

## Chapter 1, Population Health Promotion: Essentials and Essence of Practice

1. The 20th century saw numerous improvements in the health status of people in the developed world. This was **primarily** attributable to what phenomenon?
  - A. Steady declines in the rate of tobacco consumption
  - B. The development of vaccines against many communicable diseases
  - C. Eradication of microorganisms responsible for infectious diseases
  - D. Government policies that prioritized health promotion over disease treatment

ANS: B

Rationale: Health status gains in the developed world during the 20th century were a result of (1) advances in knowledge about the causes of disease, (2) development of new technologies and pharmaceuticals to treat and cure many diseases, (3) creation of vaccines and environmental solutions to prevent disease transmission and acquisition, and (4) innovations in surveillance techniques to measure health status.

PTS: 1                      DIF: Easy                      REF: Page and Header: 3, Introduction  
OBJ: 1                      NAT: Client Needs: Health Promotion and Maintenance  
TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice  
KEY: Integrated Process: Nursing Process  
BLM: Cognitive Level: Understand

2. What document is recognized as laying the foundation for the transition in the focus of Canadian health policy from disease to health?
  - A. The *Ottawa Charter for Health Promotion*
  - B. The Epp Framework (*A Framework for Health Promotion*)
  - C. The WHO *Declaration of Alma-Ata*
  - D. The Lalonde Report (*A New Perspectives on the Health of Canadians*)

ANS: D

Rationale: The publication in 1974 of the Lalonde Report (*A New Perspective on the Health of Canadians*) heralded a change in the focus of health on disease to a focus on health. The *Ottawa Charter*, the *WHO Declaration*, and the Epp Framework were each subsequent to the Lalonde Report.

PTS: 1                      DIF: Easy                      REF: Page and Header: 5, The Lalonde Report                      OBJ: 1  
NAT: Client Needs: Safe and Effective Care Environment: Management of Care  
TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice  
KEY: Integrated Process: Nursing Process  
BLM: Cognitive Level: Understand

3. The Lalonde Report of 1974 is recognized as one of the seminal publications that has shaped the character and direction of public health policy in Canada. What change in policy is attributed to the Lalonde Report?
- A. A shift from collective responsibility for the health of Canadians to an individual focus
  - B. A change in focus from the treatment of illness to the promotion of health
  - C. A change from private funding for health to a combination of provincial and federal funding
  - D. A recognition of the importance of determinants of health

ANS: B

Rationale: The Lalonde Report is credited with initiating a change in the policy from a focus on disease to a focus on health. The report did not promote a change in funding, a change to individual responsibility, or a formal recognition of the determinants of health.

PTS: 1                      DIF: Easy

REF: Page and Header: 5, The Lalonde Report                      OBJ: 1

NAT: Client Needs: Safe and Effective Care Environment: Management of Care  
TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand

4. The publication of the World Health Organization's *Declaration of Alma-Ata* is acknowledged to be a key event in the development of contemporary public health policy. The *Declaration* **prioritized**:
- A. collaboration among individuals and health care providers to impact health decisions.
  - B. increased funding for the education of nurses, physicians, and allied health workers in member nations.
  - C. cooperation between developed nations and developing nations to eradicate global health inequities.
  - D. the removal of class-based barriers to health decision making.

ANS: A

Rationale: The *Declaration of Alma-Ata* called for health providers to work with people to assist them in making decisions about their health and how to meet health challenges in ways that are affordable, acceptable, and sustainable in the long term. It did not specifically prioritize education funding, international cooperation, or the removal of class-based barriers to health.

PTS: 1                      DIF: Easy

REF: Page and Header: 5, Declaration of Alma-Ata                      OBJ: 1

NAT: Client Needs: Safe and Effective Care Environment: Management of Care  
TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand

5. A public health worker is participating in the creation of a health promotion initiative that aims to address many of the poor health outcomes in a city's homeless population. The success or failure of this initiative is likely to depend on what factor?
- A. Accessibility and the perceived credibility of the planned initiative
  - B. The provision of incentives and immediate benefits for participants in the program
  - C. Providing safe and supportive housing for homeless people before addressing their health needs
  - D. Redressing the disparities based on gender, socioeconomic status, and education

ANS: A

Rationale: The *Declaration of Alma-Ata* called for health providers to work with people to assist them in making decisions about their health and how to meet health challenges in ways that are affordable, acceptable, and sustainable in the long term. In facing the health challenges posed by homelessness, it is imperative that programs, policies, and interventions ensure accessibility by the members of this population. As well, it is necessary to present initiatives in a way that promotes their credibility. Short-term benefits are not a prerequisite and the resolution of disparities and lack of housing need not precede health promotion.

