

***Wong's Nursing Care of Infants and Children 11th
edition Wilson Test Bank***

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Chapter 02: Social, Cultural, Religious, and Family Influences on Child Health Promotion

MULTIPLE CHOICE

1. Children are taught the values of their culture through observation and feedback relative to their own behavior. In teaching a class on cultural competence, the nurse should be aware that which factor may be culturally determined?
 - a. Ethnicity
 - b. Racial variation
 - c. Status
 - d. Geographic boundaries

ANS: C

Status is culturally determined and varies according to each culture. Some cultures ascribe higher status to age or socioeconomic position. Social roles also are influenced by the culture. Ethnicity is an affiliation of a set of persons who share a unique cultural, social, and linguistic heritage. It is one component of culture. Race and culture are two distinct attributes. Whereas racial grouping describes transmissible traits, culture is determined by the pattern of assumptions, beliefs, and practices that unconsciously frames or guides the outlook and decisions of a group of people. Cultural development may be limited by geographic boundaries, but the boundaries are not culturally determined.

DIF: Cognitive Level: Analyzing REF: p. 39

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

2. The nurse is aware that if patients' different cultures are implied to be inferior, the emotional attitude the nurse is displaying is what?
 - a. Acculturation
 - b. Ethnocentrism
 - c. Cultural shock
 - d. Cultural sensitivity

ANS: B

Ethnocentrism is the belief that one's way of living and behaving is the best way. This includes the emotional attitude that the values, beliefs, and perceptions of one's ethnic group are superior to those of others. Acculturation is the gradual changes that are produced in a culture by the influence of another culture that cause one or both cultures to become more similar. The minority culture is forced to learn the majority culture to survive. Cultural shock is the helpless feeling and state of disorientation felt by an outsider attempting to adapt to a different culture group. Cultural sensitivity, a component of culturally competent care, is an awareness of cultural similarities and differences.

DIF: Cognitive Level: Understanding REF: p. 35 TOP: Integrated Process: Caring

MSC: Client Needs: Psychosocial Integrity

3. Which term best describes the sharing of common characteristics that differentiates one group from other groups in a society?

- a. Race
- b. Culture
- c. Ethnicity
- d. Superiority

ANS: C

Ethnicity is a classification aimed at grouping individuals who consider themselves, or are considered by others, to share common characteristics that differentiate them from the other collectivities in a society, and from which they develop their distinctive cultural behavior. Race is a term that groups together people by their outward physical appearance. Culture is a pattern of assumptions, beliefs, and practices that unconsciously frames or guides the outlook and decisions of a group of people. A culture is composed of individuals who share a set of values, beliefs, and practices that serve as a frame of reference for individual perception and judgments. Superiority is the state or quality of being superior; it does not apply to ethnicity.

DIF: Cognitive Level: Understanding

REF: p. 39

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

4. After the family, which has the greatest influence on providing continuity between generations?
- a. Race
 - b. School
 - c. Social class
 - d. Government

ANS: B

Schools convey a tremendous amount of culture from the older members to the younger members of society. They prepare children to carry out the traditional social roles that will be expected of them as adults. Race is defined as a division of humankind possessing traits that are transmissible by descent and are sufficient to characterize race as a distinct human type; although race may have an influence on childrearing practices, its role is not as significant as that of schools. Social class refers to the family's economic and educational levels. The social class of a family may change between generations. The government establishes parameters for children, including amount of schooling, but this is usually at a local level. The school culture has the most significant influence on continuity besides family.

DIF: Cognitive Level: Remembering

REF: p. 33

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

5. The nurse is planning care for a patient with a different ethnic background. Which should be an appropriate goal?
- a. Adapt, as necessary, ethnic practices to health needs.
 - b. Attempt, in a nonjudgmental way, to change ethnic beliefs.
 - c. Encourage continuation of ethnic practices in the hospital setting.
 - d. Strive to keep ethnic background from influencing health needs.

ANS: A

Whenever possible, nurses should facilitate the integration of ethnic practices into health care provision. The ethnic background is part of the individual; it should be difficult to eliminate the influence of ethnic background. The ethnic practices need to be evaluated within the context of the health care setting to determine whether they are conflicting.

