using the objectives as a framework. Knowing that health departments do not have the resources to accomplish these goals independently, collaboration is essential to quality nursing practice and is encouraged at the local level with existing groups. Communities establish coalitions to address selected objectives, based on community needs, to include all of the local community stakeholders. The public health team includes the local, state, and federal agencies and the private sector, each with its own variable reason (stakeholders) for participation yet striving for an agreed-upon goal of increasing the health status of the nation.
9. The role/activities of the nurse in community health that was most important during the disasters of September 11, 2001, and the subsequent anthrax bioterrorism attack was which of the following?
   A. Assessor
   B. Client-level teaching
   C. Enhanced surveillance activities
   D. Free and low-cost immunization

The communicable disease role is one of the most important roles for nursing during disasters. During the September 11, 2001, airplane attacks and the October 2001 anthrax attacks, nurses at the federal, state, and local levels immediately implemented active enhanced surveillance activities. Information about communicable diseases seen at the local level was passed on to the state public health agency and finally the CDC. At each step, the data were analyzed for evidence of unusual disease trends.

**Correct Answer:** C

**Your Response:**

10. A new role for public health that is used in widespread public emergencies is which of the following?
   A. Communicable disease control
   B. First responder
   C. Incident commander
   D. Professional triage

Although communicable disease control is a core public health service, the role of public health as incident commander in a widespread public health emergency is a new role.

**Correct Answer:** C

**Your Response:**