

Chapter 01: People's Health: An Introduction

Beatty: Community Oral Health Practice for the Dental Hygienist, 5th Edition

MULTIPLE CHOICE

1. Which of the following statements differentiates dental public health from the private practice of dentistry?
 - a. Dental public health is funded by the government, but private practice is not.
 - b. Dental public health is the form of dental practice that serves the community as the patient rather than the individual.
 - c. Dental public health does not concern assessment of treatment needs as does private practice.
 - d. Dental public health is concerned solely with prevention rather than treatment of disease.

ANS: B

Dental public health is the form of dental practice that serves the community as the patient rather than the individual. It is concerned with the dental education of the public, with applied dental research, and with the administration of group dental care programs, as well as prevention and control of dental diseases on a community basis.

DIF: Comprehension

REF: pp. 1-2

OBJ: 1

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 1.0 Promoting Health and Preventing Disease within Groups

2. Which of the following terms refers to the effort that is organized by society to protect, promote, and restore the health and quality of life?
 - a. Class structure
 - b. Population demographics
 - c. Social stratification
 - d. Public health

ANS: D

Both *public health* and *community health* refer to this societal effort. Public health is concerned with prevention, health education, recommending policies, administering services, conducting research, and limiting health disparities by promoting healthcare equity, quality, and accessibility. Community health includes a wide range of healthcare interventions, including health promotion, disease prevention, treatment, and management and administration of care.

DIF: Recall

REF: pp. 1-2

OBJ: 1

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 1.0 Promoting Health and Preventing Disease within Groups

3. Each of the following is one of the guiding principles common criteria used to identify public health problems EXCEPT one. Which one is the EXCEPTION?
 - a. Degree to which it negatively affects health equity.
 - b. Burden of the disease or condition.
 - c. Political will to address the issue.
 - d. Minimal cost to treat the problem.

ANS: D

The “Guiding Principles Used to Identify Public Health Problems” includes: burden of the disease or condition, prevalence of a risk factor for the disease or condition, ability of affecting the population as a whole, seriousness of the problem, economic or social impact, public health concern, political will to address the issue, availability of resources, requirement for group action to solve the problem, availability of current interventions, cultural appropriateness of the problem, and degree to which it negatively affects health equity.

DIF: Comprehension

REF: pp. 2-3

OBJ: 3

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.1 Assessing Populations and Defining Objectives

4. Which of the following is a public health problem rather than a public health solution?
- Immunizations
 - Fluoridation of drinking water
 - Chronic diseases of the expanding population of older adults
 - Seat belts and air bags

ANS: C

Diseases caused by pollution of the country’s air and water systems, chronic diseases of the expanding population of older adults, inadequate funding for dental disease in indigent children, and an increase in violence among youth of today are all viewed as public health problems. Public health solutions are concerned with health promotion and disease prevention. They address the problems of the community at large.

DIF: Comprehension

REF: pp. 2-3

OBJ: 3

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.1 Assessing Populations and Defining Objectives

5. Which of the following represents one of the characteristics of public health solutions?
- A long implementation period demonstrates conscientious planning.
 - Potency should be maintained for a short time in the event that problems require retooling.
 - Socioeconomic status should limit distribution to those who can most easily carry the cost burden.
 - They should be effective immediately upon application.

ANS: D

The seven characteristics of public health solutions are as follows: not hazardous to life or function, effective in reducing or preventing the targeted disease or condition, easily and efficiently implemented, potency maintained for a substantial time period, attainable regardless of socioeconomic status, effective immediately upon application, and inexpensive and within the means of the community.

DIF: Comprehension

REF: p. 3

OBJ: 3

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

6. Which of the following dental treatment modalities meets all seven characteristics of public health solutions needed to be considered an effective treatment for dental decay?

- a. Glass ionomer restorative material
- b. Stainless steel crown
- c. Community water fluoridation
- d. Dental amalgam

ANS: C

Community water fluoridation meets all the seven characteristics needed to be considered an effective solution to the problem of dental decay.

DIF: Comprehension

REF: p. 3

OBJ: 3

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

7. Community water fluoridation:
- a. reaches all people, regardless of socioeconomic status.
 - b. requires several years of application before positive effects can be measured.
 - c. proves to be more of a financial burden than restorative treatment.
 - d. only meets five of the seven characteristics considered to be an effective solution to the problem of dental decay.

