

***Medical and Psychosocial Aspects of Chronic Illness
and Disability 6th edition Falvo Test Bank***

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***Medical and Psychosocial Aspects of Chronic Illness and
Disability, Sixth Edition***

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Test Bank

Chapter 1

Conceptualizing Functioning, Disability, and Health

MULTIPLE CHOICE TEST QUESTIONS

1. ICF provides an international standard for describing and measuring health domains and is a universal classification of functional status associated with a number of:
 - A. **health conditions**
 - B. disabilities
 - C. impairments
 - D. diseases

2. A key component of the social model is:
 - A. civil rights
 - B. human rights
 - C. **equality**
 - D. reasonable accommodation

3. The International Classification of Functioning, Disability and Health (ICF) emphasizes:
 - A. integration of health conditions
 - B. societal factors
 - C. environmental and personal factors
 - D. **all of the above**

4. _____ is defined as a restriction or lack of ability to perform an activity.
 - A. Function
 - B. **Disability**
 - C. Health
 - D. Illness

5. The core structure of the ICF is divided into two parts, each with two components. The first part is:

- A. **functional impact and disability**
- B. function and activity
- C. function and participation
- D. function and body structure

6. The biopsychosocial model uses concepts from what two models of disability?

- A. Medical and personal
- B. Social and health
- C. **Social and medical**
- D. Medical and environmental

7. What does the medical model rely heavily upon?

- A. Conforming to social norms
- B. **Measures and tests of the disease process**
- C. Functionality
- D. Psychological factors

8. Physical and psychological functions are components of:

- A. experience
- B. **health**
- C. cures
- D. classifications

9. Which of the following is one of the uses of the ICF?

- A. Serve as a catalyst for diagnoses
- B. **Clarifies team roles**
- C. Highlights the impact of social factors
- D. Structure to facilitate comparisons

10. _____ refers to a deviation from certain generally accepted population standards of function.

- A. Impairment**
- B. Ability
- C. Disability
- D. Disruption

DISCUSSION TEST QUESTIONS

1. The focus of the ICF is on health and function in the relationship to the client's disability. Discuss the four key terms in its conceptual framework, and how these definitions have changed the views of society toward health conditions.
 - A. Health**
 - B. Function**
 - C. Disability**
 - D. Impairment**

2. Mr. Thomas was involved in a farm accident resulting in the above-knee amputation of his left leg. He now wears a prosthesis and continues full operation of all his previous farming activities. Discuss how his injury has not caused him to be considered disabled. Address the following issues:
 - A. How one client would be resilient following an impairment while another client would not be able to function at their previous levels?**
 - B. Societal and environmental factors in Mr. Thomas's lifestyle.**
 - C. Future changes that Mr. Thomas might experience.**

3. Compare and contrast the optimal functioning versus maximum functioning.
 - A. Which one is the ideal goal**
 - B. Strengths versus weaknesses of each one**
 - C. Understanding of the condition by the client within the context of their relationship between their environment and their own frame of reference**

4. Within the core structure of the classifications developed by the ICF, discuss how the environmental factors are divided into the three various levels.

- A. Individual level**
- B. Services level**
- C. Cultural/legal systems level**

5. Discuss how understanding of health conditions as an experience rather than as a medical condition can help to decrease discrimination and prejudice of chronic illnesses and disabilities.

- A. It is individual, dynamic, and varies in different circumstances and environments.**
- B. It implies that not all individuals (even those with the same condition) are affected by disability in the same way.**
- C. How people perceive disability and its impact has an affect on the result of the condition and the personal factors that the individual encounters.**

6. Discuss the individual focuses and primary differences of the following three disability models.

- A. Medical**
- B. Social**
- C. Biopsychological**

7. The biopsychosocial model states that numerous factors play a role in an individual's ability to function. Discuss how the three following factors affected either a health condition you or someone close to you has experienced.

- A. Biological**
- B. Psychological**
- C. Social factor**

8. The ICF can serve as a catalyst for research. Discuss a health condition where more research is needed and how the ICF can help.

9. Discuss how conceptualizing chronic illness and disability as health conditions in the context of the continuum of health and function helps to decrease stigmatization and isolation.
- A. Conceptualizing chronic illness and disability as health conditions in terms of functional capacity rather than as a medical diagnosis permits a greater understanding of the individual's subjective experience of his or her health condition.**
 - B. Health and disability are viewed as a universal human experience with an emphasis on the integration of biological, individual, social, and environmental aspects of a health condition.**
10. The social model paralleled the civil rights/human rights movements in the United States. Why was this time in history so important in helping to change the viewpoints regarding the models of disability?
- A. In the United States, the Americans with Disabilities Act, enacted in 1990, established the right of individuals with disability to receive reasonable accommodations that would enable them to function in the environment, and prohibited discrimination based on their disability.**
 - B. In accordance with the social model, disability was viewed not as a specific medical condition, but rather as the result of the restrictions imposed through society's lack of attention and accommodation to the needs of individuals with disability.**

Chapter 2

Psychosocial and Functional Aspects of Health Conditions

MULTIPLE CHOICE TEST QUESTIONS

1. How individuals experience health conditions depends on many factors. Which of the following is NOT a factor in their experience?
 - A. Personal factors
 - B. **Seriousness of their medical condition**
 - C. Culture
 - D. Goals of the individual

2. The term _____ comes from the medical model, referring to changes in structure or function of body systems and focuses on treatment and elimination of symptoms.
 - A. illness
 - B. **disease**
 - C. disability
 - D. complaint

3. _____ and _____ are key concepts influencing the management of a health condition by medical personnel. (Choose all that apply.)
 - A. **Acute**
 - B. Disability
 - C. **Chronic**
 - D. Illness

