

US Health Ch 2

Multiple Choice

Identify the choice that best completes the statement or answers the question.

- _____ 1. Which of the following is a psychological measure of health?
 - a. Blood pressure
 - b. The Center for Epidemiological Studies Depression Scale (CES-D)
 - c. White blood cell count
 - d. Temperature

- _____ 2. Which of the following is a physiological measure of health?
 - a. Blood pressure
 - b. Temperature
 - c. White blood cell count
 - d. None of the above

- _____ 3. National health status is often measured by calculating which of the following?
 - a. Disability-adjusted life expectancy
 - b. Infant mortality rate
 - c. Years of healthy life
 - d. All of the above

- _____ 4. Traditional measures of health include which of the following?
 - a. Mortality rates
 - b. Morbidity rates
 - c. Self-rated health status
 - d. All of the above

- _____ 5. Which of the following is true regarding mortality rates?
 - a. The poor have lower death rates than the non-poor.
 - b. Older people have lower death rates than younger people.
 - c. Female mortality rates are lower than male mortality rates.
 - d. None of the above

- _____ 6. Which of the following is true regarding disability rates?
 - a. The poor have higher rates of disability than the non-poor.
 - b. Older people have lower disability rates than younger people.
 - c. Women have lower disability rates than men.
 - d. None of the above

- _____ 7. Which of the following is NOT a major challenge in measuring health status?
 - a. It may be difficult to identify and measure all aspects of health status.
 - b. Mortality data are collected from death certificates and are easy to measure.
 - c. Answers based on hypothetical health states may not reflect what a person will actually believe if he or she is ever in that state.
 - d. No one measure is sufficient, yet it is also difficult to determine the relative importance of each measure.

- _____ 8. Which country had the highest rated health care system in 2000, according to WHO?
 - a. United States
 - b. Great Britain
 - c. France
 - d. Canada

- _____ 9. Which of the following factors was NOT considered by WHO when ranking and comparing nations' health care systems in 2000?
 - a. Health
 - b. Responsiveness
 - c. Health Care Expenditure per Capita

d. Number of uninsured

- _____ 10. Which of the following is the number one risk factor for premature death?
- a. Diabetes
 - b. Obesity
 - c. Smoking
 - d. Genetic history
- _____ 11. Which of the following is NOT one of the leading causes of death?
- a. Heart disease
 - b. Cancer
 - c. Stroke
 - d. Diabetes
- _____ 12. Young children are more likely to die because of which of the following?
- a. Injuries
 - b. Cancer
 - c. Congenital anomalies
 - d. All of the above
- _____ 13. The National Institute of Mental Health estimates that how many adults suffer from any mental disorder?
- a. One in four
 - b. One in ten
 - c. One in 20
 - d. One in 100
- _____ 14. Which of the following is a true statement?
- a. Hispanics and blacks are more likely to report good health than whites.
 - b. White males are more susceptible to firearm-related deaths and HIV infection.
 - c. Blacks have higher rates of heart disease and strokes than do whites.
 - d. Most of the morbidity and mortality difference between the races is due to racial and genetic factors.
- _____ 15. Which of the following are the leading causes of death for those aged 1-14?
- a. Injury, homicide, suicide, cancer, heart disease, HIV, congenital anomalies, stroke
 - b. Injuries, cancer, congenital anomalies, homicide
 - c. Unintentional injury, cancer, heart disease, suicide
 - d. Heart disease, cancer, stroke
- _____ 16. Which of the following are the leading causes of death for those aged 15-34?
- a. Injury, homicide, suicide, cancer, heart disease, HIV, congenital anomalies, stroke
 - b. Injuries, cancer, congenital anomalies, homicide
 - c. Unintentional injury, cancer, heart disease, suicide
 - d. Heart disease, cancer, stroke
- _____ 17. Which of the following are the leading causes of death for those aged 35-44?
- a. Injury, homicide, suicide, cancer, heart disease, HIV, congenital anomalies, stroke
 - b. Injuries, cancer, congenital anomalies, homicide
 - c. Unintentional injury, cancer, heart disease, suicide
 - d. Heart disease, cancer, stroke
- _____ 18. Which of the following are the leading causes of death for those aged 55+?
- a. Injury, homicide, suicide, cancer, heart disease, HIV, congenital anomalies, stroke
 - b. Injuries, cancer, congenital anomalies, homicide
 - c. Unintentional injury, cancer, heart disease, suicide
 - d. Heart disease, cancer, stroke
- _____ 19. Which of the following are the leading causes of death for those aged 45-54?
- a. Cancer, heart disease, unintentional injury, liver disease
 - b. Injuries, cancer, congenital anomalies, homicide
 - c. Unintentional injury, cancer, heart disease, suicide

- d. Heart disease, cancer, stroke

Completion

Complete each statement.

1. The infant mortality rate (IMR) is the rate of infant deaths (from live birth to 1 year) per _____ live births.
2. A _____ rate is one of the earliest “formal” measures of health and is still one of the most commonly used measures of health.
3. Mortality rates can be adjusted for age, _____, race, and other characteristics of the population to make the rates comparable across these factors.
4. Morbidity rates measure the number of people in a population who have a disease at one point in time per _____ people.
5. Examples of the _____ of social problems that influence health status are juvenile violent crime arrests, single-parent families, teen suicides, births to unmarried women, number or percentage of children on welfare or in poverty, and prevalence of drug and alcohol abuse.
6. _____ health indicators include measures of infertility, proportion of the population living alone, percentage of children who are immunized, marriage and divorce rates, unemployment rates, and smoking rates.
7. Years of healthy life (or healthy life years) and quality-adjusted life years (QALY) measure both quantity and _____ of a person’s healthy life.
8. One quality-adjusted life year equals ____ year of perfect health.
9. _____ are treatments that may have a beneficial or negative impact on more people than just the one receiving the treatment.
10. Smoking has a _____ effect, meaning the higher the dose (or the more you smoke), the more likely the outcome (heart attack rate).