ANS: A

Community water fluoridation has proven to be a safe, cost-effective solution for reducing dental decay in children. It reaches all people regardless of socioeconomic status. It is effective immediately upon initiation and costs far less than the financial burden of restorative treatment. It meets all the seven characteristics to be considered an effective solution to the problem of dental decay.

DIF: Comprehension

REF: p. 3

OBJ: 3

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 1.0 Promoting Health and Preventing Disease within Groups

8. Which of the following best describes the prevalence of dental disease as a dental health problem?
- a. The highest rate of untreated caries is among adults aged 35 to 44
 - b. 80% of children aged 6-9 have experienced caries
 - c. 40% rate of untreated caries in permanent teeth of 13- to 15-year-olds
 - d. Universal

ANS: D

Dental diseases are universal, chronic problems that do not undergo remission if left untreated. For American children ages 3 to 5 years, 29.7% have caries experience in primary teeth, 14.1% have untreated caries in primary teeth. For American children ages 6-9, 51.7% have had caries experience in primary or permanent teeth; 16.2% have untreated dental caries in primary or permanent teeth. For American adolescents ages 13 to 15 years, 49.9% with caries experience in permanent teeth, 17.9% with untreated caries in permanent teeth. For American adults, 31.3% aged 35 to 44 with untreated caries, 72% aged 45 to 64 missing a tooth from caries or periodontal disease. For older American adults, 19.1% aged 65 to 74 with untreated coronal caries, 37.9% aged 75+ with untreated root caries, and 15.2% aged 65 to 74 completely edentulous.

DIF: Recall

REF: p. 4|Table 1.2

OBJ: 4

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community

Programs, 2.1 Assessing Populations and Defining Objectives

9. Approximately ____ million people in the United States and ____ million people in Canada do not have access to optimally fluoridated water.
- a. 72: 22
 - b. 22: 72
 - c. 102: 72
 - d. 72: 102

ANS: A

About 72 million people in the U.S. and 22 million Canadians do not have access to optimally fluoridated water.

DIF: Recall

REF: p. 4

OBJ: 4

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.1 Assessing Populations and Defining Objectives

10. What impact has fluoridated drinking water had on the rate of dental decay?
- a. Very little or no reduction
 - b. A slight reduction
 - c. A significant reduction
 - d. A slight increase

ANS: C

Organized community efforts have brought fluoridated drinking water to more than 210 million people in the U.S. and to 13.9 million in Canada, and the results have shown a significant reduction in the amount of dental caries in both countries. Community water fluoridation is the perfect example of a dental public health solution to the problem of dental decay.

DIF: Comprehension

REF: p. 4

OBJ: 4

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

11. Which of the following components of a public health plan correlate to those in a private practice setting?
- a. Examination, analysis, treatment planning, appraisal
 - b. Survey, analysis, implementation, funding
 - c. Survey, diagnosis, implementation, patient evaluation
 - d. Diagnosis program planning, implementation, fee payment

ANS: B

The relationship between the components in the private practice sector of patient, examination, diagnosis, treatment planning, fee payment, and patient education correlate to community, assessment, analysis, program planning, program implementation, program funding, and program evaluation in public health programs.

DIF: Comprehension

REF: pp. 1-2|Table 1.1

OBJ: 2

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

12. Which public health component is equivalent to diagnosis in private practice?
- Survey
 - Analysis
 - Program planning
 - Program evaluation

ANS: B

Analysis is equivalent to diagnosis. The survey is equivalent to an examination, program planning is equivalent to treatment planning, and program evaluation is equivalent to patient evaluation.

DIF: Recall REF: pp. 1-2/ Table 1.1 OBJ: 2
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

13. The federal government's role in participating in dental health-related activities falls under the jurisdiction of which of the following?
- Department of Health and Human Services (DHHS)
 - Department of the Interior (DOI)
 - Institute of Medicine (IOM)
 - Association of State and Territorial Dental Directors (ASTDD)

ANS: A

The federal government's role in participating in dental health-related activities falls under the jurisdiction of the DHHS. The primary involvement of the federal government in public health is to provide an infrastructure, research, surveillance, and funding for programs that are carried out at the state and local levels.

