



1. During the 1800s, what did Pinel believe that the cure for mental illness was?
 - A) arrest and confinement
 - B) early psychotherapy
 - C) humane treatment
 - D) the use of chains

2. Who was the psychiatrist who suggested the term “mental hygiene”?
 - A) Clarence Hincks
 - B) Sigmund Freud
 - C) Philippe Pinel
 - D) Adolf Meyer

3. Before the 19th century, seriously mentally ill clients with severely disturbing behaviour were usually cared for by:
 - A) family members at home.
 - B) spiritual healers in asylums.
 - C) laypersons in hospitals.
 - D) staff in prisons and poorhouses.

4. Which variable of communities had the **most** influence on the early forms of institutional ways of caring for the mentally ill people?
 - A) quality of housing and number of professionals
 - B) social stability and availability of resources
 - C) political climate and public policy
 - D) legal structure and role of nurses

5. Which factor has been historically related to increased intolerance and ill treatment of people with mental disorders?
 - A) social change and instability
 - B) increased family size and mobility
 - C) emphasis on religious beliefs
 - D) increased number of asylums treating mentally ill

6. Which effects of industrialization and urbanization contributed positively to the humane treatment of mentally afflicted treatment? Select all that apply.
 - A) the growing number of poor and deviant people who were not able to sustain themselves
 - B) more general anxieties during a period of rapid social change and instability
 - C) moral, pedagogical treatment that would help restore innate capacity for self-control
 - D) the Enlightenment, which changed medical and social ideas about mental illness
 - E) recognition of mental illness by the medical community

7. Which was a primary reform accomplished by Dorothea Lynde Dix?
 - A) establishment of “commitment” laws in state legislatures
 - B) introducing compassion to the care of mentally ill clients
 - C) use of music to treat mentally ill clients
 - D) use of exercise therapy to treat mentally ill clients

8. Which province in Canada was first to open a mental institution in 1835?
 - A) Ontario
 - B) Nova Scotia
 - C) Quebec
 - D) New Brunswick

9. When did involuntary confinement and institutional care of mentally ill people begin to be the foremost treatment modality?
 - A) the 17th and 18th centuries
 - B) end of the 20th century
 - C) beginning of the 19th century
 - D) last half of the 19th century

10. Which was developed in 1909 by the National Mental Health Committee for Mental Hygiene?
 - A) mental health nurse training
 - B) stress management clinics
 - C) prison clinics
 - D) hydrotherapy centres

11. What superintendent of various Ontario psychiatric hospitals was one of the first health care providers who reformed models of care to improve treatment approaches in Ontario?
 - A) Adolf Meyer
 - B) Clifford Beers
 - C) Charles K. Clarke
 - D) Charles A. Barager

12. When did psychiatric nursing education in the general hospital training commence in eastern Canada?
- A) 1860s
 - B) 1900s
 - C) 1930s
 - D) 1950s
13. Which level of legislation supported confinement of mentally ill clients in Canada in the late 19th century?
- A) provincial
 - B) national
 - C) municipal
 - D) state
14. In the earliest institutions that cared for mentally ill members of the community, what was the **most** common experience of clients?
- A) sporadic focus on treatment
 - B) safer alternative to living in the community
 - C) emphasis on rehabilitation
 - D) deplorable living conditions
15. What psychiatrist who had a strong belief in the ability of female compassion and established a new diploma in Alberta for mental health nurses?
- A) Adolf Meyer
 - B) Charles K. Clarke
 - C) Clarence Hincks
 - D) Charles A. Barager
16. Which new type of therapy instituted in the 1940s made skilled nursing essential?
- A) cognitive-behavioural therapy
 - B) electroshock therapy
 - C) pharmacologic therapy
 - D) recreational therapy
17. Which socioeconomic classes had new opportunities to pursue careers as psychiatric nurses as the demand for skilled nursing emerged in the 1940s? Select all that apply.
- A) elite class
 - B) impoverished class
 - C) unemployed class
 - D) working class
 - E) middle class

