Edelman and Kudzma's Canadian Health Promotion Throughout the Life Span (Canadian) 2nd edition Luctkar-Flude Test Bank

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Test Bank - Chapter 01

Q1: How is disease defined?

A. The failure of a person's adaptive mechanisms to counteract stimuli and stresses adequately, resulting in functional or structural disturbances (Correct)

B. Like illness, a component of the struggle for balance in the bodily systems

C. The failure of a person's bodily systems in responding to stresses, resulting in a hormonal imbalance

D. The assault by stimuli and stress on the body's core defence systems

Rationale: Disease may be defined as the failure of a person's adaptive mechanisms to counteract stimuli and stresses adequately, resulting in functional or structural disturbances. This definition is an ecological concept of disease, which uses multiple factors to determine the cause of disease, rather than describing a single cause. Disease and illness are not synonymous.

Q2: How can health be defined?

A. As the absence of disease and illness

B. As the person's philosophy for living in harmony with their environment

C. As a state of physical, mental, and spiritual well-being

D. As a state of physical, mental, spiritual, and social functioning that realizes a person's potential and is experienced within a developmental context (Correct)

Rationale: Definitions of health have evolved as the nature of health and illness becomes better understood. Health is much more than the absence of disease and illness. It is a state of physical, mental, spiritual, and social functioning that realizes a person's potential and is experienced within a developmental context.

Q3: The 1986 Ottawa Charter for Health Promotion document provides a blueprint for health promotion in Canada. Which of the following statements is correct concerning this model?

A. The focus is on environment and the ability to achieve health on a personal and societal level.

B. It defines health promotion as the process of enabling people to increase control over and improve their health. (Correct)

C. It provides a view of health promotion that is focused on people taking control of their own health.

D. It is most closely aligned with a clinical model of health.

Rationale: The Ottawa Charter for Health Promotion provides a blueprint for health promotion in Canada. Within this model, health promotion is defined as the process of enabling people to increase control over and improve their health.

Q4: Why is it useful in disease prevention to understand the typical progression of a disease?

A. Nurses can use this to predict how long the patient will be sick.

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B. It ensures all patients receive the same treatments.

C. It helps in deciding which prevention strategy to use. (Correct)

D. It eliminates the need for testing, since progression is already known.

Rationale: For many diseases, there are well-defined stages of progression, from its inception to outcome or resolution, whether that be cure, control, disability, or death. These stages are a process, collectively referred to as the natural history of disease. Understanding the typical progression of a disease assists in determining which prevention strategies to use.

Q5: Which of the following best describes a care recipient who has an illness?

A. Someone who has well-controlled diabetes

B. Someone with hypercholesterolemia

C. Someone with a headache (Correct)

D. Someone with coronary artery disease without angina

Rationale: Someone with a headache represents a person with an illness. An illness is made up of the subjective experience of the individual and the physical manifestation of disease. It can be described as a response characterized by a mismatch between a person's needs and the resources available to meet those needs. A person can have a disease without feeling ill. The other choices represent disease.

Q6: Which Canadian report is considered to be a landmark document in creating a global approach to health?

A. Population Health Promotion Model

B. Healthy People 2020

C. Framework for Health Promotion in Canada (Correct)

D. World Health Organization Quality of Life

Rationale: By the mid-1980s, Canada became a world leader in the formulation of health-promotion ideals and strategies, particularly with the unveiling of the Framework for Health Promotion in Canada at the first World Health Organization (WHO) conference on health promotion in Ottawa. The overall goal of "achieving health for all" in this report identifies three health challenges: reducing inequities, increasing prevention, and enhancing coping. The three health-promotion mechanisms to address these challenges are self-care, mutual aid, and healthy environments. The final component of the framework consists of three implementation strategies: fostering public participation, strengthening community health services; and coordinating health public policy. Healthy People 2020 is a US-based document to guide planning for health care. The WHO Quality of Life tool is a quality-of-life measurement tool used by health care workers. The Population Health Promotion Model was developed to provide an overall framework to guide health promotion by blending both health promotion and population health concepts.