DIF: Recall REF: p. 5 OBJ: 5
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 1.0 Promoting Health and Preventing Disease within Groups

14. Which of the following organizations publishes *Healthy People*?
- World Health Organization (WHO)
 - Association of State and Territorial Dental Directors (ASTDD)
 - Department of Health and Human Services (DHHS)
 - National Oral Health Surveillance System (NOHSS)

ANS: C

As a major ongoing initiative of the DHHS, *Healthy People* provides science-based goals and measurable objectives for the United States designed to improve the health of the public. Also included are targets and guidance for reaching the targets. These objectives and targets direct the agenda of government health programs based on a 10-year framework and objectives for their own community health programming.

DIF: Recall REF: p. 8 OBJ: 6
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 1.0 Promoting Health and Preventing Disease within Groups

15. The Centers for Disease Control and Prevention (CDC) is an operating agency under which of the following?
- National Institutes of Health (NIH)

- b. Public Health Service (PHS)
- c. Health Resources and Services Administration (HRSA)
- d. Agency for Healthcare Research and Quality (AHRQ)

ANS: B

The CDC, NIH, HRSA, AHRQ, and NIDCR are all operating agencies under the Public Health Service (PHS). The PHS, in turn, is one of four major agencies within the Department of Health and Human Services (DHHS).

DIF: Recall REF: p. 5|Figure 1.2 OBJ: 5
 TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 1.0 Promoting Health and Preventing Disease within Groups

16. Which Federal Government Agency supports research to improve the quality of health care and reduce its costs?
- a. Centers for Disease Control and Prevention (CDC).
 - b. The Agency for Healthcare Research and Quality (AHRQ).
 - c. Health Resources and Services Administration (HRSA).
 - d. National Institutes of Health (NIH).

ANS: B

The AHRQ supports research to improve the quality of health care, reduce its costs, address patient safety and medical errors, and increase access to care. The CDC works to protect people's health and safety by addressing a wide range of health threats, including oral diseases through the Division of Oral Health (DOH), focusing on disease prevention and wellness promotion, providing credible information to enhance health decisions, and encouraging strong community partnerships. The HRSA is the primary agency for improving access to health care for people who are uninsured, isolated, or medically vulnerable through various means, including funding community and school-based health centers and programs that strengthen the healthcare workforce, build healthy communities, and help to achieve health equity. The NIH conducts and funds epidemiologic, medical, and biomedical research; provides science transfer; trains researchers; and promotes acquisition and distribution of medical knowledge.

DIF: Recall REF: p. 6|Box 1.2 OBJ: 5
 TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 3.0 Analyzing Scientific Literature, Understanding Statistical Concepts, and Applying Research Results

17. According to the plan, the next version of *Healthy People 2020* will be *Healthy People* to be released in which year?
- a. 2021
 - b. 2023
 - c. 2025
 - d. 2030

ANS: D

The first Healthy People goals were set in 1979 for the next decade. Work on the fifth version, *Healthy People 2030*, began in 2016 to be launched in 2020.

DIF: Recall REF: p. 8 OBJ: 6
 TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.1 Assessing Populations and Defining Objectives

18. What three core public health functions were identified in an Institute of Medicine (IOM) report in 1998?
- Determination, analysis, recapitulation
 - Assessment, policy development, assurance
 - Delineation, program development, analysis
 - Stratification, process, modification

ANS: B

The core public health functions of assessment, policy development, and assurance were identified in an IOM report in 1988. This report states that the core public health functions were developed to protect and promote health, wellness, and quality of life and to prevent disease, injury, disability, and death.

DIF: Recall REF: p. 9|Box 1.5 OBJ: 7
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.1 Assessing Populations and Defining Objectives

19. Which of the following was listed by the Centers for Disease Control and Prevention (CDC) as one of the 10 greatest public health accomplishments of the twentieth century?
- Reduction in edentulism of Americans older than 65 years of age from 25% to less than 5%
 - Fluoride in drinking water
 - Dental sealants to prevent decay in pits and fissures
 - Advances in the treatment of adult periodontitis

ANS: B

Fluoride in drinking water was identified by the CDC as one of the 10 most important public health accomplishments of the twentieth century. Fluoridated drinking water reaches more than 210 million people in the U.S. and 13.9 million in Canada, with significant reductions in dental caries in both countries.

DIF: Recall REF: p. 11 OBJ: 8
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

20. Dentists become recognized specialists in the field of dental public health through specialty certification with the American Board of Dental Health. In most states, dental hygienists have no required formal or specialty education.
- Both answers are true.
 - Both answers are false.
 - The first answer is true; the second answer is false.
 - The first answer is false; the second answer is true.