18. Psychosocial theories of mental disorders, which were proposed in the early 1900s, believe that what factor contributed to disorders?
- A) biologic defects
 - B) dysfunctional family systems
 - C) environmental and social deprivation
 - D) unconscious motivators for behaviour
19. What was the major focus of “psychiatric pluralism,” introduced by Adolf Meyer?
- A) integration of the human biologic functions with the environment
 - B) psychoanalysis integrated with daily activities of living
 - C) biologic science integrated with bloodletting treatments
 - D) determining the drives behind the person's behaviours
20. Which factor was believed to lead to the development of a psychosis or neurosis in an individual according to the theory proposed by Sigmund Freud?
- A) a chemical imbalance in the brain
 - B) social deprivation occurred late in adolescence
 - C) an interference in normal development
 - D) development of an oedipal relationship
21. Who promoted university-based scientific research to influence change and find better treatment and support for mentally ill clients?
- A) Charles K. Clarke
 - B) Clifford Beers
 - C) Adolf Meyer
 - D) Clarence Hincks
22. Which type of treatment focused **most** directly on treating the brain, ultimately facilitating discharges from institutions during the mid-20th century?
- A) psychopharmacology
 - B) insulin shock therapy
 - C) psychosurgery
 - D) hydrotherapy
23. Which phenomenon **most** supported the paradigm shift and public policy changes from the Canadian Mental Health Association in the 1960s?
- A) deinstitutionalization
 - B) increased psychiatric admissions to provincial psychiatric hospitals
 - C) psychiatric nursing education
 - D) psychiatric pluralism

24. Which theorist's work influenced psychiatric mental health nursing theory by emphasizing building therapeutic nurse–client relationships and holistic nursing approaches?
- A) Benner
 - B) Peplau
 - C) Freud
 - D) Dix
25. Which theorist's work was the basis of the Canadian Federation of Mental Health Nurses' published Canadian Standards of Nursing Practice reflected in nursing practice today?
- A) Patricia Benner
 - B) Hildegard Peplau
 - C) Sigmund Freud
 - D) Dorothy Dix
26. Which is the percent of hospitalization admissions for mental illness that occurred into general hospitals in 2002, according to a report that was published by the Canadian Alliance on Mental Illness and Mental Health?
- A) 36%
 - B) 56%
 - C) 76%
 - D) 86%
27. Which different model and strategy to provide treatment did provinces develop as a result of the shifts in federal funding in the early 1970s?
- A) criminal code changes for the not criminally responsible clients
 - B) specialized care for children and geriatric services
 - C) diagnosis-specific care
 - D) day treatment programmes
28. As of the 1950s, Canada entertained two separate models of education for psychiatric mental health nursing. The existence of two separate models was largely attributable to:
- A) colleges and universities.
 - B) federal legislation.
 - C) regional differences.
 - D) scarce resources.
29. As part of a career day presentation to a group of nursing students, a psychiatric–mental health nurse plans to describe how this specialty developed. Which individual would the nurse describe as playing a major role in the development of psychiatric nursing as a professional specialty?
- A) Philippe Pinel
 - B) Hildegard Peplau
 - C) Harriet Bailey

- D) Charles A. Barager
30. A nurse is preparing a presentation about the current status of mental health services in Canada. Which statement would the nurse include as the **most** reflective of this status?
- A) "Mental health care in Canada is equally accessible to individuals."
 - B) "Mental illness ranks second among conditions causing responsible for chronic disability."
 - C) "Mental health care primarily focuses on the cure of mental illness."
 - D) "Mental health care services are inadequate and fragmented."

Answer Key

1. C
2. D
3. D
4. B
5. A
6. C, D, E
7. B
8. D
9. D
10. C
11. C
12. C
13. A
14. D
15. D
16. B
17. D, E
18. C
19. A
20. C
21. A
22. A
23. A
24. B
25. A
26. D
27. B
28. C
29. B
30. D

1. A nurse is teaching a new client about the relationship between mental and physical health. What should the nurse describe to the client?
 - A) “Mental health and physical health are the same.”
 - B) “There is no health without mental health.”
 - C) “Mental health is always considered in global health policies.”
 - D) “Mental health and physical health are distinct.”

2. A nurse has explained to a group of clients that mental health and physical health should not be considered distinct?
 - A) Mental health affects physical health and vice versa.
 - B) Mental health and physical health are essentially the same.
 - C) Mental illness and physical illness do not normally coexist in people.
 - D) Physical health should take priority over mental health.

3. What statement **best** describes the position of the International Council of Nurses' (ICN) regarding mental health?
 - A) All nurses must have knowledge and skills to respond to mental health needs, including their own.
 - B) Only psychiatric–mental health (PMH) nurses need to have knowledge and skills related to mental health.
 - C) It is necessary for psychiatric–mental health (PMH) nurses to have knowledge and skills to respond to mental health needs of their clients only.
 - D) Psychiatric–mental health (PMH) nurses should be more concerned about their own mental health needs than those of their clients.

4. The nurse is assessing a new client. What findings are suggestive that the client experiences mental health? Select all that apply.
 - A) The individual is more joyful than his or her peers.
 - B) The individual can cope with the normal stresses of life.
 - C) The individual is able to work productively and fruitfully.
 - D) The individual is able to make a contribution to the community.
 - E) The individual is consistently happy.