Q7: Which of the following is one of the three programs that the Public Health Agency of Canada (PHAC) is focused on for improving the health of Canadians?

A. Decreased tobacco use in youth throughout the country

B. Health promotion and disease prevention (Correct)

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C. Increased public funding for health insurance
D. Decreased hospital re-admission rates

Rationale: The aim of PHAC is to promote and protect the health of Canadians through leadership, partnership, innovation, and action in public health. Among the agency's recent plans are three programs: public health infrastructure; health promotion and disease prevention; and health security. Choices A, C, and D are possible strategies to achieve the goals of this program.

Q8: Which of the following represents a method of primary prevention?

A. Informational session about healthy lifestyles (Correct)
B. Blood pressure screening
C. Interventional cardiac catheterization
D. Diagnostic cardiac catheterization

Rationale: Primary prevention precedes disease or dysfunction. It includes health promotion and specific protection and encourages increased awareness; thus, education about healthy lifestyles fits this definition. Blood pressure screening does not prevent disease, but instead identifies it.

Q9: Which of the following represents a method of secondary prevention?

A. Education about breast self-examination
B. Yearly mammograms (Correct)
C. Chemotherapy for advanced breast cancer
D. Complete mastectomy for breast cancer

Rationale: Screening is secondary prevention because the principal goal of screenings is to identify individuals in an early, detectable stage of the disease process. A mammogram is a screening tool for breast cancer and, thus, is considered a method of secondary prevention.

Q10: Which of the following represents a method of tertiary prevention?

A. Drunk driving campaign
B. Road blocks for drunk driving
C. Emergency surgery for head trauma after a motor vehicle accident
D. Physiotherapy and occupational therapy after a motor vehicle accident with head trauma (Correct)

Rationale: Physiotherapy and occupational therapy are considered tertiary prevention. Tertiary prevention occurs when a defect or disability is permanent and irreversible. It involves minimizing the effect of disease and disability. The objective of tertiary prevention is to maximize remaining capacities.

Q11: In reviewing a person's medical history, a nurse realizes that the individual with moderate persistent asthma has had several emergency department visits and is not on inhaled steroids as recommended by the best practice guidelines for asthma management. The nurse discusses this with the person's primary care provider. In this scenario, the nurse is acting as a(n):

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A. advocate.

B. care coordinator. (Correct)

C. consultant or collaborator.

D. educator.

Rationale: Care coordinators act to prevent duplication of services, maintain quality and safety, and reduce costs. Care coordinators base recommendations on reliable data sources such as evidence-informed practices and protocols.

Q12: During a home visit, a nurse assists an individual to complete an application for disability services. The nurse is acting as a(n):

A. advocate. (Correct)

B. care coordinator.

C. consultant or collaborator.

D. educator.

Rationale: The advocacy role of the nurse helps individuals obtain what they are entitled to receive from the health care system; tries to make the system more responsive to individuals' community needs; and assists individuals in developing skills to advocate for themselves.

Q13: During a home visit with an individual, a nurse discusses the dangers of smoking. In this scenario, the nurse is acting as a(n):

A. advocate.

B. care coordinator.

C. consultant or collaborator.

D. educator. (Correct)

Rationale: Teaching may range from a chance remark by the nurse, based on a perception of desirable individual behaviour, to structurally planned teaching according to individual needs. Selection of the methods most likely to succeed involves the establishment of teacher–learner goals. Health promotion and protection rely heavily on the individual's ability to use appropriate knowledge. Health education is one of the primary prevention techniques available to avoid the major causes of disability and death today, and is a critical role for nurses.

Q14: A nurse is asked to provide an expert opinion about the development of an education program for newly diagnosed diabetics. In this scenario, the nurse is acting as a(n):

A. advocate.

B. care coordinator.

C. consultant or collaborator. (Correct)

D. educator.

Rationale: Nurses with a specialized area of expertise provide education about health promotion and disease prevention to individuals and groups as consultants. Some nurses have specialized areas of expertise or advanced practice, such as in gerontology, women's health, or community or public health, and they are equipped to provide information as consultants in these areas of

specialization.

