

MULTIPLE CHOICE

1. Which of the following has largely been excluded from Canadian nursing history?
 - a. Female nurses' role in psychiatric nursing
 - b. Mental health field of study
 - c. Male attendants' role in institutions
 - d. Generalist registered nurses' role

ANS: B

While there has been much historical analysis of psychiatric mental health nursing in England, Holland, and the United States, Canadian nursing history has largely excluded the mental health field.

DIF: Cognitive Level: Understand (Comprehension)

REF: Page 17

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

2. Which is true of asylums?
 - a. Short-term stays
 - b. Cognitive-behavioural therapy experts
 - c. Place where people with mental illness could be cured
 - d. Middle to upper socioeconomic status patients with mental illness received treatment

ANS: C

Asylums, designed to be retreats from society, were built with the hope that, with early intervention and several months of rest, people with mental illness could be cured. Generally, people in asylums were patients from a lower socioeconomic status and those without family. Cognitive-behavioural therapy did not occur in asylums, and the stays were generally long term.

DIF: Cognitive Level: Understand (Comprehension)

REF: Page 17

TOP: Nursing Process: Assessment

MSC: Client Needs: Psychosocial Integrity

3. Which of the following represented a seventeenth– to eighteenth–century societal view of people with mental illness?
 - a. Restraints were not to be used on mentally ill patients.
 - b. Those with mental illness were immune to human discomforts.
 - c. Informed consent was required prior to admission to an asylum.
 - d. Patient neglect rarely if ever occurred in asylums.

ANS: B

Patients in these settings were often chained or caged, and cruelty or neglect was not uncommon. This type of treatment reflected the societal view that people with mental illness were bestial or less human in nature and, therefore, required discipline and were immune to human discomforts such as hunger or cold. Informed consent was to be a requirement of the very distant future.

4. The nurse is caring for a patient in an asylum in the mid-1800s in Canada. What would the nurse expect to implement?
- Assisting with eating and dressing
 - Group therapy interventions
 - Electroconvulsive therapy
 - Antipsychotic medication administration

ANS: A

In many asylums, a large population of people received only minimal custodial care—assistance in performing the basic daily necessities of life, such as dressing, eating, using a toilet, walking, etc. There were very few medications used in the 1800s and there were no formal group therapy or ECT treatments.

5. Who was instrumental in lobbying for the first mental health hospital in the United States and for reform in British and Canadian institutions?
- Michel Foucault
 - Dorothea Dix
 - The Grey Nuns
 - Philippe Pinel

ANS: B

During an encounter at a Boston jail, Dorothea Dix was shocked to witness the degrading treatment of a woman with mental illness who was imprisoned there. Passionate about social reform, she began advocating for the improved treatment and public care of people with mental illness. Dix met with many politicians and even the Pope to push her agenda forward. Ultimately, she was influential in lobbying for the first public mental hospital in the United States and for reform in British and Canadian institutions. Michel Foucault was a French philosopher. Philippe Pinel was a French physician. The Grey Nuns were early providers of care for people with mental illness.

6. The first asylum in Canada was in which of the following provinces?
- Alberta
 - Quebec
 - Ontario
 - British Columbia

ANS: B

Beauport, the first asylum in what would soon become Canada, was opened in Quebec in 1845.

7. The first psychiatric nurse training program in Canada was in which of the following provinces?
- Alberta
 - Quebec
 - Ontario
 - British Columbia

ANS: C

In 1888, Rockwood Asylum in Kingston, Ontario, became the first psychiatric institution in Canada to open a training program for nurses.

DIF: Cognitive Level: Understand (Comprehension)

REF: Page 19

TOP: Nursing Process: Implementation MSC: Client Needs: Psychosocial Integrity

8. The exclusion of males from attending psychiatric nurse training programs hindered which of the following?
- The availability of students to enter the training program
 - The ability of institutions to maintain enough trained nursing staff
 - The recognition of the importance of nursing knowledge and skills
 - The status of female nurses by lowering their status

ANS: C

Consistent with societal beliefs of the time about women's innate caring capacity, the training was offered only to females. This exclusion of males from the program hindered the recognition of the importance of nursing knowledge and skills as well as lowered the status of male attendants at the time.

DIF: Cognitive Level: Apply (Application)

REF: Page 19

TOP: Nursing Process: Implementation MSC: Client Needs: Psychosocial Integrity

9. The Canadian National Association of Trained Nurses was established in which of the following years?
- 1898
 - 1908
 - 1918
 - 1928

ANS: B

In the early part of the twentieth century, nurses' lack of control over their own profession began to shift with changes to nursing education models and blossoming political advocacy by nursing groups across Canada, particularly with the formation of the Canadian National Association of Trained Nurses in 1908.

DIF: Cognitive Level: Understand (Comprehension)

REF: Page 20

TOP: Nursing Process: Planning/Outcomes Identification

MSC: Client Needs: Psychosocial Integrity

10. Which was instrumental in the establishment of a psychiatry rotation to the nursing curriculum of Eastern and Atlantic Canada?
- Dorothea Dix
 - The "Weir Report"
 - The Canadian Nurses Association

d. The Canadian Medical Association

ANS: B

With the support of nurse leaders like Nettie Fiddler and the publication of the “Weir Report,” more generalist hospital programs began adding a psychiatry rotation to the curriculum.

DIF: Cognitive Level: Understand (Comprehension)

REF: Page 20

TOP: Nursing Process: Evaluation

MSC: Client Needs: Psychosocial Integrity

MULTIPLE RESPONSE

1. Which are historical approaches to caring for people with mental illness from an Aboriginal perspective? *Select all that apply.*
- Sweat lodges
 - Restraint and confinement
 - Sundance
 - Potlatch
 - Abandonment

ANS: A, C, D

Canada’s Aboriginal peoples had a variety of approaches to caring for people with mental illness. Most were holistic—treating mind, body, and soul—and included sweat lodges, animistic charms, potlatch, and Sundance.

DIF: Cognitive Level: Understand (Comprehension)

REF: Page 18

TOP: Nursing Process: Implementation

MSC: Client Needs: Psychosocial Integrity

2. By the end of the nineteenth century, the new field of psychiatry was being challenged to provide a medical cure for mental illness. Which experimental treatments were used at that time? *Select all that apply.*
- Leeching
 - Hydrotherapy
 - Electroconvulsive therapy
 - Insulin shock treatment
 - Milieu management therapy

ANS: A, B, D

Since there were few medications available other than heavily alcohol-based sedatives, doctors used many experimental treatments—for example, leeching (using bloodsucking worms), spinning (tying the patient to a chair and spinning it for hours), hydrotherapy (forced baths), and insulin shock treatment (injections of large doses of insulin to produce daily comas over several weeks). ECT was not introduced until the mid-twentieth century.

DIF: Cognitive Level: Apply (Application)

REF: Page 19

TOP: Nursing Process: Implementation

MSC: Client Needs: Psychosocial Integrity