DIF: Cognitive Level: Applying
Caring

REF: p. 34

TOP: Integrated Process:

MSC: Client Needs: Psychosocial Integrity

6. The nurse discovers welts on the back of a Vietnamese child during a home health visit. The child's mother says she has rubbed the edge of a coin on her child's oiled skin. The nurse should recognize this as what?
- Child abuse
 - Cultural practice to rid the body of disease
 - Cultural practice to treat enuresis or temper tantrums
 - Child discipline measure common in the Vietnamese culture

ANS: B

This is descriptive of coining. The welts are created by repeatedly rubbing a coin on the child's oiled skin. The mother is attempting to rid the child's body of disease. Coining is a cultural healing practice. Coining is not specific for enuresis or temper tantrums. This is not child abuse or discipline.

DIF: Cognitive Level: Understanding

REF: p. 41

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

7. A Hispanic toddler has pneumonia. The nurse notices that the parent consistently feeds the child only the broth that comes on the clear liquid tray. Food items, such as Jell-O, Popsicles, and juices, are left. Which statement best explains this?
- The parent is trying to feed the child only what the child likes most.
 - Hispanics believe the "evil eye" enters when a person gets cold.
 - The parent is trying to restore normal balance through appropriate "hot" remedies.
 - Hispanics believe an innate energy called chi is strengthened by eating soup.

ANS: C

In several cultures, including Filipino, Chinese, Arabic, and Hispanic, hot and cold describe certain properties completely unrelated to temperature. Respiratory conditions such as pneumonia are "cold" conditions and are treated with "hot" foods. The child may like broth but is unlikely to always prefer it to Jell-O, Popsicles, and juice. The evil eye applies to a state of imbalance of health, not curative actions. Chinese individuals, not Hispanic individuals, believe in chi as an innate energy.

DIF: Cognitive Level: Applying

REF: p. 40

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

8. How is family systems theory best described?
- The family is viewed as the sum of individual members.
 - A change in one family member cannot create a change in other members.
 - Individual family members are readily identified as the source of a problem.
 - When the family system is disrupted, change can occur at any point in the system.

ANS: D

Family systems theory describes an interactional model. Any change in one member will create change in others. Although the family is the sum of the individual members, family systems theory focuses on the number of dyad interactions that can occur. The interactions, not the individual members, are considered to be the problem.

DIF: Cognitive Level: Analyzing
TOP: Nursing Process: Assessment

REF: p. 18
MSC: Client Needs: Psychosocial Integrity

9. Which family theory is described as a series of tasks for the family throughout its life span?
- Exchange theory
 - Developmental theory
 - Structural-functional theory
 - Symbolic interactional theory

ANS: B

In developmental systems theory, the family is described as a small group, a semiclosed system of personalities that interact with the larger cultural system. Changes do not occur in one part of the family without changes in others. Exchange theory assumes that humans, families, and groups seek rewarding statuses so that rewards are maximized while costs are minimized. Structural-functional theory states that the family performs at least one societal function while also meeting family needs. Symbolic interactional theory describes the family as a unit of interacting persons with each occupying a position within the family.

DIF: Cognitive Level: Remembering
TOP: Nursing Process: Assessment

REF: p. 19
MSC: Client Needs: Psychosocial Integrity

10. Which family theory explains how families react to stressful events and suggests factors that promote adaptation to these events?
- Interactional theory
 - Family stress theory
 - Erikson's psychosocial theory
 - Developmental systems theory

ANS: B

Family stress theory explains the reaction of families to stressful events. In addition, the theory helps suggest factors that promote adaptation to the stress. Stressors, both positive and negative, are cumulative and affect the family. Adaptation requires a change in family structure or interaction. Interactional theory is not a family theory. Interactions are the basis of general systems theory. Erikson's theory applies to individual growth and development, not families. Developmental systems theory is an outgrowth of Duvall's theory. The family is described as a small group, a semiclosed system of personalities that interact with the larger cultural system. Changes do not occur in one part of the family without changes in others.

DIF: Cognitive Level: Remembering
TOP: Nursing Process: Assessment

REF: p. 19
MSC: Client Needs: Psychosocial Integrity

11. Which type of family should the nurse recognize when the paternal grandmother, the parents, and two minor children live together?

