

## N442 POPULATION EXAM 1 FOCUS SHEET

### **What are the 8 Principles of Public Health Nursing? S.A.A. PP/pg. 11**

1. Client/ population
2. Obligation: to achieve the greatest good for the greatest number of people
3. Collaboration with client
4. Primary prevention is the priority
5. Strategies that create healthy environmental, social, and economic condition in which the population may thrive
6. Actively obligated to identify and reach out to all who might benefit from a specific activity or service.
7. Optimal use of available resources and creation of new evidence-based strategies
8. Collaboration with other professions

### **Which of the 8 principles of public health nursing is priority?**

Primary prevention

### **What are examples of primary preventions? S.A.A.**

- Vaccines
- Immunizations

### **Who are the main influencers of the history of public health? S.A.A. pg. 17-9**

- Lillian Wald
- Mary Breckinridge
- Lemuel Shattuck
- Dorothea Dix

### **What is Lillian Wald known for?**

She was a founder of public health nursing and founded the National Organization for Public Health Nursing, which set the first professional standards for the practice of public health nursing. She lived in NY. She was involved in organizing a class in home nursing for poor immigrants. She founded the Henry Street Settlement. She helped with sanitation.

**What is Mary Breckinridge known for?**

She founded the Frontier Nursing Services in 1925. Devoted her life to improving the health of children, maternal/ newborn and developing a system of rural healthcare in the remote regions of Kentucky.

**What is Lemuel Shattuck known for?**

He prepared a report for the Massachusetts Sanitary Commission that pointed out that much of the ill health and disability in American cities in 1850 could be traced to unsanitary conditions. The Shattuck Report recommended the establishment of a state health department and local health boards in every town and resulted in the first attempt to write a comprehensive public health code.

**What is Dorothea Dix known for?**

She was an American Political activist in the 19<sup>th</sup> century who become aware of the dreadful conditions in prisons and mental hospitals. She visited jails and insane asylums to allocated funds to establish the first hospitals for the mentally ill.

**What is Clara Barton known for?**

She achieved widespread recognition during the Civil War, distributing supplies to wounded soldiers and caring for the casualties with the help of her team of nurses. Founded the Red Cross in 1863 to provide aid for natural disasters.

**What are the achievements of public health (CDC) in the 20<sup>th</sup> century? S.A.A. pg. 5**

Vaccination, MVA safety, safer workplaces, control of infectious diseases, decline in heart disease and stroke deaths, safer and healthier foods, healthier mothers and babies, family planning, fluoridation of drinking water and recognition of tobacco as a health hazard

**What are social determinants of health?**

Social conditions in which people live and work.

### **What are examples of social determinants of health? S.A.**

- Conditions in where people live
- Income
- Social status
- Education
- Literacy level
- Home and work environment
- Support networks
- Gender
- Culture
- Availability of health services

### **What are the Healthy People 2030 overarching goals? PP**

A national, science-based plan designed to reduce certain illness and disability by reducing disparities in healthcare services in people of different economic groups (treatment focused)

### **What are examples of how to achieve the Healthy People 2030? PP**

1. Attain high-quality, *longer lives free of preventable disease*, disability, injury, and premature death.
2. Achieve health *equity*, eliminate disparities, and improve the health of *all groups*.
3. Create social and physical *environments that promote good health* for all.
4. Promote quality of life, healthy development, and *healthy behaviors across all life stages*.
5. *Engage* leadership, key constituents, and *the public* across multiple sectors *to take action and design policies that improve the health and well-being* of all.

### **What are the core functions of the government? S.A.A. pg. 5**

- It assesses healthcare problems
- It intervenes by developing relevant healthcare policy that provides access to services
- It ensures that services are delivered, and outcomes achieved

### **What is public health?**

A synthesis of nursing and public health within the context of *preventing disease* and disability and promoting and protecting the health of the entire community (focused on prevention, and not cure or treatment) EX. vaccines

What society does collectively to ensure what conditions exist in which people can be healthy.

**What are health disparities? Pg. 4, PP**

Differences in healthcare and health outcomes experienced by one population compared with another

**What are examples of health disparities? S.A.A.**

- Poverty
- Environmental threats
- Inadequate access to health care
- Individual and behavioral factors
- Educational inequalities
- Race and ethnicity
- Gender
- Sexual identity and orientation
- Disability status or special health care needs
- Geographic location (rural and urban)

**What is the focus of community health nursing? ATI pg. 4**

Promote, preserve, and maintain the health of *populations* by the delivery of health services to individuals, families, and groups (population-focused approach to planning, delivering, and evaluating nursing care)

**How would you describe community health nursing? S.A.A.**

- A broad field that allows nurses to practice in a wide variety of setting
- Nurses promote the health and welfare of clients across the lifespan and from diverse population
- Involves a synthesis of nursing and public health nursing.
- Nurses practice in the community (in a facility, health clinic, county health department or client's environment)

**What is the overall goal of public health? PP**

Disease prevention

**What does the government regulate? S.A.A. pg. 31**

- Food (FDA)
- Drugs
- Devices
- Occupation health (OSHA)
- Environment through the CDC

### **How are public health departments funded? Pg. 31**

Tax funds to state governments in support of specific public health programs

Ex. block grants give money to specific programs and providers based on state health needs

### **What is the WHO's definition of public health? Pg. 77**

“A state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”

### **How has healthcare changed in the United States over time?**

Technology

### **What does WHO's definition of public health look like?**

Self-actualization or reaching one's true potential

### **What is global health? PP, pg. 75-8**

Prioritize improving health and achieving equity for all people worldwide.

