

CHAPTER 3

<p>1.1 Which principle of community mental health would focus on teaching necessary social skills to consumers with mental illness?</p> <p>a. Self-Advocacy b. Destigmatization c. Contextualization d. Normalization</p>	<p>Answer: d</p> <p>Rationale: Normalization affirms that people with disabilities should be able to lead as normal a life as possible. Learning necessary social skills is a part of the normalization process. Neither destigmatization, contextualization, nor self-advocacy addresses this issue.</p> <p>Application Assessment Safe, Effective Care Environment Learning Objective 1.1</p>
<p>1.2 Individuals with mental illness are usually referred to as clients. Even though the term client is widely used, which of the following terms is becoming the preferred term for the nurse to use when referring to an individual with mental illness?</p> <p>a. Client b. Patient c. Consumer d. Mentally ill person</p>	<p>Answer: c</p> <p>Rationale: The use of consumer indicates an increasing awareness of the person with mental illness as an autonomous individual. The use of the terms <i>patient</i>, <i>client</i>, and <i>mentally ill</i> does not acknowledge the person with mental illness as an autonomous individual that shares in the responsibility for determining the type of care provided.</p> <p>Application Assessment Safe, Effective Care Environment Learning Objective 1.2</p>
<p>1.3 What basic services are community mental health centers expected to provide to the community?</p> <p>Select all that apply.</p> <p>a. Inpatient care b. Outpatient care c. Partial hospitalization d. Consultation e. Education</p>	<p>Answers: a, b, c, d, e</p> <p>Rationale:</p> <ul style="list-style-type: none"> • Inpatient care. In 1963, Congress passed an act that was the beginning of the community mental health movement. The general plan was to make an array of community-based services available to all people seeking mental health care. Each community mental health center was expected to provide inpatient care, outpatient care, partial hospitalization, consultation, and education. • Outpatient care. In 1963, Congress passed

an act that was the beginning of the community mental health movement. The general plan was to make an array of community-based services available to all people seeking mental health care. Each community mental health center was expected to provide inpatient care, outpatient care, partial hospitalization, consultation, and education.

- **Partial hospitalization.** In 1963, Congress passed an act that was the beginning of the community mental health movement. The general plan was to make an array of community-based services available to all people seeking mental health care. Each community mental health center was expected to provide inpatient care, outpatient care, partial hospitalization, consultation, and education.
- **Consultation.** In 1963, Congress passed an act that was the beginning of the community mental health movement. The general plan was to make an array of community-based services available to all people seeking mental health care. Each community mental health center was expected to provide inpatient care, outpatient care, partial hospitalization, consultation, and education.
- **Education.** In 1963, Congress passed an act that was the beginning of the community mental health movement. The general plan was to make an array of community-based services available to all people seeking mental health care. Each community mental health center was expected to provide inpatient care, outpatient care, partial hospitalization, consultation, and education.

Application

Planning

Safe, Effective Care Environment

Learning Objective 1.3

1.4 What is the greatest concern that individuals with mental illness have regarding

Answer: c

<p>becoming employed and losing financial support through the SSI or SSDI funds?</p> <ol style="list-style-type: none"> They will have to pay taxes. They will have to go to work everyday. The loss of medical coverage. They do not have work skills. 	<p>Rationale: People who even take a part-time job lose entitlement income, including food stamps and rent subsidies. They are at risk for losing medical coverage. Having a mental illness does not exempt one from either paying taxes or having to work. An individual with a mental illness may or may not have work skills.</p> <p>Application</p> <p>Assessment</p> <p>Health Promotion and Maintenance</p> <p>Learning Objective 1.4</p>
<p>2.1 Of the following treatment environments, which would provide the least restrictive setting for an individual with mental illness who is threatening harm to self and others?</p> <ol style="list-style-type: none"> The client's home A locked hospital unit The community center A group home 	<p>Answer: b</p> <p>Rationale: For this individual, the locked hospital unit would be the therapeutic setting that would provide safe care while allowing maximum freedom. The client's home, community center, or group home would not provide adequate supervision.</p> <p>Application</p> <p>Implementation</p> <p>Safe, Effective Care Environment</p> <p>Learning Objective 2.1</p>
<p>2.2 The nurse assesses a client to be acutely psychotic and a danger to himself and others. What treatment setting will the nurse recommend for this client?</p> <ol style="list-style-type: none"> Day hospital Inpatient hospital Community mental health center Home health care 	<p>Answer: b</p> <p>Rationale: Treatment in an acute care hospital provides a safe, structured, and supervised environment. The other settings listed would not provide a safe environment.</p> <p>Application</p> <p>Implementation</p> <p>Safe, Effective Care Environment</p> <p>Learning Objective 2.2</p>
<p>2.3 The nurse who understands the principle of contextualization in community mental health care would encourage the client to receive care in which of the following settings?</p> <ol style="list-style-type: none"> In as close contact as possible with their usual surroundings 	<p>Answer: a</p> <p>Rationale: Contextualization is maintaining clients in their context. This means that clients are kept in as close contact as possible with their usual surrounding, both geographic and interpersonal. Clients placed in a long-term-</p>