- a. Blended
- b. Nuclear
- c. Extended
- d. Binuclear

ANS: C

An extended family contains at least one parent, one or more children, and one or more members (related or unrelated) other than a parent or sibling. A blended family contains at least one stepparent, stepsibling, or half-sibling. A nuclear family consists of two parents and their children. No other relatives or nonrelatives are present in the household. In binuclear families, parents continue the parenting role while terminating the spousal unit. For example, when joint custody is assigned by the court, each parent has equal rights and responsibilities for the minor child or children.

DIF: Cognitive Level: Remembering
TOP: Nursing Process: Assessment

REF: pp. 20-21
MSC: Client Needs: Psychosocial Integrity

12. Which type of family should the nurse recognize when a mother, her children, and a stepfather live together?
- a. Traditional nuclear
 - b. Blended
 - c. Extended
 - d. Binuclear

ANS: B

A blended family contains at least one stepparent, stepsibling, or half-sibling. A traditional nuclear family consists of a married couple and their biologic children. No other relatives or nonrelatives are present in the household. An extended family contains at least one parent, one or more children, and one or more members (related or unrelated) other than a parent or sibling. In binuclear families, parents continue the parenting role while terminating the spousal unit. For example, when joint custody is assigned by the court, each parent has equal rights and responsibilities for the minor child or children.

DIF: Cognitive Level: Remembering
TOP: Nursing Process: Assessment

REF: p. 20
MSC: Client Needs: Psychosocial Integrity

13. Which is an accurate description of homosexual (or gay-lesbian) families?
- a. A nurturing environment is lacking.
 - b. The children become homosexual like their parents.
 - c. The stability needed to raise healthy children is lacking.
 - d. The quality of parenting is equivalent to that of nongay parents.

ANS: D

Although gay or lesbian families may be different from heterosexual families, the environment can be as healthy as any other. Lacking a nurturing environment and stability is reflective on the parents and family, not the type of family. There is little evidence to support that children become homosexual like their parents.

DIF: Cognitive Level: Understanding
TOP: Nursing Process: Assessment

REF: pp. 21-22
MSC: Client Needs: Psychosocial Integrity

14. The nurse is teaching a group of new nursing graduates about identifiable qualities of strong families that help them function effectively. Which quality should be included in the teaching?
- a. Lack of congruence among family members
 - b. Clear set of family values, rules, and beliefs
 - c. Adoption of one coping strategy that always promotes positive functioning in dealing with life events
 - d. Sense of commitment toward growth of individual family members as opposed to that of the family unit

ANS: B

A clear set of family rules, values, and beliefs that establish expectations about acceptable and desired behavior is one of the qualities of strong families that help them function effectively. Strong families have a sense of congruence among family members regarding the value and importance of assigning time and energy to meet needs. Varied coping strategies are used by strong families. The sense of commitment is toward the growth and well-being of individual family members, as well as the family unit.

DIF: Cognitive Level: Applying REF: p. 22

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

15. When assessing a family, the nurse determines that the parents exert little or no control over their children. This style of parenting is called which?
- a. Permissive
 - b. Dictatorial
 - c. Democratic
 - d. Authoritarian

ANS: A

Permissive parents avoid imposing their own standards of conduct and allow their children to regulate their own activity as much as possible. The parents exert little or no control over their children's actions. Dictatorial or authoritarian parents attempt to control their children's behavior and attitudes through unquestioned mandates. They establish rules and regulations or standards of conduct that they expect to be followed rigidly and unquestioningly. Democratic parents combine permissive and dictatorial styles. They direct their children's behavior and attitudes by emphasizing the reasons for rules and negatively reinforcing deviations. They respect their children's individual natures.

DIF: Cognitive Level: Remembering REF: p. 24

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

16. When discussing discipline with the mother of a 4-year-old child, which should the nurse include?
- a. Parental control should be consistent.
 - b. Withdrawal of love and approval is effective at this age.
 - c. Children as young as 4 years rarely need to be disciplined.
 - d. One should expect rules to be followed rigidly and unquestioningly.

ANS: A

For effective discipline, parents must be consistent and must follow through with agreed-on actions. Withdrawal of love and approval is never appropriate or effective. The 4-year-old child will test limits and may misbehave. Children of this age do not respond to verbal reasoning. Realistic goals should be set for this age group. Discipline is necessary to reinforce these goals. Discipline strategies should be appropriate to the child's age and temperament and the severity of the misbehavior. Following rules rigidly and unquestioningly is beyond the developmental capabilities of a 4-year-old child.

