https://selldocx.com/products/test-bank-health-psychology-1@htapter 01 What Is Health Psychology?

- 1. Which of the following best defines health psychology?
- A. using psychological theories and principles to tackle problems in the areas of mental health, education, product design, ergonomics, and law
- **B.** understanding the psychological influences on how people stay healthy, why they become ill, and how they respond when they get ill
- C. applying the principles of biology in order to study the anatomy of a human being
- D. diagnosing, preventing, and treating a disease without including the option of surgery

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- 2. A health psychologist who designs a media campaign to get people to improve their diets focuses on
- **<u>A.</u>** health promotion and maintenance.
- B. prevention and treatment of illness.
- C. the etiology and correlates of health, illness, and dysfunction.
- D. the health care system and the formulation of health policy.

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- 3. According to the psychological aspects of prevention and treatment of illness, health psychologists who work with people who are already ill focus on
- A. altering their exercise patterns.
- **B.** helping them in following their treatment regimen.
- C. developing recommendations to maintain a healthy lifestyle.
- D. advising individuals about career paths that are less stressful.

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- 4. A health psychologist who is interested in the behavioral and social factors that contribute to disease focuses on
- A. health promotion and maintenance.
- B. the prevention and treatment of illness.
- $\underline{\mathbf{C}}$. the etiology and correlates of health, illness, and dysfunction.
- D. the health care system and the formulation of health policy.

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- 5. _____ refers to the origins or causes of illness.
- A. Etiology
- B. Epidemiology
- C. Oncology
- D. Pathology

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- 6. Which of the following is studied by health psychologists to analyze the health care system and formulate health policy?
- A. classification of occupations that are highly stressful and can adversely affect people's health
- B. exercise patterns and dietary interventions that help to promote good habits and develop a healthy lifestyle
- C. the behavioral and social factors that contribute to health, illness, and dysfunction such as alcohol consumption and smoking
- **D**. the impact of hospitals and physicians on people's behavior to develop recommendations for improving health care

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- 7. According to the humoral theory of illness, disease occurs when
- A. God punishes one for wrongdoing.
- B. evil spirits enter a body.
- C. bodily fluids are imbalanced.
- D. there is a cellular disorder.

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- 8. Each of the four humors has been associated with different personality types, in that blood has been associated with
- A. a laid-back approach to life.
- B. an angry disposition.
- C. sadness.

| $\underline{\boldsymbol{\nu}}$. a passionate temperament. |
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| 9. According to the humoral theory of illness, yellow bile is known to be associated with A. a laid-back approach to life. B. an angry disposition. C. sadness. D. a passionate temperament. |
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| 10. According to the humoral theory of illness, black bile is associated with A. an angry disposition. B. a passionate temperament. C. sadness. D. a laid-back approach to life. |
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| 11. The model assumes a mind-body dualism to understanding illness. A. commonsense B. health belief C. biopsychosocial D. biomedical |
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| 12. The humoral theory of illness was replaced by the science of during the Renaissance. A. biotechnology B. organic chemistry C. molecular biology D. cellular pathology |
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| 13. The biomedical model maintains that A. psychological and social processes are relevant to the disease process. B. disease results when the four humors or circulating fluids of the body are out of balance. C. health and illness are consequences of biological, psychological, and social factors. D. all illness can be explained on the basis of aberrant somatic bodily processes. |
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| 14. Sigmund Freud described as a specific unconscious conflict that produces physical disturbances and symbolizes repressed psychological conflicts. A. etiology <u>B.</u> conversion hysteria C. chronic illness D. epidemiology |
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| 15. In the context of psychosomatic medicine, Flanders Dunbar and Franz Alexander maintained that conflicts produce anxiety, which becomes unconscious and takes a physiological toll on the body via the A. cardiovascular system. B. autonomic nervous system. C. integumentary system. D. muscular system. |
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| 16. In the context of Flanders Dunbar and Franz Alexander's work in the field of psychosomatic medicine, which of the following disorders were believed to be psychosomatic in origin? A. colitis B. tuberculosis C. diphtheria D. diabetes |

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- 17. The belief that profiles of particular disorders are caused by emotional conflicts is propagated by the
- A. theory of biophysics.
- **B.** field of psychosomatic medicine.
- C. biomedical model.
- D. tools of neuroscience.

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- 18. Which of the following statements is true about the biomedical model?
- A. It focuses on behaviors that promote health rather than emphasizing illness over health.
- B. It recognizes social and psychological processes as powerful influences over bodily estates.
- C. It assumes that psychological and social processes are largely relevant to the disease process. **D.** It reduces illness to low-level processes such as disordered cells and chemical imbalances.