Q15: In which of the following scenarios is the nurse functioning as a care coordinator?

A. A nurse is working with a family to coordinate care for a child with multiple previous hospital admissions due to exacerbation of asthma. (Correct)

B. A nurse is providing asthma education in an office setting to a child with moderate, persistent asthma.

C. A nurse is administering the appropriate anti-inflammatory medication to a child hospitalized for exacerbation of asthma.

D. A nurse is making a home visit to perform a respiratory assessment on a child discharged from the hospital following an admission for an asthma exacerbation.

Rationale: Care coordinators help determine what medical care is necessary, monitor care, and arrange for individuals to receive the most cost-effective care in the most appropriate settings. They must collaborate with care providers and with the care recipient/family. Care coordinators are especially helpful in following a care recipient after discharge and assisting care recipients with complex needs. A nurse working with a family to coordinate service after a hospitalization is a good example of services provided by a care coordinator.

Q16: A nurse is planning to deliver an educational program to individuals with diabetes. Which of the following should be the initial action taken by the nurse to ensure the success of the program?

A. Assess the motivation level of the individuals.

B. Assess the knowledge level of the individuals.

C. Establish teacher–learner goals with the individuals. (Correct)

D. Establish multiple teaching sessions with the individuals.

Rationale: Selection of the methods most likely to succeed involves the establishment of teacher–learner goals. Thus, the first step by the nurse should be establishment of goals.

Q17: The conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individuals is known as:

A. health-related quality of life.

B. evidence-informed practice. (Correct)

C. a goal of the Canada Health Act.

D. the ecological model of health.

Rationale: Evidence-informed practice is defined as the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individuals. The practice of evidence-informed nursing decision-making means integrating individual clinical expertise with the best available external clinical evidence from systematic research.

Q18: In order to promote health and prevent illness, disease, and disabilities, various levels of prevention are used in nursing practice. Health promotion fits as a strategy under the umbrella of primary prevention. Which of the following is an example of primary prevention?

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A. Teaching how to give insulin
B. Screening mammogram
C. Immunization against hepatitis B (Correct)
D. Rehabilitation for a stroke

Rationale: Primary prevention refers to the timeline before disease occurs. Examples include healthy eating and activity-based school programs, reduction of sodium in the food supply, and specific protection from diseases by immunization such as hepatitis B. Teaching how to give insulin and encouraging women to have mammograms are examples of secondary prevention. Rehabilitation for a stroke is an example of tertiary prevention.

Q19: Secondary prevention is focused on averting or delaying the consequences of advanced disease. Which of the following is an example of secondary prevention?

A. Immunization for human papillomavirus (HPV)
B. Screening for colorectal cancer (Correct)
C. School presentation on bicycle safety
D. Physiotherapy after hip replacement surgery

Rationale: Secondary prevention ranges from providing screening activities and treating early stages of disease to limiting disability by averting or delaying the consequences of advanced disease. Screening is secondary prevention because the principal goal is to identify individuals in an early, detectable stage of the disease process.

Q20: Tertiary prevention activities are focused on helping people to attain and retain an optimal level of functioning. Which of the following is an example of tertiary prevention activities?

A. Rehabilitation after a stroke (Correct)
B. Chest X-ray to screen for tuberculosis
C. Screening for prostate specific antigen (PSA)
D. Childhood immunization for measles and varicella

Rationale: Tertiary prevention occurs when a defect or disability is permanent or irreversible. The process involves minimizing the effects of disease and disability by surveillance and maintenance activities that are aimed at preventing complications and deterioration. Tertiary prevention focuses on rehabilitation to help people attain and retain an optimal level of functioning, regardless of their disabling condition.

Q21: Which of the following is most influenced by the social and economic environment of a community?