5. Which statement about mental health is **most** accurate?
 - A) Mental health is the polar opposite of mental illness.
 - B) It is possible to experience mental health while living with a severe mental disorder.
 - C) The level of mental health stays the same over a person's lifetime.
 - D) It is best to view mental health and mental disorders on the same continuum.

6. A nurse is describing the concept of mental health and situations where it may be present or lacking. Which situations are possible for a client to experience? Select all that apply.
 - A) A person without mental disorder can experience minimal mental health.
 - B) A person without mental disorder can experience optimal mental health.
 - C) Mental disorder cannot coexist with mental illness.
 - D) A person with no mental disorder can experience lack of mental health.
 - E) A person can experience both absence of mental health and maximal mental disorder.

7. A nurse is providing care for a client who has a diagnosable health condition, based on an accepted classification system with criteria related to alterations in mood and affect, behaviour, and thinking and cognition. What does this client have?
 - A) mental illness
 - B) a mental disorder
 - C) a cultural disorder
 - D) mental health

8. Which factors should the nurse consider when determining if a person has a mental disorder to rule out a possible normal reaction? Select all that apply.
- A) presence of symptoms such as speaking in tongues
 - B) the client's current circumstances and stressors
 - C) whether the nurse feels uncomfortable or comfortable in the presence of the client
 - D) alterations beyond the parameters of usual psychological states encountered in life
 - E) the client's cultural definitions of responses
9. The psychiatric–mental health nurse has assessed several individuals. Which person is **most** likely to be diagnosed with a mental illness?
- A) a person who is a member of a religious group who begins to “speak in tongues” during worship services
 - B) a person talking aloud as if to another person when there is no one else present
 - C) a person who has recently experienced the sudden death of a loved one who cries intermittently
 - D) a person who has recently experienced the expected death of a loved one from a terminal disease who cries intermittently
10. Which statement about well-being is **most** accurate?
- A) Well-being is an outcome.
 - B) Well-being lies on the journey through life events.
 - C) Well-being is not possible for the terminally ill.
 - D) Well-being refers to physical health only.
11. The nurse is comparing the quality of life for Canadians who live in different regions. What source of data should the nurse consult?
- A) Gross National Happiness Index
 - B) Gross Domestic Product Index
 - C) Canadian Index of Wellbeing
 - D) Social Progress Index
12. Which is a possible outcome of a large gap between the richest and poorest in a society?
- A) It may negatively affect the health and well-being outcomes for all people.
 - B) It is a cause for concern primarily for the well-being of the wealthy.
 - C) It is a cause for concern for the well-being of impoverished persons.
 - D) There is not normally a cause for concern from a large gap between richest and poorest.
13. Which statement about recovery is accurate?
- A) It occurs naturally over time.
 - B) It is a passive process.
 - C) It is the same for all persons.
 - D) It is a cornerstone of Canada's approach to mental health.

14. Which are key directions of Canada's national mental health strategy that are **most** focused on prevention? Select all that apply.
- A) promoting mental health across the life span
 - B) fostering recovery for those living with mental health problems
 - C) reducing disparities in access to appropriate services
 - D) providing appropriate treatment services
 - E) promoting mental health in the workplace
15. Which concepts are the cornerstone of Canada's mental health strategy? Select all that apply.
- A) mental health
 - B) well-being
 - C) mental illness
 - D) recovery
 - E) physical health
16. Which are primary purposes of the *DSM-5*? Select all that apply.
- A) Identify the criteria required for a particular conditions to be diagnosed.
 - B) Describe treatment modalities for psychiatric disorders and mental illnesses.
 - C) Identify various aetiologies for mental disorders based on family histories.
 - D) Provide optimal outcomes for treatment for individuals with mental illnesses.
 - E) Provide a common language for health care professionals to use.
17. Which is a potential negative consequence of diagnosing and labelling a particular person's illness?
- A) The client may express specific preferences for treatment.
 - B) Disease-specific treatment may be delayed.
 - C) There can be a loss of personal identity if the labelled person becomes viewed as the diseased.
 - D) The client's family may misunderstand the symptoms, signs, and behaviour.
18. Which concepts are used by the *DSM-5* to point to ways culture influences the illness experience? Select all that apply.
- A) cultural syndrome
 - B) cultural idiom of distress
 - C) cultural explanation or perceived cause
 - D) cultural centrism
 - E) cultural diagnoses
19. The nurse is caring for a client who has schizophrenia and has consulted the *DSM-5* while caring for the client. What information could the nurse access from this resource?
- A) the diagnostic criteria for schizophrenia
 - B) a sample treatment plan for a client with schizophrenia
 - C) information about the aetiology of schizophrenia
 - D) trends in epidemiology of schizophrenia