<p>b. An out-of-state facility</p> <p>c. A long-term-care facility</p> <p>d. In a community other than the one that they are accustomed to</p>	<p>care facility, out-of-state facility, or another community are removed from their normal context.</p> <p>Application</p> <p>Planning</p> <p>Safe, Effective Care Environment</p> <p>Learning Objective 2.3</p>
<p>2.4 In planning housing for a client being discharged from the hospital, which of the following rationale would appropriately guide the nurse's decision?</p> <p>a. The nurse knows best and should decide what arrangements are appropriate.</p> <p>b. Clients usually have no preference about where they will live.</p> <p>c. Most clients prefer an apartment or house.</p> <p>d. Clients with mental illness must always live with a family member.</p>	<p>Answer: c</p> <p>Rationale: Most clients prefer an apartment or house that allows them to live independently. Clients with mental illness are not required to live with a family member. The nurse does not decide where clients should live.</p> <p>Application</p> <p>Planning</p> <p>Safe, Effective Care Environment</p> <p>Learning Objective 2.4</p>
<p>2.5 What type of treatment program would be most beneficial for clients who require long-term hospitalization for their own safety and for the protection of family and the community?</p> <p>a. A partial hospitalization program</p> <p>b. A highly structured behavior intervention program</p> <p>c. A day treatment program</p> <p>d. An outpatient treatment program</p>	<p>Answer: b</p> <p>Rationale: A highly structured behavior intervention program, using a token economy, point systems, and skills training can improve the client's level of functioning. Outpatient treatment, day treatment, and partial hospitalization programs would not meet the safety requirements for the client or others.</p> <p>Application</p> <p>Planning</p> <p>Safe, Effective Care Environment</p> <p>Learning Objective 2.5</p>
<p>3.1 Based on the nurse's assessment, the client is experiencing an acute psychiatric emergency resulting from a life crisis. Which of the following housing choices is best for this client?</p> <p>a. Psychosocial clubhouses</p> <p>b. Supportive housing</p> <p>c. Independent living</p>	<p>Answer: d</p> <p>Rationale: The residential crisis service offers a respite from the client's current living situation and provides treatment in a program that uses medication, milieu therapy, and other forms of therapy. Psychosocial clubhouses, supportive housing, and independent living would not be appropriate for a client experiencing an acute</p>

<p>d. Residential crisis services</p>	<p>psychiatric emergency. Application Planning Psychosocial Integrity Learning Objective 3.1</p>
<p>3.2 In the outpatient setting, the nurse should expect to provide the following services in a medication clinic? Select all that apply.</p> <p>a. Administer medications. b. Monitor side effects. c. Purchase the client’s medications. d. Locate medication funding sources. e. Provide medication education.</p>	<p>Answers: a, b, d, e Rationale:</p> <ul style="list-style-type: none"> • Administer medications. The nurse should expect to administer medications as part of a comprehensive medication program. • Monitor side effects. The nurse should expect to monitor side effects as part of a comprehensive medication program. • Provide medication education. The nurse should expect to provide medication education as part of a comprehensive medication program. • Locate medication-funding sources. The nurse should expect to locate medication-funding sources as part of a comprehensive medication program. • Purchase the client’s medications. Purchasing medications is not a service the nurse would provide. <p>Analysis Implementation Health Promotion and Maintenance Learning Objective 3.2</p>
<p>3.3 What understanding regarding family participation is necessary for the nurse providing mental health services in the home?</p> <p>a. Family members feel like they have little control over the situation. b. Family members are more likely to participate in the client’s care. c. Family members feel that their routines have been disrupted. d. Family members will be anxious and feel</p>	<p>Answer: b Rationale: Providing mental health services in the client’s home facilitates the participation of all family members, including young children. When care is provided in the client’s home, family members often feel more in control and empowered in the relationship, daily routines are less disrupted, relationships are less restricted, and levels of anxiety are minimized. Application</p>

