Chapter 02: Historical Issues
Keltner: Psychiatric Nursing, 8th Edition

MULTIPLE CHOICE

1. A person says, “What mental health issues are a major concern for the general population.”
The nurse’s reply should be based on what confirmed fact concerning mental health issues?
   a. Bipolar disorder is a rare diagnosis among the general population.
   b. A diagnosis of schizophrenia is rarely confirmed during the teenage years.
   c. Major depression is very prevalent among the adult population.
   d. Alcohol-related issues are minimal considering the entire adult population.

   ANS: C

   Four of the top medical disorders causing disability are psychiatric disorders (i.e., major
depression, schizophrenia, bipolar disorder, and alcohol abuse). About half of all mental
disorders start by the midteens.

   DIF: Cognitive level: Applying
   TOP: Nursing process: Planning
   MSC: Client Needs: Psychosocial Integrity

2. A nurse, preparing a community presentation, should include what information concerning the
   most accurate characterization of treatment of the mentally ill prior to the Period of
   Enlightenment?
   a. Large public asylums provided custodial care.
   b. Care for the mentally ill was more compassionate.
   c. Care focused on reducing stress and meeting basic human needs.
   d. Patients were often displayed for public amusement.

   ANS: D

   In the 1700s it was common practice for caretakers to display mentally ill patients for the
amusement of the paying public. The creation of large asylums took place during the Period
of Enlightenment. Mental illness was first studied during the Period of Scientific Study.
Dealing with stress and meeting basic needs are concerns of the modern era.

   DIF: Cognitive level: Applying
   TOP: Nursing process: Planning
   MSC: Client Needs: Safe, Effective Care Environment

3. A nurse is preparing to present a discussion to a group of nursing students on meeting the
   needs of the mentally ill. What concerns should be identified as the focus of society’s
   concerns during both the Period of Enlightenment and the Period of Community Mental
   Health?
   a. Moving patients out of asylums
   b. Studying brain structure and function
   c. Meeting basic human needs humanely
   d. Providing medication to control symptoms

   ANS: C
The use of asylums signaled concern for meeting basic needs of the mentally ill, who in earlier times often wandered the countryside. With deinstitutionalization, many patients who were poorly equipped to provide for their own needs were returned to the community. The current system must now concern itself with ensuring that patients have such basic needs as food, shelter, and clothing. Studying brain structure and function is more a concern of modern times, as is the provision of medication.

DIF: Cognitive level: Applying  TOP: Nursing process: Planning
MSC: Client Needs: Safe, Effective Care Environment

4. Which statement made by a nurse demonstrates an understanding of the issue affecting the delivery of care to the mentally ill that motivated passage of the Community Mental Health Centers Act in 1963?
   a. “Involuntary hospitalized occurs only if a client demonstrated violent behavior.”
   b. “We attempt to address the issues that occur when a client is geographically isolated from family and community.”
   c. “Legally a voluntarily admitted client can demand to be discharged before receiving adequate treatment.”
   d. “Mental ill clients must give informed consent before being used as subjects in pharmacologic research.”

ANS: B

State hospitals were often located a great distance from the patients’ homes, making family visits difficult during hospitalization. The Community Mental Health Centers Act in 1963 served as the impetus for deinstitutionalization, allowing patients and families to receive care close to home. Admission only for behavior that endangers self or others is more consistent with current admission criteria. Early discharge rarely occurred before the community mental health movement. Unethical pharmacologic research was not a major issue leading to community mental health legislation.

MSC: Client Needs: Safe, Effective Care Environment

5. Which of Freud’s contribution to psychiatry most affects current psychiatric nursing?
   a. The challenge to look at humans objectively
   b. Recognition of the importance of human sexuality
   c. Theories about the importance of sleep and dreams
   d. Discoveries about the effectiveness of free association

ANS: A

Freud’s work created a milieu for thinking about mental disorders in terms of the individual human mind. This called for therapists to look objectively at the individual, a principle that is basic to nursing. The correct answer is the most global response. Freud’s theories of psychosexual development are an aspect of holistic nursing practice, but not the entire focus. Free association is not a pivotal issue in nursing practice.

DIF: Cognitive level: Understanding  TOP: Nursing process: Assessment
MSC: Client Needs: Psychosocial Integrity

6. The greatest impact in the care of the mentally ill over the past 50 years is represented in which nursing statement to a newly admitted patient?
a. “You will benefit from attending the assigned self-help groups”

b. “Outpatient therapy will be prescribed as a part of your post discharge therapy.”

c. “Let’s talk about the psychotropic drugs you’ve been prescribed.”

d. “This is a written copy of your patients’ rights.”