A. Social health policies (Correct)
B. Quality of care
C. Evidence-informed practice
D. Practice guidelines

Rationale: Cultural and socioeconomic changes within the population unequivocally influence lay concepts of health and health promotion. Health-promotion efforts, unlike those efforts directed at

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specific protection from certain diseases, focus on maintaining or improving the general health of individuals, families, and communities. These activities are conducted at the public level (e.g., government programs promoting adequate housing or reducing pollutants in the air), at the community level, and at the personal level. Social policies concerning health are influenced by the social and economic environment of a population. Analysis of population trends and projections is necessary to help health care providers determine changing care needs.

Q22: A major cause of death in the early twentieth century was:

A. cancer.
B. cerebrovascular disease.
C. heart disease.
D. infections. (Correct)

Rationale: Infections and acute disease were the major causes of death in the early part of the twentieth century.

Q23: Which of the following groups of people is likely to show an increase in population numbers between the years 2036 to 2063?

A. Persons aged 65 and older
B. Persons of European descent
C. Persons belonging to a visible minority group (Correct)
D. Infants, due to rising birth rates

Rationale: Canadian population continues to age and have a declining fertility rate, with immigration being the main driver of population growth. The 2021 Census showed the largest proportion of immigrants in Canada since 1921. Immigrant population projections continue to rise, with projected growth from 23% of the population in 2021 to 34% of the population in 2041.

Q24: Which of the following demonstrates a nurse taking action to promote health and prevent disease?

A. Making a home visit to a person who is recovering from a heart attack
B. Administering medications to a cardiac care recipient in the hospital
C. Providing cardiopulmonary resuscitation during a heart attack
D. Educating a person about the advantages of a heart-healthy diet during a home visit (Correct)

Rationale: Solutions for health promotion are focused on individual and government involvement. To promote health and wellness, an emphasis must be placed on primary prevention. This is often related to actions such as education that influence lifestyle choices. Educating a person about the advantages of a heart-healthy diet during a home visit serves to influence lifestyle choices.

Q25: Which factor is likely to have the most influence in changing the health behaviour of a single, adult woman who smokes and is the care provider for her mother, her own children, and her granddaughter?

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A. Education regarding effects of smoking on her health
B. The satisfaction that she will not contribute to second-hand smoke
C. The availability of a weekly support group
D. A gift card for $10 to a local grocery store for every week she is smoke-free (Correct)

Rationale: Motivational factors play a role in influencing attitudinal changes. A financial incentive is an example of a motivating factor. For this woman, who is financially responsible for the health and well-being of other individuals, finances will likely play a significant role in motivating her actions. Remember that education regarding the benefits of not smoking is not enough. Thus, the $10 gift card may have the most influence in changing her health behaviour.

Q26: Which of the following are solution-focused directions when using the population health promotion model (PHPM)? (Select all that apply.) *(Select all that apply.)*

A. Working to promote interprofessional collaboration
B. Working with individuals and families (Correct)
C. Working at the community and governmental levels (Correct)
D. Working to improve quality of life

Rationale: The PHPM assists in identifying the socioenvironmental "who, what, how, and why" of a health-promotion activity. Specifically, one must determine at which level of society to take action (the "who" of the PHPM), the social determinants of health to act upon (the "what"), the appropriate Ottawa Charter action area (the "how"), and the best available evidence to make decisions (the "why"). Using the model results in a more all-encompassing view of the problem and leads to better solutions. Such an approach promotes upstream thinking that focuses on strategies to address economic and social factors by removing barriers and improving supports to allow people to reach their full potential. Solutions can be focused in two main directions: with individuals and families, or at community and governmental levels of involvement.

Q27: Which of the following interventions address both the population health promotion model (PHPM) indicators and the overall goals of the Ottawa Charter for Health Promotion? (Select all that apply.) *(Select all that apply.)*

A. Establishing a new park with a well-lit walking track (Correct)
B. Establishing a smoking cessation campaign (Correct)
C. Providing reduced-cost transportation passes to older adults
D. Providing free condoms at all federally funded health clinics (Correct)

Rationale: Establishing a new park with a well-lit walking track, establishing a smoking cessation campaign, and providing free condoms at all federally funded health clinics address the PHPM indicators as well as the overall goals of the Ottawa Charter for Health Promotion. A park, smoking cessation campaign, and free condoms address the themes of promoting health and preventing disease and the goal of increasing quality and years of healthy life. Providing reduced-cost transportation passes to older adults may indirectly affect the health of this population; however, it is not directly related to the PHPM indicators and the overall goals of the Ottawa Charter for Health Promotion.