<p>restricted.</p>	<p>Planning Psychosocial Integrity Learning Objective 3.3</p>
<p>3.4 When should the police be asked to accompany the mobile crisis team to assess a client in the community?</p> <p>a. At the client’s request</p> <p>b. When the situation is potentially dangerous</p> <p>c. At the request of the family</p> <p>d. When the client is not taking prescribed medications</p>	<p>Answer: b</p> <p>Rationale: The police should accompany the mobile crisis team if the client is assaultive, suicidal, homicidal, or carries a weapon. The request of the client or family may or may not be a reason for police to accompany the team. A client not taking medications would not require police to accompany the team unless the client was a threat to self or others.</p> <p>Application Planning Safe, Effective Care Environment Learning Objective 3.4</p>
<p>3.5 What are the main reasons that children who require mental health services fail to receive them?</p> <p>Select all that apply.</p> <p>a. Availability of services</p> <p>b. Accessibility of services</p> <p>c. Reliability of services</p> <p>d. Affordability of services</p> <p>e. Likeability of services</p>	<p>Answers: a, b, d</p> <p>Rationale:</p> <ul style="list-style-type: none"> • Availability of services is a barrier to care. • Affordability of services is a barrier to care. • Accessibility of services is a barrier to care. • Reliability of services is not identified as a barrier to care. • Likeability of services is not identified as a barrier to care. <p>Application Assessment Psychosocial Integrity Learning Objective 3.5</p>
<p>4.1 Because of a high rate of prevalence, the nurse providing mental health services in a rural community should assess women for symptoms of which mental health illness?</p> <p>a. Major depressive disorders</p> <p>b. Schizophrenia</p> <p>c. Anorexia</p>	<p>Answer: a</p> <p>Rationale: Women in rural areas have a higher rate of major depressive disorders, 41 percent compared with 13 to 29 percent of depressive disorders in urban women. Anorexia, personality disorders, and schizophrenia have lower rates of occurrence in rural communities</p>

<p>d. Personality disorders</p>	<p>than do major depressive disorders.</p> <p>Application</p> <p>Assessment</p> <p>Psychosocial Integrity</p> <p>Learning Objective 4.1</p>
<p>4.2 Which of the following statements offers an explanation of the poor utilization of available mental health resources in rural settings?</p> <p>a. Rural residents are not likely to have a mental illness.</p> <p>b. Emotional problems are considered the domain of healers and family.</p> <p>c. Individuals in a rural setting tend to fear mental health providers.</p> <p>d. There is a decreased need for services in the rural areas.</p>	<p>Answer: b</p> <p>Rationale: Stigma, religious values, and belief that emotional problems are considered to be in the domain of the healers and family contribute to poor utilization of services. There is a need for mental health services in rural areas. Individuals with mental illness are no more likely to fear mental health providers. There are few available services; therefore the community tends to care for its own members.</p> <p>Analysis</p> <p>Assessment</p> <p>Psychosocial Integrity</p> <p>Learning Objective 4.2</p>
<p>4.3 When assessing a woman with children in a homeless shelter, the nurse should assess for:</p> <p>a. History of husband or partner abuse.</p> <p>b. Unsuccessful family placement.</p> <p>c. The woman's parenting skills.</p> <p>d. The children's school attendance.</p>	<p>Answer: a</p> <p>Rationale: Women and children who live in homeless shelters are often there after fleeing from an abusive husband or partner. Family placement, parenting skills, and school attendance may need to be addressed, but are not the overriding assessment need.</p> <p>Application</p> <p>Assessment</p> <p>Psychosocial Integrity</p> <p>Learning Objective 4.3</p>
<p>4.4 Nurses who work with older adults should be aware that elders may be most reluctant to share concerns about their mental health because:</p> <p>a. They experience stigma associated with mental illness.</p> <p>b. They are usually not aware of their mental state.</p>	<p>Answer: a</p> <p>Rationale: Diagnosis and treatment of mental illness is less likely to occur among the older population because of the stigma of mental illness. Elders may be unaware of their mental state, may not want to appear abnormal, and may not want family members to know of their condition, but these are not the most common</p>