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- 19. According to the biopsychosocial model, which of the following is a macrolevel process that continually interacts with microlevel processes to influence health and illness and their course?
- A. cellular disorders
- B. chemical imbalances
- C. depression
- D. social seclusion

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- 20. Which of the following is emphasized by the biopsychosocial model?
- A. Psychological conflict is sufficient to produce certain disorders.
- B. Certain biological disorders can be related on a consistent basis to specific personality types.
- C. Certain disorders are best treated medically; however, other disorders are best treated using psychotherapy.
- **<u>D</u>**. Health is achieved by being attentive to biological, psychological, and social needs.

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- 21. Which of the following is a characteristic of an acute disorder?
- A. It can only be managed, not cured.
- B. It is currently the main contributor to disability and death.
- $\underline{\mathbf{C}}$. It often develops because of a virus or bacteria.
- D. It is usually a long-term illness.

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- 22. Acute disorders are
- **<u>A.</u>** short-term illnesses that are usually amenable to cure.
- B. typically co-managed by the patient and the practitioner.
- C. the major causes of death and illness in the United States.
- D. slowly developing diseases with which people live for many years.

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- 23. is an example of a chronic illness that is particularly prevalent in industrialized countries.
- A. Influenza
- B. Pneumonia
- C. Cancer
- D. Tuberculosis

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- 24. Which of the following suggests that chronic illnesses helped in propagating the field of health psychology?
- **<u>A.</u>** Chronic illnesses often result in problems in family functioning.
- B. Chronic illnesses are short-lived, and its management is simple.
- C. Psychological factors are the sole causes implicated in chronic illnesses.
- D. Chronic illnesses usually have no requirement for lengthy interventions.

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- 25. Which of the following statements is true about chronic illnesses?
- A. They are rapidly developing diseases.

- **B.** They are diseases in which social factors are implicated as causes.
- C. They rarely affect relationships with a partner.
- D. They are curable.

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- 26. Which of the following statements, if TRUE, will support the argument that health care delivery has a substantial social and psychological impact on people?
- A. Few people in the United States have direct contact with the health care system as a recipient of services.
- **B.** Health psychologists know what makes people satisfied or dissatisfied with their health care.
- C. Health psychology rejects the notion that people's risky health behaviors can be modified before they become ill.
- D. Health psychology mainly emphasizes cure rather than prevention to reduce the dollars devoted to the management of illness.

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- 27. According to the U.S. Census Bureau, in 2010, million Americans had no health insurance.
- A. 15.3
- B. 26.7
- C. 49.9
- D. 54.6

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- 28. Behavioral interventions, particularly those that target risk factors such as diet or smoking, have contributed to the decline in the incidence of some diseases, especially
- A. Addison's disease.
- B. autoimmune thyroid disease.
- **C.** coronary heart disease.
- D. undifferentiated connective tissue disease.

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- 29. Which of the following statements is true about theories?
- A. Theories usually generate nonspecific predictions.
- B. Theories rarely provide guidelines for how to do research and interventions.
- C. Theories are untestable.
- **<u>D</u>**. Theories that are simple and useful are considered the best.

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- 30. Judith is diagnosed with a lump in her gallbladder that must be surgically removed. Her doctor and the hospital psychologist explain the procedure, the difficulties, and the benefits of undergoing the surgery. Judith is aware of the extent of pain she might experience, and she will be taught techniques to manage the pain. According to Janis and Johnson, which of the following is Judith likely to do?
- $\underline{\mathbf{A}}$. improve her adjustment toward the procedure
- B. feel anxious and withdraw from the procedure
- C. ask for a substitute procedure that might involve less pain
- D. take a second opinion from another health care provider to verify the facts

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- 31. Most of the research in health psychology is guided by
- A. practical problems.
- B. proven theory.
- C. unproven hypothesis.
- D. clinical trials.

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- 32. Which of the following statements best defines a theory?
- A. a combination of results from different studies that identify how strong the evidence is for a particular research finding
- B. a proposition made based on a researcher's belief that provides a starting point for further investigation
- C. a set of analytic statements that explain a set of phenomena, such as why people practice poor health behaviors
- D. a creation of two or more conditions that differ from each other in exact and predetermined ways