PTS: 1

DIF: Moderate

REF: Page and Header: 5, Declaration of Alma-Ata OBJ: 1

NAT: Client Needs: Safe and Effective Care Environment: Management of Care

TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Analyze

6. Which issue is recognized as being inadequately addressed by current Canadian health policy?
- A. Canadians are not aware of the impact that their behaviours have on their health status.
  - B. Utilization of the health care system is insufficient to ensure the health of the population.
  - C. Members of disadvantaged groups are less healthy than other Canadians.
  - D. The interests of the health care industry are at odds with the long-term health of Canadians.

ANS: C

Rationale: Among the major issues that are not being adequately addressed by current health policies and practices is the fact that disadvantaged groups have significantly lower life expectancy, poorer health, and a higher prevalence of disability than the average Canadian. A knowledge deficit, underutilization, and the interests of the health care industry are not noted as core problems in Canadian public health.

PTS: 1                    DIF: Moderate

REF: Page and Header: 6, A Framework for Health Promotion in Canada

OBJ: 3

NAT: Client Needs: Safe and Effective Care Environment: Management of Care

TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand

7. Which client typifies the health problems that began to predominate in Canada during the late 20th century?
- A. A young man who incurred a spinal cord injury while playing sports
  - B. An elementary school student who developed measles because she was not vaccinated
  - C. An older adult client who had type 2 diabetes that resulted in vascular and cardiac complications
  - D. A child who was born HIV-positive to a mother who was an intravenous substance user

ANS: C

Rationale: During the late 20th century, the effects of chronic conditions such as diabetes began to overshadow other health problems such as communicable diseases and injuries.

PTS: 1                    DIF: Moderate

REF: Page and Header: 7, A Framework for Health Promotion in Canada

OBJ: 2

NAT: Client Needs: Safe and Effective Care Environment: Management of Care

TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Analyze

8. Which statement **best** captures the concept of population health?
- A. Population health is the median life expectancy within a defined group of people.
  - B. Population health is citizens' subjective perceptions of their physical, mental, and spiritual well-being.
  - C. Population health is the health status of a group of individuals that is considered as a whole, coherent unit.
  - D. Population health is the relative risk of premature death that exists within a specified group of residents.

ANS: C

Rationale: Population health focuses on the health status of populations, which are conceptualized as coherent entities that are not simply the sum of individuals. Components and considerations include measures such as life expectancy and health risks, but the concept supersedes these finite indicators.

PTS: 1                    DIF: Moderate    REF: Page and Header: 12, Population Health

OBJ: 6                    NAT: Client Needs: Health Promotion and Maintenance

TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Understand

9. A tobacco educator is working with a group of adults who have a history of cigarette smoking. The group comprises immigrants to Canada from an ethnic group whose members have a smoking rate higher than that of the Canadian population as a whole. Which determinant of health does **not** have a significant impact on the group members' tobacco use?
- A. Culture
  - B. Social environment
  - C. Personal health practices
  - D. Physical environment

ANS: D

Rationale: The influence of client's culture, social environment (peers), and personal health practices can be seen as factors that affect his tobacco use. The client's physical environment does not have a clear and direct bearing on this health behaviour.

PTS: 1                    DIF: Moderate    REF: Page and Header: 12, Population Health

OBJ: 5

NAT: Client Needs: Safe and Effective Care Environment: Management of Care

TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Apply

10. A community health worker is collaborating with educators and school administrators to spearhead a new program for elementary students that aims to prevent children from beginning to smoke in junior high. This effort **most** clearly exemplifies what element of the population health approach?
- A. Focusing on the health of populations
  - B. Addressing the determinants of health
  - C. Increasing accountability for health outcomes
  - D. Investing upstream

ANS: D

Rationale: Investing upstream means directing attention at the root causes of illness and injury, rather than at the symptoms that are evident. Influencing tobacco use before it begins is an example of such upstream thinking. This does not preclude a focus on the health of populations, consideration of the determinants of health, or increased accountability, but the structure and timeline of the program is a clear example of investing upstream.