<p>c. They do not want to appear abnormal.</p> <p>d. They do not want their family to know of their condition.</p>	<p>concerns.</p> <p>Application</p> <p>Assessment</p> <p>Health Promotion and Maintenance</p> <p>Learning Objective 4.4</p>
<p>5.1 Which action by the nurse would indicate understanding of the principle of self-advocacy?</p> <p>a. Involving the client in treatment decisions</p> <p>b. Modifying the physical environment</p> <p>c. Teaching social skills</p> <p>d. Maintaining clients in their context</p>	<p>Answer: a</p> <p>Rationale: The client should be involved in treatment decisions since those who are most affected by decisions should have the greatest influence on the decisions. Teaching social skills, modifying the physical environment, and maintaining clients in their context are not examples of self-advocacy.</p> <p>Application</p> <p>Implementation</p> <p>Safe, Effective Care Environment</p> <p>Learning Objective 5.1</p>
<p>5.2 Community-based nurses providing mental health care realize that the most effective nursing interventions will focus on problems identified by:</p> <p>a. The nurse.</p> <p>b. The client.</p> <p>c. The family.</p> <p>d. The physician.</p>	<p>Answer: b</p> <p>Rationale: The problems identified by clients are the most important in daily life. Problems identified by the nurse, family, or physicians may be important, but do not provide the most effective nursing interventions.</p> <p>Application</p> <p>Assessment</p> <p>Psychosocial Integrity</p> <p>Learning Objective 5.2</p>
<p>5.3 Which of the following interventions by the nurse indicates that the mental health client is encouraged to integrate into the mainstream community?</p> <p>a. Determining the client's care needs</p> <p>b. Teaching necessary social skills</p> <p>c. Arranging a job for the client</p> <p>d. Deciding where the client will live</p>	<p>Answer: b</p> <p>Rationale: One goal of normalization is integration into mainstream community. Integration includes teaching the necessary social skills to consumers. Self-care, housing, and employment may be considered as part of the integration, but learning social skills is paramount.</p> <p>Application</p> <p>Implementation</p>

	Psychosocial Integrity Learning Objective 5.3
<p>5.4 The nurse may use bridging strategies to assist the client to readjust to community living after discharge from the inpatient setting. Bridging strategies include:</p> <p>Select all that apply.</p> <ol style="list-style-type: none"> Linking the family and friends to support services. Conducting sessions that make the family a part of the treatment team. Starting the client's outpatient services the day after discharge. Improving discharge planning between inpatient and outpatient staff. 	<p>Answers: a, b, d</p> <p>Rationale:</p> <ul style="list-style-type: none"> • Linking the family and friends to support services will facilitate successful community living, which includes being adequately prepared for discharge. • Conducting sessions that make the family a part of the treatment team will facilitate successful community living, which includes being adequately prepared for discharge. • Improving discharge planning between inpatient and outpatient staff will facilitate successful community living, which includes being adequately prepared for discharge and being linked to the appropriate community services. • Starting the client's outpatient services the day after discharge will delay linkage to the appropriate community resources. <p>Application</p> <p>Implementation</p> <p>Health Promotion and Maintenance</p> <p>Learning Objective 5.4</p>
<p>5.5 During a home care visit, the client becomes agitated, hostile, and threatening; the nurse is not able to deescalate the client. What immediate action should the nurse take?</p> <ol style="list-style-type: none"> Alert the nurse supervisor. Call the physician. Call 911 for emergency assistance. Leave the client in the care of the family. 	<p>Answer: c</p> <p>Rationale: If calmness and nonthreatening support are ineffective in deescalating the threatening behavior, calling for emergency assistance may be necessary. Informing the nurse supervisor or physician may be appropriate, but would not be the priority action. Leaving a client who is threatening in the care of the family may result in harm to self or others.</p> <p>Application</p> <p>Implementation</p> <p>Safe, Effective Care Environment</p> <p>Learning Objective 5.5</p>