DIF: Cognitive Level: Applying REF: p. 24
TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Psychosocial Integrity

17. Which is a consequence of the physical punishment of children, such as spanking?
- a. The psychologic impact is usually minimal.
 - b. The child's development of reasoning increases.
 - c. Children rarely become accustomed to spanking.
 - d. Misbehavior is likely to occur when parents are not present.

ANS: D

Through the use of physical punishment, children learn what they should not do. When parents are not around, it is more likely that children will misbehave because they have not learned to behave well for their own sake but rather out of fear of punishment. Spanking can cause severe physical and psychologic injury and interfere with effective parent-child interaction. The use of corporal punishment may interfere with the child's development of moral reasoning. Children do become accustomed to spanking, requiring more severe corporal punishment each time.

DIF: Cognitive Level: Analyzing REF: p. 26
TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Psychosocial Integrity

18. The parents of a young child ask the nurse for suggestions about discipline. When discussing the use of time-outs, which should the nurse include?
- a. Send the child to his or her room if the child has one.
 - b. A general rule for length of time is 1 hour per year of age.
 - c. Select an area that is safe and nonstimulating, such as a hallway.
 - d. If the child cries, refuses, or is more disruptive, try another approach.

ANS: C

The area must be nonstimulating and safe. The child becomes bored in this environment and then changes behavior to rejoin activities. The child's room may have toys and activities that negate the effect of being separated from the family. The general rule is 1 minute per year of age. An hour per year is excessive. When the child cries, refuses, or is more disruptive, the time-out does not start; the time-out begins when the child quiets.

DIF: Cognitive Level: Remembering REF: p. 26
TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Psychosocial Integrity

19. A 3-year-old child was adopted immediately after birth. The parents have just asked the nurse how they should tell the child that she is adopted. Which guideline concerning adoption should the nurse use in planning a response?
- It is best to wait until the child asks about it.
 - The best time to tell the child is between the ages of 7 and 10 years.
 - It is not necessary to tell a child who was adopted so young.
 - Telling the child is an important aspect of their parental responsibilities.

ANS: D

It is important for the parents not to withhold information about the adoption from the child. It is an essential component of the child's identity. There is no recommended best time to tell children. It is believed that children should be told young enough so they do not remember a time when they did not know. It should be done before the children enter school to prevent third parties from telling the children before the parents have had the opportunity.

DIF: Cognitive Level: Analyzing REF: p. 27

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

20. Children may believe that they are responsible for their parents' divorce and interpret the separation as punishment. At which age is this most likely to occur?
- 1 year
 - 4 years
 - 8 years
 - 13 years

ANS: B

Preschool-age children are most likely to blame themselves for the divorce. A 4-year-old child will fear abandonment and express bewilderment regarding all human relationships. A 4-year-old child has magical thinking and believes his or her actions cause consequences, such as divorce. For infants, divorce may increase their irritability and interfere with the attachment process, but they are too young to feel responsibility. School-age children will have feelings of deprivation, including the loss of a parent, attention, money, and a secure future. Adolescents are able to disengage themselves from the parental conflict.

DIF: Cognitive Level: Analyzing

REF: p. 29

TOP: Nursing Process:

Planning

MSC: Client Needs: Psychosocial Integrity

21. A parent of a school-age child tells the school nurse that the parents are going through a divorce. The child has not been doing well in school and sometimes has trouble sleeping. The nurse should recognize this as what?
- Indicative of maladjustment
 - A common reaction to divorce
 - Suggestive of a lack of adequate parenting
 - An unusual response that indicates a need for referral

ANS: B

Parental divorce affects school-age children in many ways. In addition to difficulties in school, they often have profound sadness, depression, fear, insecurity, frequent crying, loss of appetite, and sleep disorders. The child's responses are common reactions of school-age children to parental divorce.

DIF: Cognitive Level: Applying REF: p. 29

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

22. A mother brings 6-month-old Eric to the clinic for a well-baby checkup. She comments, "I want to go back to work, but I don't want Eric to suffer because I'll have less time with him." Which is the nurse's most appropriate answer?
- "I'm sure he'll be fine if you get a good babysitter."
 - "You will need to stay home until Eric starts school."
 - "Let's talk about the child care options that will be best for Eric."
 - "You should go back to work so Eric will get used to being with others."