PTS: 1                    DIF: Moderate      REF: Page and Header: 13, Population Health

OBJ: 6                    NAT: Client Needs: Health Promotion and Maintenance

TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Analyze

11. Which action **best** demonstrates the element of collaboration in the population health approach?
- A. A community health worker liaises with municipal leaders and social services representatives during the planning of a program.
  - B. A community health worker adopts a multidisciplinary approach to the provision of care in a community.
  - C. A community health worker forms a committee of fellow community health workers when weighing the costs and benefits of a proposed program.
  - D. A community health worker consults published evidence when planning an intervention and integrates the evidence into practice.

ANS: A

Rationale: Collaboration is the active engagement between and across levels and sectors. It is not synonymous with multidisciplinary care or evidence-based practice.

PTS: 1                    DIF: Difficult      REF: Page and Header: 14, Population Health

OBJ: 6                    NAT: Client Needs: Health Promotion and Maintenance

TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Analyze

12. Knowing that health is a result of a complex interplay among numerous factors, the community health worker is careful to make a distinction between risk factors and risk conditions. What factor would be considered a risk condition?
- A. A community hospital has been closed due to budgetary pressures and consolidation with a larger, more distant hospital.
  - B. The community's alcohol purchases have increased to very high levels since the loss of a key employer in the community several months ago.
  - C. A group of local middle-aged factory workers have avoided going to their primary care providers for the past 4 years for the fear of digital rectal examinations.

D. A group of women attending a community centre art class has been encouraged to increase their activity level but most women continue to maintain a sedentary lifestyle.

ANS: A

Rationale: Risk conditions, on the other hand, are general circumstances over which people have little or no control that are known to affect health status. Examples include the specific delivery of health care and changes that have the potential to negatively impact health. Risk factors are elements, often behaviour patterns, that tend to dispose people to poorer health and are modifiable through strategies that create individual behaviour change.

PTS: 1

DIF: Moderate

REF: Page and Header: 15, Population Health Promotion OBJ: 6

NAT: Client Needs: Health Promotion and Maintenance

TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Analyze

13. Which population group is considered to be the **most** vulnerable in Canadian society?
- A. The Aboriginal population
  - B. People who are homeless
  - C. Female lone parenting families
  - D. Children with chronic diseases

ANS: B

Rationale: People who are homeless are one of the most vulnerable population groups in society, exposed to multiple hazards in a nonsupportive environment, diminishing their ability to stay healthy or to take the necessary steps to seek the services they need to become healthy. The threats to health of the homeless population exceed those faced by nearly every other group in Canadian society.

PTS: 1

DIF: Moderate

REF: Page and Header: 14, Target Populations

OBJ: 5

NAT: Client Needs: Physiological Integrity: Reduction of Risk Potential

TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice

KEY: Integrated Process: Nursing Process

BLM: Cognitive Level: Remember

14. The Epp Framework (*A Framework for Health Promotion*) of 1986 is acknowledged as a milestone in the development of public health policy in Canada. What was the **primary** goal in this framework?
- A. Encouraging Canadians to become more aware of international health disparities

- B. Empowering Canadians to exercise control over and improve their own health
- C. Fostering a sense of pride in the health care system that Canadians created
- D. Promoting a reduction in known health risk factors

ANS: B

Rationale: The Epp Framework reaffirmed the WHO definition of health promotion as "the process of enabling people to increase control over, and to improve, their health." The focus of the framework was not on international health disparities or promoting a sense of pride in the health care system. The framework went beyond narrow approaches such as reducing risk factors.