Matching

Match the term with the definition.

- a. activities of daily living (ADLs)
- b. compressed morbidity
- c. disability-adjusted life expectancy
- d. health status
- e. incidence
- f. infant mortality rate (IMR)
- g. instrumental activities of daily living (IDLs)
- h. life expectancy

- _____ 1. The level of health of a person, group, or nation
- _____ 2. Measures the number of new cases of a disease over a period of time

- ___ 3. The average number of years that people in a given population live
- ___ 4. Measure ability to accomplish more independent tasks such as cleaning, shopping, managing finances, preparing meals, and using the telephone
- ___ 5. The rate of infant deaths (from live birth to 1 year) per 1,000 live births
- ___ 6. Life goal of living a long and healthy life and then becoming acutely sick toward the end and dying quickly
- ___ 7. Measure a person's ability to perform basic personal care tasks such as walking, bathing, dressing, toileting, and feeding oneself
- ___ 8. Calculated by subtracting the total number of sick and disabled days and years from the average life expectancy

Match the term with the definition or description.

- | | |
|-------------------|--------------------------------|
| a. living | d. prevalence |
| b. morbidity rate | e. quality-adjusted life years |
| c. mortality rate | f. years of healthy life |

- ___ 9. Measures the number of total cases of a disease (existing and new) over a period of time
- ___ 10. Calculated by subtracting the total number of sick and disabled days and years from the average life expectancy
- ___ 11. Measures the number of people in a population who have a disease at one point in time per 100,000 people
- ___ 12. Measures of quality include medicalization of social problems, community health indicators, years of healthy life, also called quality-adjusted life years, and disability-adjusted life years
- ___ 13. Often used in cost-effectiveness calculations to determine whether a health care treatment provides a sufficient improvement in health for the amount of money that it costs
- ___ 14. Calculates the incidence of death per year per 1,000 or 100,000 people

Match the attribute used in ranking nations' health-care systems with the description.

- | | |
|---------------------------------------|---------------------------------------|
| a. Health | e. Health Care Expenditure per Capita |
| b. Responsiveness | f. Performance on Level of Health |
| c. Fairness in Financial Contribution | g. Performance on Health System |
| d. Overall Goal Attainment | |

- ___ 15. International dollar estimate of average amount spent per person in a nation on health care.
- ___ 16. The description focuses on prepayment of health care rather than out-of-pocket payment, and government financing of a "progressive" system where the wealthier pay more than the nonwealthy.
- ___ 17. Five components are weighted: 25 percent for level of health, 25 percent for distribution of health, 12.5 percent for level of responsiveness, 12.5 percent for distribution of responsiveness, and 25 percent for fairness of financial contribution.
- ___ 18. Disability-adjusted life expectancy (DALE) and the Distribution of life expectancy at birth throughout the population.
- ___ 19. A measure that takes into consideration all three criteria.

- _____ 20. Respect for the person, confidentiality, autonomy, prompt attention, proper amenities, access to social support networks, and choice of provider.
- _____ 21. A subjective ranking of a nation's "achievement relative to its resources."

US Health Ch 2

Answer Section

MULTIPLE CHOICE

- | | |
|------------|--------|
| 1. ANS: B | PTS: 1 |
| 2. ANS: D | PTS: 1 |
| 3. ANS: D | PTS: 1 |
| 4. ANS: D | PTS: 1 |
| 5. ANS: C | PTS: 1 |
| 6. ANS: A | PTS: 1 |
| 7. ANS: B | PTS: 1 |
| 8. ANS: C | PTS: 1 |
| 9. ANS: D | PTS: 1 |
| 10. ANS: C | PTS: 1 |
| 11. ANS: D | PTS: 1 |
| 12. ANS: D | PTS: 1 |
| 13. ANS: A | PTS: 1 |
| 14. ANS: C | PTS: 1 |
| 15. ANS: B | PTS: 1 |
| 16. ANS: A | PTS: 1 |
| 17. ANS: C | PTS: 1 |
| 18. ANS: D | PTS: 1 |
| 19. ANS: A | PTS: 1 |

COMPLETION

- | | |
|--|--------|
| 1. ANS:
1,000
one thousand | PTS: 1 |
| 2. ANS: mortality | PTS: 1 |
| 3. ANS: sex | PTS: 1 |
| 4. ANS:
100,000
one hundred thousand | PTS: 1 |
| 5. ANS: medicalization | PTS: 1 |

6. ANS: Community

PTS: 1

7. ANS: quality

PTS: 1

8. ANS:

one

1

PTS: 1

9. ANS: Externalities

PTS: 1

10. ANS:

dose-response

dose response

PTS: 1

MATCHING

1. ANS: D PTS: 1

2. ANS: E PTS: 1

3. ANS: H PTS: 1

4. ANS: G PTS: 1

5. ANS: F PTS: 1

6. ANS: B PTS: 1

7. ANS: A PTS: 1

8. ANS: C PTS: 1

9. ANS: D PTS: 1

10. ANS: F PTS: 1

11. ANS: B PTS: 1

12. ANS: A PTS: 1

13. ANS: E PTS: 1

14. ANS: C PTS: 1

15. ANS: E PTS: 1

16. ANS: C PTS: 1

17. ANS: G PTS: 1

18. ANS: A PTS: 1

19. ANS: D PTS: 1

20. ANS: B PTS: 1

21. ANS: F PTS: 1