ANS: A

Both answers are true, although some dental hygienists have pursued advanced degrees in public health or community health.

DIF: Application REF: p. 11 OBJ: 8
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 1.0 Promoting Health and Preventing Disease within Groups

21. Insurance coverage, Medicaid coverage, and the number of Medicaid dental providers have all increased, and a significant number of people:
- have coverage and access to dental care is no longer a public health problem.
 - have coverage yet access to dental care continues to be a public health problem.
 - still do not have coverage and access to dental care is no longer a public health problem.
 - still do not have coverage and access to dental care continues to be a public health problem.

ANS: D

While the Affordable Care Act (ACA) that passed in 2010, also known as Obamacare, increased dental coverage, 48 percent of children on Medicaid did not receive any dental care in 2017. In addition, early figures indicate that although 9.8 million adults gained dental benefits through 2017 as a result of the ACA, adults who have dental coverage through Medicaid do not fully utilize the benefits. Also, even with the ACA, gaps have remained for many low-income adults and most older adults.

DIF: Recall REF: p. 10 OBJ: 8
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.1 Assessing Populations and Defining Objectives

22. Each of the following is true of the American Dental Hygiene Association (ADHA) EXCEPT one. Which one is the EXCEPTION?
- Developed competencies for a graduate dental hygiene degree along with ADEA.
 - Advocates for direct access of the public to oral healthcare services provided by a dental hygienist.
 - Opposes alternative dental hygiene practice models.
 - Supports utilizing mid-level oral health practitioners and advocated for a dental hygiene-based workforce model for them.

ANS: C

The American Dental Hygienists' Association (ADHA) and the Canadian Dental Hygienists Association support alternative dental hygiene practice models to increase access to oral health care for underserved groups. Forty-two states allowed direct access in community-based settings in 2018. The White House report Reforming America's Healthcare System Through Choice and Competition called for utilizing dental hygienists, dental therapists, and other mid-level providers at the "top of their license".

DIF: Application REF: p. 12|Box 1.6 OBJ: 8
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

23. In 2015, the Commission on Dental Accreditation (CODA) adopted accreditation standards for _____ programs that include requirements for community-based learning experiences to be able to serve in a community setting.
- dental laboratory
 - dental assisting
 - dental
 - dental therapy

ANS: D

ADHA has suggested advanced community-based education for dental hygienists who are filling the expanded roles of innovative workforce models. Most states that have advanced certification for dental hygienists have established this requirement.

DIF: Recall REF: p. 13 OBJ: 8
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

24. Which of the following defines community health?
- Focuses on studying, protecting, and improving health within a community.
 - An approach to health that aims to improve the health of an entire population.
 - A health problem perceived by the public
 - It cannot be defined, as it differs for each study

ANS: A

Community health includes a wide range of healthcare interventions, including health promotion, disease prevention, treatment, and management and administration of care. Population Health is an approach to health that aims to improve the health of an entire population.

DIF: Recall REF: p. 2 OBJ: 2
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.1 Assessing Populations and Defining Objectives

25. Which of the following defines population health?
- The health status of a defined group within a population
 - An approach to health that aims to improve the health of an entire population.
 - A health problem perceived by the public
 - It cannot be defined, as it differs with each study

ANS: B

Population Health is an approach to health that aims to improve the health of an entire population. It focuses on the implicit goal of improving health outcomes in the population, including the distribution of outcomes within the group. Population health encompasses health status of a population and emphasizes the varied extent of factors that affect public health: environmental and individual factors that influence health, disparities and inequities, determinants of health, and shared responsibility for accountability. It requires collaboration of community partners to improve outcomes and an epidemiologic approach to manage the health of the population, making measurement fundamental.

DIF: Recall REF: p. 2 OBJ: 2
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.1 Assessing Populations and Defining Objectives

26. Which of the following would NOT be considered a measurement of SES?
- Occupation
 - Disease
 - Wealth
 - Residence

ANS: B

Socioeconomic status (SES) is an important concept in public health. SES is the social standing or position of a person or group in a community or society on a social–economic scale. It is measured by factors such as education, type of occupation, income, wealth, and place of residence.