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33. Much research in health psychology is

| A. experimental. B. descriptive. C. meta-analytic. D. semi-experimental. |
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| 34. A researcher creates two or more conditions that differ from each other in exact and predetermined ways in A. descriptive research. B. a longitudinal study. C. a theory. D. an experiment. |
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| 35. An experiment conducted by a health care practitioner to evaluate treatments or interventions and their effectiveness over time is called a A. retrospective design. B. prospective research. C. randomized clinical trial. D. correlational study. |
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| 36. Which of the following happens in a randomized clinical trial? A. A target treatment is compared against an organically inert treatment. B. It is difficult to determine the direction of causality unambiguously. C. The same people are observed at multiple points in time. D. Researchers attempt to reconstruct the conditions that led to a current situation. |
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| 37 is a medical intervention that goes through rigorous testing and evaluation of its benefits through randomized clinical trials. A. Ethno medicine B. Alternative medicine C. Psychosomatic medicine D. Evidence-based medicine |
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| 38. A health psychologist measures whether a change in one variable corresponds with changes in another variable in A. correlational research. B. prospective research. C. retrospective research. D. applied research. |
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| 39. A major disadvantage of a correlational study is that A. it is not empirically testable. B. only one variable can be examined at any given point in time. C. the direction of causation is ambiguous. D. it studies issues when variables cannot be manipulated experimentally. |
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| 40. The approach is used to remedy some of the problems with correlational research. A. prospective B. cross-sectional C. meta-analytic D. retrospective |
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| 41 research looks forward in time to see how a group of people change, or how a relationship between two variables changes over time. A. Correlational B. Prospective |

| C. Retrospective D. Applied |
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| 42. A researcher intervenes in the diet of one community and not in another and over time looks at the difference in the rates of heart disease between the two communities. This is an example of a(n) study. A. mixed-model B. retrospective C. correlational prospective D. experimental prospective |
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| 43. In a(n) study, a researcher measures the diets that people create for themselves and looks at changes in rates of heart disease as determined by how good or poor the diet is. A. retrospective B. mixed-model C. experimental prospective D. correlational prospective |
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| 44. A prospective approach where the same people are observed at multiple points in time is known as A. correlational research. B. longitudinal research. C. cross-sectional research. D. quasi-experimental research. |
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| 45. Which of the following best describes a retrospective design? A. looking backward in time in an attempt to reconstruct the conditions that led to a current situation B. looking forward to see how a group of people change, or how a relationship between two variables changes over time C. measuring whether a change in one variable corresponds with changes in another variable D. solving practical problems in society by using empirical methods |
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| 46 is the study of the frequency, distribution, and causes of infectious and noninfectious diseases in a population. A. Ethnicity B. Etiology C. Ethnology D. Epidemiology |
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| 47 refers to the number of cases of a disease that exist at some given point in time. A. Morbidity B. Mortality C. Pathology D. Etiology |
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| 48. The number of new cases of a disease that exist at some given point in time is called A. plague. B. mortality. C. prevalence. D. incidence. |
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| 49. The number of deaths due to a particular cause is known as A. homicide. B. obliteration. C. mortality. D. morbidity. |

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| 50. Which of the following is the primary concern for health psychologists? A. development of superior quality medication B. methods to reduce disability C. rate of mortality in a given population D. health-related quality of life |
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| 51. Functional magnetic resonance imaging is a neuroscientific tool that permits glimpses into A. the brain. B. the abdominal cavity. C. the circulatory system. D. the DNA molecules. |
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| 52 interventions make use of cell phones, pagers, palm pilots, tablets, and other mobile technologies to deliver interventions and assess health-related events in the natural environment. A. Control-enhancing B. Expressive writing C. Mindfulness-based D. Ecological momentary |
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| 53. Which of the following is made available to people with hypertension so that they can monitor their blood pressure successfully? A. ventricular assist device B. ambulatory monitoring device C. IAP monitoring device D. implanted neural device |
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| 54 combines results from different studies to identify how strong the evidence is for a particular research finding. A. Cross-sectional analysis B. Retrospective research C. Prospective research D. Meta-analysis |

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55. Meta-analysis is a powerful methodological tool because

<u>A.</u> it uses a broad array of diverse evidence to reach conclusions.

- B. it attempts to reconstruct conditions that led to a current situation.
- C. it analyzes how a relationship between two variables changes over time.
- D. it measures whether a change in one variable corresponds with changes in another variable.

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- is responsible for assessing where patients go once they are discharged from a medical setting.
- A. physical therapist
- B. dietician
- C. social worker
- D. nurse practitioner

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- 57. The main function of a physical therapist is to
- A. provide psycho-educational counseling to patients who suffer from chronic illnesses.
- B. assess where patients need to go after discharge based on their psychosocial needs.
- C. conduct dietary interventions for patients suffering from chronic illnesses, such as cancer, heart disease, and diabetes.
- **D.** support patients in regaining the use of bodily functions that may have been compromised by illness.