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Review Questions - Chapter 01

Q1: "The process of enabling people to increase control over the determinants of health and thereby improve their health" is part of an expanded definition of

A. health promotion. (Correct)

B. functional health.

C. behavioural approach.

D. ecological model of health.

Rationale: The Ottawa Charter defines health promotion as "the process of enabling people to increase control over and improve their health." More than a decade later, the World Health Organization (WHO) proposed a more expansive definition: "Health promotion represents a comprehensive social and political process; it not only embraces actions directed at strengthening the skills and capabilities of individuals, but also action directed toward changing social, environmental and economic conditions so as to alleviate their impact on public and individual health. Health promotion is the process of enabling people to increase control over the determinants of health and thereby improve their health."

Q2: The nurse is teaching about primary prevention and includes which educational statement in the instructions?

A. Everyone should participate in colorectal cancer screening.

B. Health teaching about the risk factors of heart disease should be performed. (Correct)

C. Limiting disability is a vital role of nursing since preventive measures are therapeutic.

D. The nurse is involved in minimizing the effects of disease and disability by surveillance and maintenance.

Rationale: Primary prevention precedes disease or dysfunction. Primary prevention intervention includes health promotion, such as health teaching about risk factors for heart disease, and specific protection, such as immunization against hepatitis B. Its purpose is to decrease the vulnerability of the individual or population to disease or dysfunction. People are taught to use appropriate primary preventive measures. Screening is secondary prevention because the principal goal is to identify individuals in an early, detectable stage of the disease process. Delayed recognition of disease results in the need to limit future disability in late secondary prevention. Tertiary prevention occurs when a defect or disability is permanent and irreversible. The process is minimizing the effects of the disease and disability by surveillance and maintenance activities aimed at preventing complications and deterioration.

Q3: Public health nurses are involved in supporting active health promotion strategies, such as

A. supporting access to clean water.

B. advocating for vitamin D in all milk.

C. supporting sanitary sewage systems.

D. participating in an individual daily exercise program. (Correct)

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Rationale: Health promotion strategies are either active or passive. Passive strategies involve the individual as an inactive participant or recipient. Examples of passive strategies include public health efforts to maintain clean water and sanitary sewage systems, and efforts to introduce vitamin D in all milk to ensure that children will not be at risk for rickets when there is little sunlight. Active strategies depend on the individual becoming personally involved in adopting a proposed program of health promotion. Examples of lifestyle changes are daily exercise as part of a physical fitness plan and a stress-management program as part of daily living.

Q4: Nurses in the school setting can participate in health-promotion activities through creating nut-free schools. This would protect hypersensitive children from life-threatening allergic reactions to peanuts and other nut products. This type of program is an example of which of the following interventions?

A. Primary (Correct)
B. Secondary
C. Tertiary
D. Emergent

Rationale: Primary prevention interventions are considered health protection when they emphasize shielding or defending the body (or the public) from specific causes of injury or disease. An example is creating nut-free schools to protect hypersensitive children from life-threatening allergic reactions to peanuts and other nut products. Such initiatives have largely been the result of grassroots parent organizations working with formal community organizations to adopt policies that protect the health of these children. Nurses may be involved in the parent organizations or the school or public health boards that review the proposed policies. Secondary prevention ranges from providing screening activities and treating early stages of disease to limiting disability by averting or delaying the consequences of advanced disease. Tertiary prevention occurs when a defect or disability is permanent and irreversible. Emergent care is not associated with health-promotion activities.

Q5: In addition to changes in ethnic distribution within the population, it is expected that changes in _____ distribution will affect health-promotion practice.