Emphasizes transnational health issues, determinants, and solutions, involves many disciplines within and beyond the health sciences, and promotes interdisciplinary collaboration, and is a synthesis of population-based prevention with individual-level clinic care

Health problems, issues, and concerns that transcend national boundaries and may best be addressed by cooperative actions and solutions

### **What are examples of global health disparities? S.A.A. pg. 78**

- Wars and political unrest
- Natural and man-made disasters
- Limited resources and structure in lesser developed nations
- International travel (increases spread of disease)
- Sanitation practices
- Climate change
- Maternal health
- Nutrition

**What are examples of noncommunicable disease? S.A.A.**

- Cardiovascular diseases, diabetes, cancers, and chronic respiratory diseases
- Occurs more in low- and middle-income countries

**What is causing a rise in noncommunicable diseases? S.A.A.**

- Tobacco use
- Harmful use of alcohol
- Unhealthy diets
- Aging of the global population
- Urbanization
- Culture changes especially among the young
- Increased sedentary lifestyle

**What are some positive effects of globalization? S.A.A. P.P. 54**

- Workers who migrate also gain new skills in the receiving countries and can return to their native countries revitalizing with education and new outlooks on solving the problem
- “Brain gain”
- Those who leave may also come back with the skills to educate their workers

**What are some negative effects of globalization? S.A.A.**

- Shortage of nurses and physicians
- Low wages
- Unsafe environment
- Need for better living conditions
- Unusually heavy workloads and long working hours

### **What are the goals of the Patient Protection and Affordable Care Act? S.A.A. PG. 51, PP**

- Expand health care insurance coverage
- Expand healthcare access to children
- Shifting the focus from treatment to prevention
- Reducing the cost & improving the efficiency of healthcare

### **What are examples of politics influencing public health policy? S.A.A. PG. 53**

- Providing equal opportunity through universal provision of education
- Healthcare and housing
- Nutritional programs
- Resources (financial, human (personnel), time and physical space)

### **What are the steps of health policy making? S.A.A. PG. 54-5**

1. Setting an Agenda: problems are identified
2. Policy Formulation: alternative policies are identified
3. Policy Adoption: selecting a policy
4. Policy Implementation: carrying out the policy by using available resources
5. Policy Assessment: evaluation of the policy
6. Policy Modification: maintain, change or eliminate policy

### **How does politics influence healthcare? PG. 53**

It makes decisions for the society that can be enforced by rules, laws and regulations. Politics provides the power needed to influence critical decisions regulating allocation of resources needed to enable policy and involves strategies needed to achieve the desired goals in society.

### **What are the ethical principles in community health nursing? S.A.A. PP.**

- Respect for Autonomy
  - Individuals select their own goals/ actions
- Nonmaleficence
  - No harm is done
- Beneficence
  - Maximize possible benefits and minimize possible harms (do good)
- Distributive Justice
  - Fair distribution of benefits

## **What is the ANA Code of Ethics? S.A.A. PG.62**

The only full service professional organization representing the interests of registered nurses. It helps its members to play a significant role in advocating for their patients by closing the gaps in healthcare access for patients and their families through testifying at congressional hearings, summits and forums. Advocates for nurses to prevent potential declines in quality and to communicate with the Congress in the prevention of harmful changes in Medicare actions.

1. The nurse practices with compassion and respect for the inherent dignity, worth, and unique attributes of every person
2. The nurse's primary commitment is to the patient, whether an individual, family, group, community, or population.
3. The nurse promotes, advocates for and protects the rights, health, and safety of the patient.
4. The nurse has authority, accountability, and responsibility for nursing practice; makes decisions; and takes action consistent with the obligation to promote health and to provide optimal care
5. The nurse owes the same duties to self as to others, including the responsibility to promote health and safety, preserve wholeness of character and integrity, maintain competence, and continue personal and professional growth.
6. The nurse, through individual and collective effort, establishes, maintains, and improves the ethical environment of the work setting and conditions of employment that are conducive to safe, quality healthcare.
7. The nurse, in all roles and settings, advances the profession through research and scholarly inquiry, professional standards development, and the generation of both nursing and health policy
8. The nurse collaborates with other health professionals and the public to protect human rights, promote health diplomacy, and reduce health disparities.
9. The profession of nursing, collectively through its professional organizations, must articulate nursing values, maintain integrity of the profession, and integrate principles of social justice into nursing and health policy.