ANS: C

Asking the mother about child care options is an open-ended statement that will assist the mother in exploring her concerns about what is best for both her and Eric. The other three answers are directive; they do not address the effect that her working will have on Eric.

DIF: Cognitive Level: Applying REF: p. 32

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

23. A foster parent is talking to the nurse about the health care needs for the child who has been placed in the parent's care. Which statement best describes the health care needs of foster children?
- Foster children always come from abusive households and are emotionally fragile.
 - Foster children tend to have a higher than normal incidence of acute and chronic health problems.
 - Foster children are usually born prematurely and require technologically advanced health care.
 - Foster children will not stay in the home for an extended period, so health care needs are not as important as emotional fulfillment.

ANS: B

Children who are placed in foster care have a higher incidence of acute and chronic health problems and may experience feelings of isolation and confusion; therefore, they should be monitored closely. Foster children do not always come from abusive households and may or may not be emotionally fragile; not all foster children are born prematurely or require technically advanced health care; and foster children may stay in the home for extended periods, so their health care needs require attention.

DIF: Cognitive Level: Applying REF: p. 32

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

24. The nurse is planning to counsel family members as a group to assess the family's group dynamics. Which theoretic family model is the nurse using as a framework?
- Feminist theory

- b. Family stress theory
- c. Family systems theory
- d. Developmental theory

ANS: C

In family systems theory, the family is viewed as a system that continually interacts with its members and the environment. The emphasis is on the interaction between the members; a change in one family member creates a change in other members, which in turn results in a new change in the original member. Assessing the family's group dynamics is an example of using this theory as a framework. Family stress theory explains how families react to stressful events and suggests factors that promote adaptation to stress. Developmental theory addresses family change over time using Duvall's family life cycle stages based on the predictable changes in the family's structure, function, and roles, with the age of the oldest child as the marker for stage transition. Feminist theories assume that privilege and power are inequitably distributed based upon gender, race, and class.

DIF: Cognitive Level: Applying
Planning

REF: p. 18

TOP: Nursing Process:

MSC: Client Needs: Psychosocial Integrity

25. The nurse is reviewing the importance of role learning for children. The nurse understands that children's roles are primarily shaped by which members?
- a. Peers
 - b. Parents
 - c. Siblings
 - d. Grandparents

ANS: B

Children's roles are shaped primarily by the parents, who apply direct or indirect pressures to induce or force children into the desired patterns of behavior or direct their efforts toward modification of the role responses of the child on a mutually acceptable basis.

DIF: Cognitive Level: Analyzing
TOP: Nursing Process: Assessment

REF: pp. 22-23

MSC: Client Needs: Psychosocial Integrity

26. The nurse is caring for an adolescent hospitalized for asthma. The adolescent belongs to a large family. The nurse recognizes that the adolescent is likely to relate to which group?
- a. Peers
 - b. Parents
 - c. Siblings
 - d. Teachers

ANS: A

Adolescents from a large family are more peer oriented than family oriented. Adolescents in small families identify more strongly with their parents and rely more on them for advice.

DIF: Cognitive Level: Understanding
Caring
MSC: Client Needs: Psychosocial Integrity

REF: p. 23

TOP: Integrated Process:

27. The nurse is explaining different parenting styles to a group of parents. The nurse explains that an authoritative parenting style can lead to which child behavior?
- Shyness
 - Self-reliance
 - Submissiveness
 - Self-consciousness

ANS: B

Children raised by parents with an authoritative parenting style tend to have high self-esteem and are self-reliant, assertive, inquisitive, content, and highly interactive with other children. Children raised by parents with an authoritarian parenting style tend to be sensitive, shy, self-conscious, retiring, and submissive.

DIF: Cognitive Level: Applying REF: p. 24

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

28. Parents of a preschool child ask the nurse, "Should we set rules for our child as part of a discipline plan?" Which is an accurate response by the nurse?
- "It is best to delay the punishment if a rule is broken."
 - "The child is too young for rules. At this age, unrestricted freedom is best."
 - "It is best to set the rules and reason with the child when the rules are broken."
 - "Set clear and reasonable rules and expect the same behavior regardless of the circumstances."