A. geographical
B. environmental
C. age (Correct)
D. social

Rationale: In addition to changes in the ethnic distribution within the population, the projected changes in age distribution will affect health-promotion practice. Considerable growth is expected in the proportion of the population that is 25 years or older. Analysis of population trends and projections helps health providers determine changing needs. Additionally, analysis of the social and economic environment is necessary for development of social policy concerning health.

Q6: Which of the following statements accurately reflects the concept of strengths-based nursing?

A. It is a health-promotion strategy that reflects policy-level interventions.
B. It is a more modern term used interchangeably with primary prevention.

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C. It focuses on what families and patients do that helps them deal with problems. (Correct)

D. It refers to administering vaccines to prevent individuals from ever developing the disease.

Rationale: Health-promotion efforts, unlike those efforts directed at specific protection from certain diseases, focus on maintaining or improving the general health of individuals, families, and communities. These activities are conducted at the public level, at the community level, and at the personal level. Nursing interventions are actions directed toward developing people's resources to maintain or enhance their well-being—a form of strengths-based planning. Using strengths-based nursing, the nurse focuses on what families and patients do that helps them deal with problems; through the assessment of their inner and outer strengths, this approach promotes health and facilitates healing.

Q7: A substantial change in wellness patterns in today's society requires a shift in focus toward

A. treating disease through the application of complex technology.

B. an emphasis on the diagnosis and treatment of disease.

C. an individual's biochemical functioning, genetics, environment, and personal choices. (Correct)

D. the effects rather than the causes of disease.

Rationale: The emphasis on treating disease through the application of complex technology not only is costly, but also contributes minimally to the improvement of health. An orientation toward illness clearly focuses on the effects rather than the causes of disease. A substantial change in wellness patterns is occurring. Infectious and acute diseases were the major causes of death in the early part of the twentieth century, whereas today, persistent conditions, heart disease, cerebrovascular accident (stroke), and cancer are the major causes. An emphasis on the diagnosis and treatment of disease, which was highly successful in the past, is not the answer for today's needs, which are closely related to and affected by the individual's biochemical functioning, genetics, environment, and personal choices.

Q8: Which of the following best describes the practice of evidence-informed nursing decision making?

A. Delivering direct services such as health education and influenza vaccinations

B. Coordinating care to maintain quality and safety and reduce costs

C. Providing knowledge about health promotion and disease prevention to individuals and groups as a consultant

D. Integrating individual clinical expertise with the best available external clinical evidence from systematic research (Correct)

Rationale: When nurses or other clinicians use research findings and the best evidence possible to make decisions, the outcome is termed evidence-informed practice. Evidence-informed practice is defined as the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individuals. The practice of evidence-informed nursing decision making means integrating individual clinical expertise with the best available external clinical evidence from systematic research.

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Q9: Which of the following help(s) form the foundations of the Population Health Promotion Model? (Select all that apply.) *(Select all that apply.)*

A. Health inequity
B. Societal values (Correct)
C. Evidence-informed decision making (Correct)
D. Population health
E. Privatized health care

Rationale: The Population Health Promotion Model provides an overall framework to guide health promotion by blending both health promotion and population health concepts. The three-dimensional cube reflects populations (i.e., individuals, families, communities, society); areas for action (the Ottawa Charter); and the social determinants of health, with the cube being based on a foundation of evidence-informed decision making and societal values.

Q10: Health is considered to be a metaparadigm for nursing and includes which of the following components? (Select all that apply.) *(Select all that apply.)*

A. Person (Correct)
B. Health (Correct)
C. Environment (Correct)
D. Nursing (Correct)
E. Psychosocial wellness

Rationale: Health is defined as a state of physical, mental, spiritual, and social functioning that realizes a person's potential and is experienced within a developmental context. Health is considered to be part of the metaparadigm for nursing, which includes the four components of person, health, environment, and nursing. Health encompasses spiritual, developmental, and environmental aspects over time. Psychosocial wellness is not considered to be one of the four components of the metaparadigm for nursing.

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