<p>5.6 What intervention is likely to improve the mental health needs of more children with a wide range of psychiatric and behavioral problems?</p> <ol style="list-style-type: none"> Service integration into the school system Referring children with mental health problems to their primary physician Increasing the number of inpatient services for children Providing parents with a list of community resources that offer mental health care to children 	<p>Answer: a</p> <p>Rationale: As communities broaden outreach into the school system, the mental health needs of more children with a wide range of psychiatric and behavioral problems will be met, regardless of the family's ability to afford or access mental health care.</p> <p>Application</p> <p>Assessment</p> <p>Health Promotion and Maintenance</p> <p>Learning Objective 5.6</p>
<p>5.7 During the recovery facet of mental health rehabilitation, which goal does the nurse choose to assist the client in realistic mental health management?</p> <ol style="list-style-type: none"> Continuing to pursue previous dreams and aspirations Discovering ways to minimize symptoms Adapting to the disease Reviewing old ideas 	<p>Answer: c</p> <p>Rationale: Recovery, a facet of rehabilitation, refers to incorporating the disability as a part of reality, which includes adapting to the disease. Continuing to pursue previous aspirations, minimizing symptoms, and reviewing old ideas may be incorporated into recovery.</p> <p>Application</p> <p>Planning</p> <p>Health Promotion and Maintenance</p> <p>Learning Objective 5.7</p>
<p>5.8 Which nursing intervention most effectively assists mentally ill clients to work toward recovery?</p> <ol style="list-style-type: none"> Encourage clients to exercise control in their relationships with professionals and in their own lives. Inform clients when the nurse believes they should be making progress. Keep client away from other clients with mental illness. Let clients know when the nurse is frustrated with their progress. 	<p>Answer: a</p> <p>Rationale: Individuals with mental disorders need power and control over their lives. This allows them to take personal responsibility for where they are in their lives and where they are going. Informing the clients of the nurse's frustration and keeping clients away from others are not appropriate interventions.</p> <p>Application</p> <p>Implementation</p> <p>Health Promotion and Maintenance</p> <p>Learning Objective 5.8</p>
<p>5.9 Which of the following questions should the nurse ask clients with mental illness when assessing their support system?</p>	<p>Answer: b</p> <p>Rationale: Research indicates that individuals</p>

<p>a. How has your mental illness affected your life?</p> <p>b. Do you get help from your family, friends, or community?</p> <p>c. What are your goals for the future?</p> <p>d. How do you plan to take care of yourself?</p>	<p>with more social resources or networks are better able to adapt to change and are in better health. How the mental illness affected the client's life, goals for the future, and self-care are not part of assessing the support system.</p> <p>Application</p> <p>Assessment</p> <p>Health Promotion and Maintenance</p> <p>Learning Objective 5.9</p>
<p>6.1 Which of the following would be an effective intervention for transforming the American mental health system?</p> <p>a. Decreasing school mental health programs.</p> <p>b. Conducting education campaigns.</p> <p>c. Decreasing the focus on research and focusing on care.</p> <p>d. Assessing all homeless people for mental illness.</p>	<p>Answer: b</p> <p>Rationale: Educational campaigns will target rural American, racial and ethnic minority groups, and people for whom English is a second language. The purpose is to increase awareness of the importance of mental health. Decreasing research to focus on care, or decreasing school mental health programs would not be beneficial. Assessing homeless people for mental illness would not transform the mental health system.</p> <p>Analysis</p> <p>Implementation</p> <p>Health Promotion and Maintenance</p> <p>Learning Objective 6.1</p>
<p>6.2 The nurse strives to accomplish which of the following when assessing clients from culturally diverse backgrounds about their needs and values related to mental health?</p> <p>a. Reducing stigma</p> <p>b. Friendship and alliance with the client</p> <p>c. Expansion of research objectives</p> <p>d. Elimination of disparities in mental health services</p>	<p>Answer: d</p> <p>Rationale: The nurse works toward eliminating health care disparities in mental health services by collecting information that allows for the tailoring of services for individuals from diverse cultures. Friendship with the client, expansion of research, and reducing stigma would not address the client's needs and values related to mental health.</p> <p>Synthesis</p> <p>Planning</p> <p>Psychosocial Integrity</p> <p>Learning Objective 6.2</p>
<p>6.3 What community action will transform the mental health system into one that is consumer</p>	<p>Answer: a</p>

<p>and family driven?</p> <ul style="list-style-type: none">a. Involving consumers and families.b. Incarcerating individuals if treatment options are unavailable.c. Focusing treatment on mental health emergencies.d. Providing mental health services in one central location.	<p>Rationale: Active participation of the consumer and families in designing and developing the system of care in which they are involved places the focus on the consumer and families rather than the system. Focusing on emergencies, incarcerating individuals, and centralizing services do not result in a consumer or family driven system.</p> <p>Synthesis</p> <p>Planning</p> <p>Health Promotion and Maintenance</p> <p>Learning Objective 6.3</p>
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