PTS: 1                      DIF: Easy  
REF: Page and Header: 6, A Framework for Health Promotion in Canada  
OBJ: 1                      NAT: Client Needs: Health Promotion and Maintenance  
TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice  
KEY: Integrated Process: Nursing Process  
BLM: Cognitive Level: Understand

15. One of the key mechanisms of health promotion is self-care. What is an example of this mechanism in action?
- A. A group of construction workers choose to pack healthy lunches to work rather than buying fast food each day.
  - B. A community centre resolves to increase the activity level of the children by purchasing outdoor toys.
  - C. A school participates in a regional tobacco prevention campaign.
  - D. The leadership of a church organizes a drop-in exercise program for parishioners.

ANS: A

Rationale: Self-care refers to the decisions made and the behaviours practised by individuals specifically for the preservation of health. Decisions made in order to benefit others can improve public health but they are not considered to be self-care.

PTS: 1                      DIF: Moderate  
REF: Page and Header: 7, A Framework for Health Promotion in Canada  
OBJ: 3                      NAT: Client Needs: Health Promotion and Maintenance  
TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice  
KEY: Integrated Process: Nursing Process  
BLM: Cognitive Level: Analyze

16. Which is an example of a limitation of the 1974 Lalonde Report (*A New Perspectives on the Health of Canadians*)?
- A. Blaming victims if they got sick or injured
  - B. Not addressing the social conditions that affect health
  - C. An overemphasis on lifestyle

D. Focus of attention on sectors other than health

ANS: A

Rationale: Lalonde's approach was directed primarily toward individuals taking control of their health, and if people got sick or injured it was assumed they had not carried out recommended health behaviours (or did not do them enough).

PTS: 1                    DIF: Moderate  
REF: Page and Header: 5, The Lalonde Report                    OBJ: 1  
NAT: Client Needs: Health Promotion and Maintenance  
TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice  
KEY: Integrated Process: Nursing Process  
BLM: Cognitive Level: Understand

17. One of the modes of collaboration is horizontal. What activity **best** demonstrates collaboration in action?
- A. A public health clinical specialist partnering with the Board of Education and Health Canada to develop recommendations for gender-safe schools
  - B. A school nurse, environmental health officer, and a teacher engaged together in a head lice program in a local elementary school
  - C. A sexual health nurse, the head of the Boys and Girls Club, and the Chief of Police working on a bullying prevention program for transgendered high school students
  - D. A Medical Officer of a health region partnering with a provincial Pharmacy Association and Public Health Agency to develop guidelines for influenza immunization

ANS: B

Rationale: Horizontal collaboration is when partnerships are formed at the same level. The other examples have different jurisdictions in policy and enforcement and are therefore examples of vertical collaboration.

PTS: 1                    DIF: Moderate    REF: Page and Header: 4, Introduction  
OBJ: 1  
NAT: Client Needs: Safe and Effective Care Environment: Management of Care  
TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice  
KEY: Integrated Process: Nursing Process  
BLM: Cognitive Level: Analyze

18. The *Declaration of Alma-Ata* placed the greatest emphasis on:
- A. prevention.
  - B. expertise-driven programs.
  - C. low-technology options.
  - D. social justice.

ANS: D

Rationale: The Declaration focused on social justice and equity that was framed in the context of public participation and appropriate use of technology.

PTS: 1                    DIF: Easy  
REF: Page and Header: 5, Declaration of Alma-Ata                    OBJ: 1  
NAT: Client Needs: Health Promotion and Maintenance  
TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice  
KEY: Integrated Process: Nursing Process  
BLM: Cognitive Level: Remember

19. The Epp Framework (*A Framework for Health Promotion in Canada*) of 1986 defines health promotion. Which **best** captures that definition?
- A. A person who does not have a disease, illness, or injury
  - B. The opportunity for people to exercise control over their health
  - C. Education programs that inform people about how to be healthy
  - D. Individual Canadians taking responsibility for their health

ANS: B

Rationale: Health promotion is the process of enabling people to increase control over, and to improve, their health.

PTS: 1                    DIF: Moderate  
REF: Page and Header: 6, A Framework for Health Promotion in Canada  
OBJ: 1                    NAT: Client Needs: Health Promotion and Maintenance  
TOP: Chapter 1: Population Health Promotion: Essentials and Essence of Practice  
KEY: Integrated Process: Nursing Process  
BLM: Cognitive Level: Analyze