ANS: C

The advent of psychotropic drugs allowed patients to normalize thinking and feeling. As psychosis diminished, the individual became accessible for psychotherapeutic interventions. Hospital stays were shortened. Hospital milieus improved. Though important, none of the other choices has had such a significant impact.

MSC: Client Needs: Physiologic Integrity

7. An adult diagnosed with schizophrenia is being discharged from a state mental hospital after 20 years of institutionalization. What intervention should the nurse include in discharge planning to best manage the relapse of symptoms?

a. Discuss methods to assist in the transition from hospitalization to community.

b. Encourage the client to use community support services.

c. Evaluate the client’s ability to effectively self-administer antipsychotic medications as prescribed.

d. Educate the client and family to the likely need for crisis or emergency psychiatric interventions from time to time.

ANS: D

Patients with serious mental illness are rarely considered cured at the time of hospital discharge. Decompensation is likely from time to time, even when good community support is provided. While the remaining options are appropriate, none will affect relapse manage more than an understanding that relapse care will likely be necessary.

DIF: Cognitive level: Applying  TOP: Nursing process: Planning
MSC: Client Needs: Psychosocial Integrity

8. A nurse at a behavioral health clinic sees an unfamiliar psychiatric diagnosis on a patient’s insurance form. Which resource should the nurse use to discern the criteria used to establish this diagnosis?

a. The Diagnostic and Statistical Manual of Mental Disorders (DSM)

b. Nursing Diagnosis Manual
c. A psychiatric nursing textbook
d. A behavioral health reference manual

ANS: A

The DSM gives the criteria used to diagnose each mental disorder. The distracters do not contain diagnostic criteria for mental illness.

DIF: Cognitive level: Applying  TOP: Nursing process: Assessment
MSC: Client Needs: Safe, Effective Care Environment

9. Which nursing intervention is associated with a shift in the psychiatric nursing focus during the community mental health period of the 1960s?

a. De-emphasizing the high numbers of people seeking treatment

b. Making substance abuse the primary focus of care
c. Focusing services on persons with serious mental illness

d. Assessing the client’s potential for improvement

ANS: D

The community mental health movement brought with it a broadening of areas of concern to the psychiatric nurse. It became acceptable, even desirable, for psychiatric nurses to focus on what was called the worried well, as opposed to providing care for acutely ill psychotic individuals. Neither disillusionment with the numbers seeking treatment nor providing more services to those with severe mental illness occurred.

MSC: Client Needs: Safe, Effective Care Environment

10. An adult with serious mental illness is being admitted to a community behavioral health inpatient unit. Recognizing current trends in hospitalization, the nurse can reasonable assume the need to prioritize which intervention?
   a. Providing education regarding the need for medication adherence
   b. Evaluating whether the client has a clear understanding of the illness
   c. Implementing safety precautions to address aggressive behavior
   d. Counseling the client concerning risks involved in demanding discharge against medical advice

ANS: C

Compared with patients of the 1960s and 1970s, today’s patients are likely to display more aggressive behavior. This understanding is critical to making astute assessments that lead to planning for the provision of safety for patients and staff. Treatment compliance, understanding of the illness process, and discharge against medical advice are possible issues with which the nurse might deal, but these are less relevant when admission assessment is performed.

DIF: Cognitive level: Applying  TOP: Nursing process: Planning
MSC: Client Needs: Safe, Effective Care Environment

11. When a nurse working in a well-child clinic asks a parent’s address, the parent responds, “My children and I are homeless.” What assumption should the nurse make of this response?
   a. It is a common occurrence, because 1 out of 50 children are homeless.
   b. It signals a need to investigate the possibility that the parent has severe mental illness.
   c. Confirms that evidence of child abuse or neglect that should be reported to social service agencies.
   d. Suggests that the parent may have substance abuse problem.

ANS: A

The current belief is that the homeless are people (including entire families) who have been displaced by social policies over which they have no control. One out of 50 children is homeless. Although homelessness might be associated with serious mental illness, it might also be the result of having a weak support system and of social policies over which the individual or family has no control. No assumption should be made about the existence of child or substance abuse.

DIF: Cognitive level: Analyzing  TOP: Nursing process: Assessment
MSC: Client Needs: Psychosocial Integrity

12. Which individual should the nurse assess as having the highest risk for homelessness?
   a. An older adult woman with mild dementia who lives alone in an apartment
   b. An adult with serious mental illness and no family
   c. An adolescent with an eating disorder
   d. A married person with alcoholism

   ANS: B
   The adult has both a serious mental illness and a potentially weak support system. Both are risk factors for homelessness. The other individuals have psychiatric disorders but have better established support systems.