4. The course of a health condition over time, including the actions of the individuals and their families to manage or shape the course path of their condition is called:
 - A. course
 - B. **trajectory**
 - C. goals
 - D. episodes

5. Whether the individual views their condition in positive or negative terms depends on which of following?
- A. Perceptions
 - B. Circumstances
 - C. Attitudes
 - D. **All of the above**
6. All the following are examples of subconscious coping strategies used by individuals to help reduce their anxiety and achieve balance in their lives *except*:
- A. denial
 - B. regression
 - C. **bargaining**
 - D. compensation
 - E. diversion of feelings
7. _____ is (are) a normal reaction(s) to loss.
- A. Grief
 - B. Depression
 - C. Anger
 - D. **All of the above**
8. Health conditions in young adulthood may:
- A. inhibit efforts by an individual to build intimate relationships
 - B. define social, vocational, and occupational goals
 - C. decrease independence
 - D. **All of the above**
9. _____ is defined as an individual's perceptions and beliefs about their personal strengths and weaknesses, as well as how others perceive them.
- A. Self-esteem

- B. **Self-concept**
 - C. Body image
 - D. Self-worth
10. Stigmas associated with health conditions are:
- A. **a socially constructed concept that is a universal phenomenon and has evolved throughout history.**
 - B. no longer important following societal changes.
 - C. a result of familial and personal beliefs and exists only in the mind of the individual.
 - D. are not anxiety provoking and threatening to others.
11. Quality of life can be described as:
- A. an easy natural concept.
 - B. **subjective in nature, with no universal meaning.**
 - C. something only others can define.
 - D. an experience shared by others.
12. Noncompliance to management recommendations may be caused by:
- A. guilt or shame
 - B. feelings about life circumstances
 - C. impact of a health condition on an individual's general economic well-being
 - D. **All of the above**

DISCUSSION TEST QUESTIONS

1. Discuss how the following factors may influence an individual's response to health conditions. List how the individual would use each category to reach maximum adjustment levels.
 - A. **Personal factors**
 - B. **Social and family relationships and social support**

- C. Socioeconomic status**
 - D. Culture**
 - E. Environmental factors**
 - F. Activities**
 - G. Individual goals**
2. The degree of stress associated with a health condition may be dependent on the amount of threat the condition represents to the individual. Discuss the following various types of perceived and actual threats individuals are faced with.
- A. Threats to life and physical well-being**
 - B. Threats to body integrity and comfort**
 - C. Threats to independence, privacy, autonomy, and control**
 - D. Threats to self-concept and fulfillment**
 - E. Threats to relationships—family, friends, and colleagues**
 - F. Threats to the ability to remain in familiar surrounding**
 - G. Threats to economic well-being**
3. Coping behavior is either adaptive and effective or maladaptive and ineffective. Compare and contrast how individuals past coping skills will help them face their change in conditions in a positive versus negative way. Include the part played by the individual's environment and social support system. Give examples of individuals with both adaptive and maladaptive coping skills.
- A. Adaptive is when it helps individuals and reduces stress and enhances potential.**
 - B. Maladaptive is when it inhibits growth or potential or when it contributes to physical or mental deterioration.**
4. Mrs. Brown, aged 73, has recently been placed in a nursing care facility following repeated falls at home. Since her admission, she states that her friends do not want to come and see her because they do not like nursing homes. Explain what a stigma is.
- A. Stigma is a socially constructed concept that is a universal phenomenon and has evolved throughout history. It is generally associated with individual feelings of shame due to disapproval of others and guilt resulting from being discredited or devalued by others.**
 - B. Older adults are often stigmatized because aging is a reminder of mortality and vulnerability.**

5. Invite a rehabilitation nurse or case management nurse to come to the class to provide students a clearer understanding of how individuals with health conditions can lead a full life despite their altered functional capacity.
6. Compare and contrast the changes in activities and participation one might experience between an acute onset condition (such as an asthma attack) and a chronic condition (such as COPD).
 - A. **Acute refers to sudden onset of symptoms that are short term in nature and affect functional capacity on a temporary basis.**
 - B. **Chronic refers to symptoms that last indefinitely and are attributed to a cause that may or may not be able to be identified.**
7. Denial is a coping strategy to negate the reality of the situation. Discuss why an individual may participate in this behavior.
 - A. **As a way to deal with anxiety, individuals may subconsciously use denial to negate the reality of the situation. In the early stages of adjustment, denial may be beneficial, in that it enables individuals to adjust to the reality of their situation at their own pace, preventing excessive anxiety. When denial continues over time, it can interfere with adequate management of the condition or impeded the process of learning new skills that would enhance functional capacity.**
8. Health conditions can pose a threat because of the potential loss of function, loss of love, loss of independence, or loss of financial security. These threats can produce feelings of fear and anxiety. Discuss a situation in which you felt afraid and anxious. How did you regain control over the situation?
9. Signs of depression include sleep disturbances, changes in appetite, difficulty concentrating, and withdrawal from activity. Discuss the long-term implications of depression and ways in which depression can be treated to avoid these implications.
 - A. **The extent to which and whether depression is experienced vary from person to person. Prolonged or unresolved depression can result in self-destructive behaviors, such as substance abuse or attempted suicide. Individuals with prolonged depression should be referred for mental health evaluation and treatment.**
10. Explain what grief is and how long it usually lasts.

- A. Grief is a natural reaction to loss. Assumptions regarding the meaning or degree of loss to an individual cannot be made, nor can assumptions be made regarding how, how long, or whether an individual will go through a grieving process. After a period of grieving, many individuals begin to accept changes resulting from the condition, and make adjustments and adaptations that are necessary to reestablish their place within the everyday world. In some instances, the grief reaction is prolonged, so that individuals may develop a pathological grief reaction, which may interfere with functional ability than the health condition itself.**