ANS: D

Nurses can help parents establish realistic and concrete "rules." The clearer the limits that are set and the more consistently they are enforced, the less need there is for disciplinary action. Delaying punishment weakens its intent. Children want and need limits.

Unrestricted freedom is a threat to their security and safety. Reasoning involves explaining why an act is wrong and is usually appropriate for older children, especially when moral issues are involved. However, young children cannot be expected to "see the other side" because of their egocentrism.

DIF: Cognitive Level: Applying REF: p. 25

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

29. The nurse is discussing issues that are important with parents considering a cross-racial adoption. Which statement made by the parents indicates further teaching is needed?
- "We will try to preserve the adopted child's racial heritage."
 - "We are glad we will be getting full medical information when we adopt our child."
 - "We will make sure to have everyone realize this is our child and a member of the family."
 - "We understand strangers may make thoughtless comments about our child being different from us."

ANS: B

In international adoptions, the medical information the parents receive may be incomplete or sketchy; weight, height, and head circumference are often the only objective information present in the child's medical record. Further teaching is needed if the parents expect full medical information. It is advised that parents who adopt children with different ethnic backgrounds do everything to preserve the adopted children's racial heritage. Strangers may make thoughtless comments and talk about the children as though they were not members of the family. It is vital that family members declare to others that this is their child and a cherished member of the family.

DIF: Cognitive Level: Applying REF: pp. 27-28
TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Psychosocial Integrity

30. The school nurse understands that children are impacted by divorce. Which has the most impact on the positive outcome of a divorce?
- Age of the child
 - Gender of the child
 - Family characteristics
 - Ongoing family conflict

ANS: C

Family characteristics are more crucial to the child's well-being during a divorce than specific child characteristics, such as age or sex. High levels of ongoing family conflict are related to problems of social development, emotional stability, and cognitive skills for the child.

DIF: Cognitive Level: Understanding REF: p. 29 TOP: Integrated Process: Caring
MSC: Client Needs: Psychosocial Integrity

31. The nurse is discussing parenting in reconstituted families with a new stepparent. The nurse is aware that the new stepparent understands the teaching when which statement is made?
- "I am glad there will be no disruption in my lifestyle."
 - "I don't think children really want to live in a two-parent home."
 - "I realize there may be power conflicts bringing two households together."
 - "I understand contact between grandparents should be kept to a minimum."

ANS: C

The entry of a stepparent into a ready-made family requires adjustments for all family members. Power conflicts are expected, and flexibility, mutual support, and open communication are critical in successful relationships. So the statement that power conflicts are possible means teaching was understood. Some obstacles to the role adjustments and family problem solving include disruption of previous lifestyles and interaction patterns, complexity in the formation of new ones, and lack of social supports. Most children from divorced families want to live in a two-parent home. There should be continued contact with grandparents.

DIF: Cognitive Level: Applying REF: p. 31
TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Psychosocial Integrity

MULTIPLE RESPONSE

1. The nurse is presenting a staff development program about understanding culture in the health care encounter. Which components should the nurse include in the program? (*Select all that apply.*)
 - a. Cultural humility
 - b. Cultural research
 - c. Cultural sensitivity
 - d. Cultural competency

ANS: A, C, D

There are several different ways health care providers can best attend to all the different facets that make up an individual's culture. Cultural competence tends to promote building information about a specific culture. Cultural sensitivity, a second way of understanding culture in the context of the clinical encounter, may be understood as a way of using one's knowledge, consideration, understanding, respect, and tailoring after realizing awareness of self and others and encountering a diverse group or individual. Cultural humility, the third component, is a commitment and active engagement in a lifelong process that individuals enter into for an ongoing basis with patients, communities, colleagues, and themselves. Cultural research is not a component of understanding culture in the health care encounter.

DIF: Cognitive Level: Analyzing REF: p. 38

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

2. The parents of a 5-year-old child ask the nurse how they can minimize misbehavior. Which responses should the nurse give? (*Select all that apply.*)
 - a. Set clear and reasonable goals.
 - b. Praise your child for desirable behavior.
 - c. Don't call attention to unacceptable behavior.
 - d. Teach desirable behavior through your own example.
 - e. Don't provide an opportunity for your child to have any control.

ANS: A, B, D

To minimize misbehavior, parents should (1) set clear and reasonable rules and expect the same behavior regardless of the circumstances, (2) praise children for desirable behavior with attention and verbal approval, and (3) teach desirable behavior through their own example. Parents should call attention to unacceptable behavior as soon as it begins and provide children with opportunities for power and control.

