

Chapter 2: Health and the Individual

MULTIPLE CHOICE

1. Which of the following is the most current definition of *wellness*?
 - a. The absence of disease
 - b. The absence of risk factors in an individual's life
 - c. The perception that an individual has of his or her risk factors
 - d. The way an individual feels about his or her health and quality of life

ANS: D

Feedback	
A	The absence of disease does not define wellness; a person may feel well in spite of disease (e.g., a well-controlled diabetic).
B	Risk factors do not define wellness.
C	Risk factors do not define wellness.
D	This definition of wellness takes into account that an individual can describe himself or herself as "well," even when he or she has a disease.

DIF: Cognitive Level: Comprehension REF: p. 41

2. Historically, health was described as absence of disease. How did the World Health Organization (WHO) define health in 1948?
 - a. As a high level of physical fitness
 - b. As a sense of wellness
 - c. As being multidimensional
 - d. As a condition caused by social circumstances

ANS: C

Feedback	
A	Physical fitness is part of a state of health, but it is not multidimensional.
B	Wellness is part of a state of health, but it is not multidimensional.
C	In 1948, the WHO described health as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity."
D	Social circumstance is a factor in health, but it does not describe it.

DIF: Cognitive Level: Knowledge REF: p. 42

3. Which of the following lists incorporates three holistic elements of wellness?
 - a. Financial, physical, emotional
 - b. Fitness, intellectual, spiritual
 - c. Absence of disease, emotional, social
 - d. Physical, emotional, intellectual

ANS: D

Feedback	
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A	Financial health is not an element of wellness.
B	Fitness is not an element of wellness.
C	The absence of disease is not an element of wellness.
D	Models of wellness have five to seven elements of health that contribute to wellness: physical, emotional, intellectual, spiritual, social, and (in some models) environmental and occupational.

DIF: Cognitive Level: Comprehension REF: p. 42

4. What does *social wellness* refer to?
- An ability to make appropriate, informed decisions
 - Relating effectively to others
 - An ability to understand oneself and to recognize personal strengths and limitations
 - Seeking to contribute to society

ANS: B

Feedback	
A	An ability to make appropriate, informed decisions refers to intellectual wellness.
B	Social wellness is defined as relating effectively to others, including being able to form close, loving relationships, to laugh, to communicate effectively and emphatically, to be a good listener, and to respond appropriately.
C	An ability to understand oneself and to recognize personal strengths and limitations refers to emotional wellness.
D	Seeking to contribute to society refers to spiritual wellness.

DIF: Cognitive Level: Knowledge REF: p. 45

5. A personal support worker is asked by his patient what an “exacerbation” of his disease means. Which of the following is the correct response?
- The patient is showing a worsening of the signs of his disease.
 - The patient is showing no symptoms of his disease at the present time.
 - The patient is showing a group of symptoms.
 - The patient is feeling unhealthy, even though he has no active disease at the present time.

ANS: A

Feedback	
A	An exacerbation of a disease is when a patient shows a reappearance of the symptoms of a disease or shows an increase in the severity of a disease.
B	Showing no symptoms of a disease is a definition of <i>remission</i> .
C	Showing a group of symptoms is a definition of a <i>syndrome</i> .
D	Feeling unhealthy, even though one has no active disease at the present time, is a way of describing illness.

DIF: Cognitive Level: Comprehension REF: p. 47

6. How is the holistic model of health described?
- It is a model that states that health is the absence of disease.
 - It is a model that proposes that health is a process that evolves and progresses.
 - It is a model that considers all parts of the person.
 - It is a model that measures one's state of health.

ANS: C

	Feedback
A	A model that states that health is the absence of disease refers to the medical model.
B	A model that proposes that health is a process that evolves and progresses refers to the wellness model.
C	The holistic model of health considers all parts of the person. For example, when a client has newly diagnosed hypertension, health professionals will consider weight, risk behaviours, diet, stress, and ability to follow a medication regime.
D	A model that measures one's state of health refers to the health–illness continuum.

DIF: Cognitive Level: Synthesis REF: p. 49

7. Which of the following are examples of self-imposed risk behaviours?
- Smoking, sedentary lifestyle, low income
 - Smoking, sexual promiscuity, sedentary lifestyle
 - Smoking, substandard living conditions, sedentary lifestyle
 - Smoking, sedentary lifestyle, lack of education

ANS: B

	Feedback
A	Financial income is not necessarily controlled by the individual.
B	An individual has a choice about all of these risk behaviours, so they are self-imposed risks.
C	Living conditions are not necessarily controlled by the individual.
D	Level of education is not necessarily controlled by the individual.

DIF: Cognitive Level: Comprehension REF: p. 49

8. “Compensation” lies at the centre of the health–illness continuum. What does this mean?
- The client is close to an optimal health state.
 - The client is close to a poor health state.
 - The client is in an optimal physical health state but is mentally unhealthy.
 - The client is neither in an optimal nor poor health state but is able to continue with life activities.

ANS: D

	Feedback
A	Compensation does not occur when a patient is close to an optimal health state.
B	Compensation does not occur when a patient is close to a poor health state.

C	The health–illness continuum looks at all dimensions of health. If an individual is mentally unhealthy and unable to continue with life even though he or she is physically healthy, then the individual is not “compensated.”
D	Compensation occurs when an individual is able to accommodate a malady and resume or adapt to his or her daily activities.

DIF: Cognitive Level: Comprehension REF: p. 55

9. What behaviour might be observed during the “acknowledgement” stage of illness?
- The individual is unable to ignore his or her symptoms and seeks help.
 - The individual denies the diagnosis and seeks a second opinion.
 - The individual acknowledges the presence of symptoms and continues with his or her regular activities.
 - The individual analyzes his or her symptoms and self-treats.

ANS: A

	Feedback
A	Seeking help is indicative of the individual acknowledging that something is wrong.
B	Denial is a behaviour associated with the transitional stage.
C	Acknowledgment of the presence of symptoms and the continuation of one’s regular activities are seen in the preliminary phase.
D	Analysis of one’s own symptoms and self-treatment are seen in the preliminary phase.

DIF: Cognitive Level: Knowledge REF: p. 60

10. Which of the following is a definition of sick role behaviour?
- The inability to accept a diagnosis
 - The change of behaviour of hospitalized clients
 - A person’s response to disease or illness
 - Noncompliance to medication schedule

ANS: C

	Feedback
A	Denial can be seen in the transitional phase of the stages of illness.
B	Change of behaviour is an example, not a definition, of sick role behaviour.
C	Sick role behaviour is an individual’s response to illness, also referred to as a <i>behavioural illness response</i> .
D	Noncompliance to medication schedule is an example, not a definition, of sick role behaviour.

DIF: Cognitive Level: Knowledge REF: p. 57