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58. World Health Organization (1948) defined health as "a complete state of physical, mental, and social well-being and not

merely the absence of disease or infirmity."

TRUE

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59. According to the humoral theory of illness, phlegm is associated with sadness.

FALSE

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60. Franz Alexander developed a profile of the ulcer-prone personality as someone with excessive needs for dependency and love.

TRUE

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61. The view that biological, psychological, and social factors are all involved in any given state of health or illness is called the commonsense model of illness.

FALSE

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62. The biomedical model emphasizes health over illness.

FALSE

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63. The biopsychosocial model emphasizes the importance of an effective patient-practitioner relationship.

TRUE

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64. The division of health psychology was formed in 1978 within the American Psychological Association (APA).

TRUE

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65. The health care industry is closely monitored and well-managed as substantial increase in health care costs have led to tremendous improvement in basic indicators of health.

FALSE

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66. Experiments have ceased to remain the mainstay of science, because they typically provide less definitive answers to problems than other research methods.

FALSE

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67. Morbidity may be expressed in two ways: as the number of new cases or as the total number of existing cases of an illness.

TRUE

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68. Correlational studies often have disadvantages over experiments because they are less adaptable.

FALSE

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69. Epidemiologists not only study who has what kind of cancer but also address questions such as why certain cancers are more prevalent than others in particular geographic areas.

TRUE

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70. Guided interviews and narratives can provide insights into health processes that summary statistics may not provide. **TRUE**

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71. Explain the principles that characterize psychosomatic medicine. In what ways has it influenced the practice of health psychology?

Dunbar's and Alexander's work helped shape the emerging field of psychosomatic medicine by offering profiles of particular disorders believed to be psychosomatic in origin, that is, caused by emotional conflicts. It is now known that all illnesses raise psychological issues. Moreover, researchers now believe that a particular conflict or personality type is not sufficient to produce illness. Rather, the onset of disease is usually due to several factors working together, which may include a biological pathogen coupled with social and psychological factors, such as high stress, low social support, and low socioeconomic status. The idea that the mind and the body together determine health and illness led to the biopsychosocial model.

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72. Describe the biopsychosocial and biomedical models. Explain the advantages of the biopsychosocial model over the biomedical model.

The biomedical model maintains that all illness can be explained on the basis of aberrant somatic bodily processes, such as biochemical imbalances or neurophysiological abnormalities. The model emphasizes illness over health rather than focusing on behaviors that promote health. The biopsychosocial model maintains that biological, psychological, and social factors are all important determinants of health and illness. Both macrolevel processes and microlevel processes continually interact to influence health and illness and their course. The biopsychosocial model emphasizes both health and illness. Therefore, health becomes something that one achieves through attention to biological, psychological, and social needs rather than something that is taken for granted.

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73. Explain how changing patterns of illness have contributed to the rise of health psychology.

Until the 20th century, the major causes of illness and death in the United States were acute disorders, such as tuberculosis, pneumonia, and other infectious diseases. However, the prevalence of acute infectious disorders has significantly declined because of treatment innovations and changes in public health standards. Nowadays, chronic illnesses, such as heart disease, cancer, and respiratory diseases, are the main contributors to disability and death, particularly in industrialized countries.

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74. Explain how prospective and retrospective research remedies the problems of correlational research.

Correlational research measures whether a change in one variable corresponds with changes in another variable. However, prospective research looks forward in time to see how a group of people change, or how a relationship between two variables changes over time. Health psychologists conduct many prospective studies in order to understand the risk factors that relate to health conditions. A particular type of prospective study is longitudinal research, in which the same people are observed at multiple points in time. Retrospective designs, on the other hand, look backward in time in an attempt to reconstruct the conditions that led to a current situation. Retrospective methods were critical in identifying the risk factors that led to the development of AIDS. Therefore, both prospective and retrospective methods prove to be useful in remedying problems faced with correlational research.

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75. Explain the importance of qualitative research in the field of health psychology research.

There is an important role for qualitative research in health psychology. Listening to an individual person talk about his or her health needs and experiences is, of course, beneficial for planning an intervention for that person, such as help in losing weight. But more broadly, guided interviews and narratives can provide insights into health processes that summary statistics may not provide. For example, interviews with cancer patients about their chemotherapy experiences may be more helpful in redesigning how chemotherapy is administered than numerical ratings of how satisfied patients are. Qualitative research can also supplement insights from other research methods. For example, surveys of college students can identify rates of problem drinking, but interviews may be helpful for identifying how to build responsible drinking skills. Quantitative and qualitative methods can work hand-in-hand to develop the research evidence for effective interventions.

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