Test Bank for Challenges of Health Disparities 1st Liu

The Challenges of Health Disparities, 1st Edition
Chapter 2 Quiz
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CHAPTER 2: What Are Health Disparities?

1. An individual who is prescribed a less effective medication for hypertension has experienced a health disparity. (Level 2)
Answer: **False**

2. The terms "health disparities" and "health care disparities" are synonymous. (Level 1)
Answer: **False**

3. The field of "health disparities" emerged due to differential health outcomes that are directly related to historic and current behaviors of individuals and social systems. (Level 1)
Answer: **True**

4. Hypospadias is a birth defect that is specific to females. (Level 1)
Answer: **False**

5. Hypospadias has a higher occurrence in non-Hispanic Caucasians than in Native Americans. (Level 1)
Answer: **True**

6. Spina bifida: (Level 1)
a. is a form of anencephaly
b. involves a defect in the head of the penis
c. involves a defect in the neural tube
d. All of the above
e. None of the above
Answer: c

7. Truncus arteriosis affects Asians more than Caucasians. (Level 1)
Answer: **False**

8. According to the authors, the study of health disparities should: (Level 1)
a. Primarily focus on the disparities experienced by minorities and low income groups.
b. Include a discussion of inequalities that affect Caucasians as well as other groups, and men as well as women, and high income as well as low income groups.
c. Emphasize that health disparities always favor Caucasians and males.
d. Emphasize that the health disparities affecting Native Americans are less severe than those affecting Asian Americans.
Answer: b

9. Coarctation of the aorta is: (Level 1)
a. noncongenital medical condition.
b. disparately experienced by Native American youth.

c. a condition in which the left side of the heart is not fully developed.
d. when the aorta is undersized.
Answer: d

10. Mathematically: (Level 2)
a. equality and equivalence have exactly the same meaning.
b. equivalence refers to a bell-shaped curve.
c. Both of the above.
d. None of the above.
Answer: d

11. In a normal curve, approximately 68% of values fall + or - one standard deviation from the mean. (Level 1)
Answer: **True**

12. Health disparities in death rates exist. (Level 1)
Answer: **True**

13. Ontology is that branch of philosophy that studies the nature of existence. (Level 1)
Answer: **True**

14. Karl Marx is considered as the father of functionalism. (Level 1)
Answer: **False**

15. Talcott Parsons is the father of Conflict Theory. (Level 1)
Answer: **False**

16. Health disparities as a philosophical concept is based upon the premise: (Level 2)
a. That an equal distribution of inequalities exists between groups.
b. All people are equal.
c. All people are born with a different "basket of goods" but these goods are equivalent.
d. All of the above.
e. None of the above.
Answer: b

17. Health disparities as a mathematical concept is based upon the premise that: (Level 2)
a. That an equal distribution of inequalities exists between groups.
b. All people are equal.
c. All peoples are born with a different "basket of goods" but these goods are equivalent.
d. All of the above.
e. None of the above.
Answer: c

18. Health disparities as a statistical concept is based upon the premise: (Level 2)

a. That an equal distribution of inequalities exists between groups.
b. All people are equal.
c. All peoples are born with a different "basket of goods" but these goods are equivalent.
d. All of the above.
e. None of the above.
Answer: a

19. According to the empirical research on the determinants of health in the text book: (Level 2)
a. Medical care contributes 20% - 30% to health care outcomes.
b. Less than 5% of deaths in 1990 were associated with tobacco use.
c. Social determinants explain 60% of health outcomes.
d. Personal behaviors make significant contributions to health outcomes.
Answer: d

20. Which level of competency contributes the most to one's understanding of the definitions of health disparities by the National Institutes of Health, U.S. national Library of Medicine, the U.S. Department of Health and Human Services, and the World Health Organization? (Level 3)
a. Simply memorizing the different definitions.
b. Memorizing and analyzing the different definitions.
c. Dismissing the definitions of these organizations.
d. Adopting these three definitions because they are each from reputable organizations
Answer: b

21. All three definitions emphasize that the key component of any definition of health disparities is: (Level 2)
a. health
b. differences
c. unfair and unjust outcomes
d. None of the above
Answer: b

22. Which of the three definitions introduce the philosophical concept of ethics. (Level 2)
a. The World Health Organization's definition
b. The U.S. National Library of Medicine's definition
c. The U.S. Department of Health and Human Service's definition
d. None of the above
e. All of the above
Answer: a

23. Which definition definitively links health disparities with race/ethnicity, income, and/or social stratification systems? (Level 2)
a. The World Health Organization's definition
b. The U.S. National Library of Medicine's definition

c. The U.S. Department of Health and Human Service's definition
d. None of the above
e. All of the above
Answer: c