## Define the following epidemiologic models: PP., PG. 140-1

### a) **Epidemiologic Triad**

The classic model is based on the belief that health status is determined by the interaction of the characteristics of the host, agent and environment, not by any single factor.

Host factors, sometimes called intrinsic factors, include both variable (modifiable) and absolute (nonmodifiable) factors. Age, race, and genetic makeup are examples of absolute, or nonmodifiable, factors. Lifestyle, exercise level, nutrition, health knowledge, and motivation for achieving optimal wellness are examples of host factors that are variable, or modifiable.

Agents can be classified into five groups. These agents may be *physical*, such as heat and trauma; *chemical*, such as pollutants, medications, and drugs; *nutritional*, such as the absence or excess of water, vitamins, fats, proteins, and carbohydrates; *psychosocial*, such as stress, social isolation, and social support; and *biologic*, such as bacteria, viruses, arthropods, toxins, and conditions that interfere with the normal function of the body.

Environmental factors are frequently divided into three categories: biologic, physical, and social. The biologic environment is composed of plants, animals, and the toxins they produce; this includes pathogenic microorganisms, vectors that carry the infectious agents, and the reservoirs where infectious agents are normally found. The physical environment includes light, heat, air, atmospheric pressure, radiation, geologic factors, and the structures in the environment. The social environment includes culture, technology, educational opportunities, political systems, demographic characteristics, sociologic factors, and economic and legal systems.

### b) **Wheel of Causation**

De-emphasizes the agent as the sole cause of disease while emphasizing the interplay of physical, biologic, and social environments.

### c) **Web of Causation**

An epidemiologic model that strongly emphasizes multiple causation while de-emphasizing the role of agents in explaining illness. These casual webs are more focused and realistic, and they may be as intricate and complex as needed. By making the pathways explicit in a web of causation, a diagram deepens understanding and provides a framework for statistical analysis. It also serves as a valuable practical guide. Public health professionals use web of causation models such as that interrupt the chain of events that lead to adverse states of health.

### d) **Natural History of Disease Model**

Course of disease or condition from the onset to resolution

In 1958, Leavell and Clark developed a conceptual model for the natural history of any disease affecting humans. The initial interactions between the agent, host, and environment occur during the prepathogenesis period. Primary prevention measures specific to the disease can be implemented at this stage to prevent its onset in a population of well people. The period of pathogenesis begins when there are biologic, psychological, or other responses within the host. Secondary prevention measures focus on early diagnosis and prompt treatment. This can limit resulting

disabilities when implemented during the early stages of the disease. Tertiary prevention follows with rehabilitation measures that enable the individual to function at his or her maximum capability.

**What sources give health-related data? What are they best used for? PG. 149, PP.**

The main sources of health statistics are surveys, administrative and medical records, claims data, vital records, surveillance, disease registries, and peer-reviewed literature, assessments, health programs, age and sex distribution, socioeconomic characteristics and cultural and ethnic distributions

They are used to link environmental exposure to illness and disease and can identify the risk factors for disease which leads to identifying what are some modifiable risk factors.

**What is the difference between the epidemiologic process and the nursing process? PG. 142**

Nursing process: focus on caring for the client within his or her family

Epidemiologic process: caring for the population of the community as a whole

**What is the same between the epidemiologic process and the nursing process? PG. 142**

Both derived from the problem-solving process that provides a framework for gathering data about health problems, analyzing information, generating diagnoses or hypothesis, planning for resolution, implementing plans of action, and evaluating results.

**How has morbidity and mortality changed in the last 150 years? PG.140**

It has improved because of the rising standards of living; improvement with nutrition and hygiene.

Nightingale compared morality in the civilians with that in soldiers and found that in peacetime, the soldiers in England had a morality rate nearly twice that of civilian males. This helped with implanting her sanitary reforms.

**Why do we investigate outbreaks? PP.**

- To see a localized increase in the incidence of the illness.
- Public health professionals who collect epidemiologic data during assessments and use them for establishing the need for health programs can also use them to evaluate those services

**Define the different epidemiologic rates and proportions. PP., pg. 135, 154-5**

Rate:

the primary measurement used to describe the occurrence (frequency or quantity) of a state of health in a specific group of people in a given time period. It is a proportion that includes the factor of time. Rates are used to quantify either the occurrence (incidence) or the existence (prevalence) of states of health or illness. Using rates rather than counting cases takes both the size of the population at risk and the time frame into account.

Primary measurement used to describe either the occurrence or the existence of a specific state of health or illness

Proportions:

one number divided by another in which the numerator is a subset of the denominator (included in) and is expressed as a percentage. (*950 male victims/1000 total victims x 100 = 95% of the victims were male*)