DIF: Recall REF: pp. 3–4 OBJ: 3
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.1 Assessing Populations and Defining Objectives

27. Approximately __ million Americans do not have access to optimally fluoridated water.
- a. 13.9
 - b. 22
 - c. 72
 - d. 210

ANS: C

Organized community efforts have brought fluoridated drinking water to more than 210 million people in the U.S. and to 13.9 million in Canada, with significant reductions in dental caries in both countries. Nevertheless, approximately 72 million Americans and 22 million Canadians do not have access to optimally fluoridated water. Thus, the oral health agendas of both nations aim to increase the percentage of the population that has access to optimally fluoridated water.

DIF: Recall REF: p. 4 OBJ: 4
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.1 Assessing Populations and Defining Objectives

28. Which of the following is NOT being applied toward the goal of freeing communities from dental disease?
- a. Knowledge
 - b. Resources
 - c. Community awareness
 - d. Assessment and evaluation

ANS: B

The knowledge exists, but because of restraints and a lack of resources, this knowledge is not being applied toward the goal of communities free from dental disease.

DIF: Recall REF: p. 10 OBJ: 8
TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

29. Approximately what percentage of children on Medicaid did not receive any dental care in 2017?
- a. 10
 - b. 30
 - c. 50
 - d. 70

ANS: C

While the Affordable Care Act (ACA) that passed in 2010, also known as Obamacare, increased dental coverage, 48 percent of children on Medicaid did not receive any dental care in 2017.

DIF: Recall REF: p. 10 OBJ: 8

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.1 Assessing Populations and Defining Objectives

30. One strategy to shape the future of oral health care in the U.S. is to have _____ Medicaid reimbursement for dental hygienists.
- direct
 - indirect
 - indirect under the supervision of a dentist
 - direct under the supervision of a dentist

ANS: A

One strategy is to advocate for states to allow direct Medicaid reimbursement to dental hygienists to be able to accommodate more people who have Medicaid dental coverage. In 2018 only 18 states provided for direct Medicaid reimbursement to dental hygienists.

DIF: Recall REF: p. 11 OBJ: 8

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

31. The Affordable Care Act (ACA) was passed in 2010, and yet gaps in the utilization rate of dental coverage through Medicaid remain for many:
- adults of all income levels.
 - adults of all income levels but including few older adults.
 - Low-income adults but including few older adults.
 - low-income adults and most older adults.

ANS: D

Early figures indicate that although 9.8 million adults gained dental benefits through 2017 as a result of the ACA, adults who have dental coverage through Medicaid do not fully utilize the benefits. Also, even with the ACA, gaps have remained for many low-income adults and most older adults.

DIF: Recall REF: p. 10 OBJ: 8

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

32. The public perception of a health problem is which of the following?
- Accurate and infectious disease focused.
 - Inadequate, as the spectrum of health issues is more vast and diverse than realized.
 - Increase the number of individuals covered by Medicaid.
 - Well managed by private indemnity insurance and not by safety net measures.

ANS: B

The public health problem, as perceived by the public, usually brings to mind an infectious disease such as acquired immunodeficiency syndrome (AIDS) or influenza. The spectrum of problems, however, is vast and diverse.

DIF: Recall REF: pp. 2-3 OBJ: 3

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

33. Which one of the following public health problems and concerns identified by the CDC in 2016 is most closely related to the current opioid epidemic?
- a. Prescription drug overdose
 - b. Nutrition, physical activity, and obesity
 - c. Healthcare-associated infections
 - d. Food safety

ANS: A

The shift from abuse of illicit drugs to the abuse of legal drugs is interesting to note.

DIF: Comprehension

REF: p. 3|Box 1.1 OBJ: 3

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

34. Stigma and complacency are among the most insidious opponents in fighting against which disease?
- a. Rape
 - b. HIV
 - c. Cardiovascular disease
 - d. Violence

ANS: B

In the fight against HIV, stigma and complacency are among our most insidious opponents. Rape is not a disease. Nearly 800,000 people die in the United States each year from cardiovascular disease, accounting for one in three deaths and more than \$300 billion in direct medical costs and lost productivity, but this disease does not have the stigma that HIV carries. Violence is not a disease.