24. The authors of the text fully endorse which of the listed definitions:
a. The World Health Organization's definition
b. The U.S. National Library of Medicine's definition
c. The U.S. Department of Health and Human Service's definition
d. None of the above
e. All of the above
Answer: d

25. If your family's income for a family of three was $150,000, the system of social stratification would rank you as:
a. Inferior to most Americans
b. Equal to most Americans
c. Superior to most Americans
d. None of the above.
Answer: c

26. Research by Hu et al. revealed that: (Level 3)
a. Social stratification is not associated with the health treatment received by persons based on income, education, race/ethnicity, gender, etc. in modern day health care systems.
b. Some disparities in health care outcomes exist but they are very small relative to patient outcomes
c. Hu et al.'s study did not address disparities in the health care outcomes of patients.
d. All of the above are correct
e. None of the above are correct
Answer: e

27. Research by James (2017) is important to the field of health care disparities because it revealed that physicians in modern society do not embrace unfavorable beliefs regarding patients of Spanish and Indian descent nor patients of African descent. (Level 2)
Answer: **False**

28. Research by Ong et al. (2017) demonstrated that: (Level 3)
a. Although college students of Asian descent experienced adverse responses to their ethnicity, these responses neither directly nor indirectly affect their odds of poor health.
b. Ong et al.'s research did not address the issues of Asian American college students at all.
c. Asian American students in this study were so impacted by responses to their ethnicity that they became depressed and slept too many hours each night.
d. Neither a nor be are correct.
e. Both a and b are correct.
Answer: d

29. There is no relationship between the number of hours of sleep that university students receive and their odds of poor health based on researchers Steptoe et al. (2006). (Level 1)
Answer: **False**

30. Based upon the text, some analysts would argue that interventions are needed to reduce subtribalistic responses to patients to diverse physicians. (Level 1)
Answer: **True**

31. The systems of social stratification that currently operate in the United States: (Level 2)
a. Do not adversely impact the health of sexual minorities
b. Do not adversely impact the health of males
c. Do not adversely impact some groups' acceptance of anthropological evidence regarding the areas that were the origins of early homosapiens and early hominids
d. All of the above are true
e. a, b and c are not true
Answer: e

32. Current bilateral views of disparities need to be replaced by unilateral views according to the authors. (Level 2)
Answer: **False**

33. According to the authors, Systems of Social Stratification were initially: (Level 1)
a. Functional to the survival of humankind
b. Dysfunctional to the survival of humankind
c. Both of the above
d. None of the above
Answer: a

34. Ethnocentrism can be viewed as the origins of racial/ethnic inequalities according to the authors. (Level 1)
Answer: **True**

35. Ingroup and outgroup behavior can be based on: (Level 2)
a. Only gender
b. Only race/ethnicity
c. Only higher-level social classes
d. Almost any visible or non-visible trait
Answer: d

36. Early systems of slavery: (Level 1)
a. Were developed in response to the Christian Church's views
b. In response to gender.
c. Both a and b

d. Neither a nor b
Answer: a

37. Based upon the chapter, the data on birth defects demonstrate the health disparities cannot be redefined based upon the premise that: (Level 1)
a. "All humans are created equal"
b. Mathematical equivalence
c. Health disparities as a statistical concept
d. Health disparities of a sociological concept
Answer: a

38. The authors imply that the premise of health disparities as a statistical concept is an acceptable redefinition. (Level 3)
Answer: **True**

39. According to Chapter 2, the current position descriptions of health care administrators do not authorize them to address health disparities. (Level 2)
Answer: **True**

40. The authors propose that all health care professionals can/should/ought to: (Level 1)
a. Collaborate to address health disparities
b. Ignore health disparities and focus on excellently carrying out the work in their job description
c. Both a and b
d. Neither a nor b
Answer: a

41. Which statements below demonstrate the power of the health care system to generate behavioral change in the determining of health outcomes: (Level 2)
a. The decrease in alcohol death that occurred from 1990 to 2000
b. The decrease in deaths due to toxic agents and microbial agents from 1990 to 2000
c. The decrease in loss of life years due to tobacco use
d. a and b only
e. a, b and c
f. None of the above
Answer: e

42. According to the authors, the failure of Americans to choose healthy behaviors when they are aware of the benefits of healthy behaviors should be considered a mental and behavioral health problem.
Answer: **True**

43. Approximately what % of health outcomes are associated with health behaviors? (Level 1)

a. 10%-20%
b. 20%-32%
c. 36%-50%
d. 60%-70%
Answer: c

44. According to the authors, behavioral change is most effective when: (Level 1)
a. It is mandated
b. When individuals are left alone to make their own choices
c. When individuals are supported in reversing past choice behaviors
d. None of the above
e. All of the above
Answer: c

45. Overall, a health care professional can better understand and address health disparities if they are “in touch” with their own worldview.
Answer: **True**