DIF: Cognitive Level: Applying REF: p. 25

TOP: Integrated Process: Teaching/Learning

MSC: Client Needs: Psychosocial Integrity

3. Which describe the feelings and behaviors of early preschool children related to divorce? (*Select all that apply.*)
 - a. Regressive behavior
 - b. Fear of abandonment
 - c. Fear regarding the future

- d. Blame themselves for the divorce
- e. Intense desire for reconciliation of parents

ANS: A, B, D

Feelings and behaviors of early preschool children related to divorce include regressive behavior, fear of abandonment, and blaming themselves for the divorce. Fear regarding the future and intense desire for reconciliation of parents is a reaction later school-age children have to divorce.

DIF: Cognitive Level: Understanding REF: p. 29 TOP: Integrated Process: Caring
MSC: Client Needs: Psychosocial Integrity

4. Which describe the feelings and behaviors of adolescents related to divorce? (*Select all that apply.*)
- a. Disturbed concept of sexuality
 - b. May withdraw from family and friends
 - c. Worry about themselves, parents, or siblings
 - d. Expression of anger, sadness, shame, or embarrassment
 - e. Engage in fantasy to seek understanding of the divorce

ANS: A, B, C, D

Feelings and behaviors of adolescents related to divorce include a disturbed concept of sexuality; withdrawing from family and friends; worrying about themselves, parents, and siblings; and expressions of anger, sadness, shame, and embarrassment. Engaging in fantasy to seek understanding of the divorce is a reaction by a child who has preconceptual cognitive processes, not the formal thinking processes adolescents have.

DIF: Cognitive Level: Understanding REF: p. 29 TOP: Integrated Process: Caring
MSC: Client Needs: Psychosocial Integrity

5. The nurse is teaching parents about the effects of media on childhood obesity. The nurse realizes the parents understand the teaching if they make which statements? (*Select all that apply.*)
- a. "Advertising of unhealthy food can increase snacking."
 - b. "Increased screen time may be related to unhealthy sleep."
 - c. "There is a link between the amount of screen time and obesity."
 - d. "Increased screen time can lead to better knowledge of nutrition."
 - e. "Physical activity increases when children increase the amount of screen time."

ANS: A, B, C

A number of studies have demonstrated a link between the amount of screen time and obesity. Advertising of unhealthy food to children is a long-standing marketing practice, which may increase snacking in the face of decreased activity. In addition, both increased screen time and unhealthy eating may also be related to unhealthy sleep. Increased screen time does not lead to a better knowledge of nutrition or increased physical activity.

DIF: Cognitive Level: Applying REF: p. 38
TOP: Integrated Process: Teaching/Learning
MSC: Client Needs: Psychosocial Integrity

MATCHING

Culture characterizes a particular group with its values, beliefs, norms, patterns, and practices that are learned, shared, and transmitted from one generation to another. Match the terms used to describe groups with shared values, beliefs, norms, patterns, and practices.

- a. Race
 - b. Gender
 - c. Ethnicity
 - d. Social class
 - e. Socialization
1. Incorporates levels of education, occupation, income, and access to resources
 2. Distinguishes humans by physical traits
 3. Persons who have unique cultural, social, and linguistic heritage
 4. Process by which society communicates its competencies, values, and expectations
 5. An individual's self-identification as man or woman
1. ANS: D DIF: Cognitive Level: Understanding REF: p. 39
TOP: Integrated Process: Caring MSC: Client Needs: Psychosocial Integrity
 2. ANS: A DIF: Cognitive Level: Understanding REF: p. 39
TOP: Integrated Process: Caring MSC: Client Needs: Psychosocial Integrity
 3. ANS: C DIF: Cognitive Level: Understanding REF: p. 39
TOP: Integrated Process: Caring MSC: Client Needs: Psychosocial Integrity
 4. ANS: E DIF: Cognitive Level: Understanding REF: p. 39
TOP: Integrated Process: Caring MSC: Client Needs: Psychosocial Integrity
 5. ANS: B DIF: Cognitive Level: Understanding REF: p. 39
TOP: Integrated Process: Caring MSC: Client Needs: Psychosocial Integrity