DIF: Application REF: pp. 2-3|Box 1.1

OBJ: 3

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

35. Which of the following is a “Guiding Principles Common Criteria Used to Identify Public Health Problems?”
- a. Whether the problem is a disease that is bacterial or viral in nature.
 - b. Degree to which it negatively affects health equity.
 - c. If the problem affects people in the home or in the workplace.
 - d. If the problem is at the local, state, or federal level.

ANS: B

The guiding principles are: burden of the disease or condition, prevalence of a risk factor for the disease or condition, ability of affecting the population as a whole, seriousness of the problem, economic or social impact, public health concern, political will to address the issue, availability of resources, requirement for group action to solve the problem, availability of current interventions, cultural appropriateness of the problem, and degree to which it negatively affects health equity.

DIF: Recall

REF: p. 3

OBJ: 3

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

36. Impacting oral health to address the multifactorial nature of oral disease will require which of the following?
- Research
 - Cost to benefit ratio
 - Interprofessional collaborative education
 - Closer relationships with third-party carriers of insurance

ANS: C

Impacting oral health will require greater interprofessional collaborative education for all healthcare providers in order to secure the success of interprofessional collaborative practice (IPP) as a means of more effectively addressing the multifactorial nature of oral diseases. Developing alliances with other health care professionals can influence oral health in two ways. Dental professionals can impact the lives of these patients from a total health perspective. In addition, other health care professionals can become aware of the effect of oral health on the systemic conditions they are treating, and vice versa. Interprofessional partnerships have the potential to change the perception of oral health and overcome barriers to optimize preventive care. Research is one aspect of addressing the problems, as is understanding the cost to benefit ratio of programs. Closer relationships with third-party insurance carriers are not likely to impact the multifactorial nature of oral disease.

DIF: Comprehension

REF: p. 11

OBJ: 8

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

37. The organization that cosponsored an initiative to develop core competencies for interprofessional collaborative practice (IPP) is which of the following?
- ADEA
 - ADHA
 - ADA
 - ADHP

ANS: A

In 2016 the Interprofessional Education Collaborative (IPEC), with ADEA as a charter member organization, reaffirmed the value and impact of the core competencies for interprofessional collaborative practice (IPP) that were developed by IPEC in 2011 and implemented nationwide in educational programs of six health professions, including dentistry and dental hygiene. The 2016 update report described the headway made in interprofessional education (IPE), the inclusion in IPEC of additional health professions, and the vital collaborations that will forge the future of IPE and IPP. The report also presented the reorganized and broadened competencies and sub-competencies that were designed to “improve the patient experience of care, improve the health of populations, and reduce the per capita cost of health care.”

DIF: Recall

REF: p. 12|Box 1.6

OBJ: 8

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

38. Which of the following agencies administers the Women, Infants, and Children (WIC) program?
- CDC
 - ACF
 - DOD

d. USDA

ANS: D

The USDA administers the Women, Infants, and Children (WIC) program. Local WIC programs provide nutritional foods, education, screening, and referrals, including for dental care and education, for eligible women who are pregnant, are breastfeeding, or have young children under age 5.

DIF: Recall REF: p. 6|Box 1.2 OBJ: 5

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

MULTIPLE RESPONSE

1. Which of the following are criteria for identifying public health problems? (*Select all that apply.*)
- a. Cultural appropriateness of the problem
 - b. Public health concern
 - c. Cost of procedures
 - d. Seriousness of the problem
 - e. Economic or social impact

ANS: A, B, D, E

The guiding principles common criteria used to identify public health problems are: burden of the disease or condition, prevalence of a risk factor for the disease or condition, ability of affecting the population as a whole, seriousness of the problem, economic or social impact, public health concern, political will to address the issue, availability of resources, requirement for group action to solve the problem, availability of current interventions, cultural appropriateness of the problem, and degree to which it negatively affects health equity.

DIF: Recall REF: p. 3 OBJ: 3

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs

2. Public health services and public health services to promote oral health are organized around which of the following essential elements? (*Select all that apply.*)
- a. Assessment
 - b. Evaluation
 - c. Policy development
 - d. Orientation
 - e. Assurance
 - f. Confidentiality

ANS: A, C, E

The essential public health services and public health services to promote oral health are organized around the core functions of public health: assessment, policy development, and assurance.

DIF: Recall REF: p. 9 OBJ: 7

TOP: COMMUNITY HEALTH/RESEARCH PRINCIPLES 2.0 Participating in Community Programs, 2.2 Designing, Implementing, and Evaluating Programs