   DIF: Cognitive level: Applying  TOP: Nursing process: Assessment
   MSC: Client Needs: Psychosocial Integrity

13. A nurse begins working in a clinic housed in a homeless shelter. The nurse asks the clinic director, “What topic should I review to improve my effectiveness as I begin my new job?” Which topic should the clinic director suggest?
   a. Care of school-age children
   b. Psychiatric assessment
   c. Communicable disease prevention strategies
   d. Sexually transmitted disease signs and symptoms

   ANS: B
   It is estimated that significant numbers of the homeless population have a serious mental illness and/or suffer from substance abuse or dependence. Although the other conditions may exist, the numbers are not as significant.

   DIF: Cognitive level: Applying  TOP: Nursing process: Assessment
   MSC: Client Needs: Psychosocial Integrity

14. Which skill is most important to a nurse working as a member of a community mental health team that strives to use a seamless continuum of care?
   a. Case management
   b. Diagnostic ability
   c. Physical assessment skills
   d. Patients’ rights advocacy

   ANS: A
   To effectively use a seamless continuum of care, a nurse must have case management skills with which he or she can coordinate care using available and appropriate community resources. Psychosocial assessment and physical assessment are functions that can be fulfilled by another health care worker. Patients’ rights advocacy is one aspect of case management.

   DIF: Cognitive level: Analyzing  TOP: Nursing process: Implementation
   MSC: Client Needs: Safe, Effective Care Environment

15. The broadened scope of psychiatric nursing practice is attributable primarily to what factor?
   a. Increased use of psychotropic drugs
   b. Opening of community mental health centers
   c. Legislation that changed nurse practice acts across the country

   www.nursingdb.com
d. Recidivism of seriously mentally ill patients in public mental hospitals

ANS: B

Community mental health centers were designed and organized to provide services in addition to inpatient hospitalization, thus giving nurses opportunities to practice in a variety of treatment settings (e.g., emergency rooms, partial hospitalization settings, outpatient care) and to have new roles, such as consultant, liaison, and case manager. Increased use of psychotropic drugs is not as important a factor as are community mental health centers. Legislation changing nurse practice acts broadened the scope of practice for nurse practitioners only by allowing prescriptive privileges. Recidivism is not a relevant factor.

DIF: Cognitive level: Understanding  TOP: Nursing process: Implementation
MSC: Client Needs: Safe, Effective Care Environment

16. A patient diagnosed with an acute was hospitalized for a week and is now being discharged to a halfway house, where care is managed by a community mental health nurse. Which inference applies to this community?
   a. Additional mental health services should be made available for the severely mentally ill.
   b. A seamless continuum of services is in place to serve persons with severe mental illness.
   c. Case management services should be expanded to care for acute as well as long-term system consumers.
   d. Care is effective for only a few selective psychiatric diagnoses.

ANS: B

Data are sufficient to suggest that a seamless continuum of service is in place, because the individual is able to move between continuum treatment sources and is given the services of a case manager to coordinate care. Data provided are insufficient to warrant any of the other assessments.

MSC: Client Needs: Safe, Effective Care Environment

17. Which of these services is most appropriate for an older client requiring minimal mental health interventions?
   a. Day treatment
   b. Hospitalization
   c. Scheduled visits at a community mental health center
   d. Regular attendance at a senior center facility

ANS: C

The continuum of care represents treatment services along a range of intensity. Hospitalization is the most intensive, progressing to day treatment, and finally to routine visits at a community mental health center. A senior center is not prepared to provide mental health interventions.

DIF: Cognitive level: Analyzing  TOP: Nursing process: Implementation
MSC: Client Needs: Safe, Effective Care Environment

MULTIPLE RESPONSE
1. Which changes in psychiatric nursing practice are directly attributable to events occurring during the Decade of the Brain? (Select all that apply.)
   a. Homeless shelters became practice sites.
   b. Nurses upgraded knowledge of psychopharmacology.
   c. Nurses provided psychoeducation to patients and families.
   d. Nurses viewed psychiatric symptoms as resulting from brain irregularities.
   e. Nurses were more likely to advocate for patients’ rights related to involuntary commitment.

ANS: B, C, D

Psychobiologic research relating to brain structure and function made it possible for psychiatric nurses to view symptoms as brain irregularities and made it necessary for them to become knowledgeable about psychotropic medications to make appropriate assessments regarding desired outcomes and side and toxic effects of therapy. With hospital stays shortened, it became necessary for nurses to provide psychoeducation to patients and families who would need to monitor outcomes, symptoms of relapse, and side and toxic effects of medication. Homeless shelters became practice sites with the onset of deinstitutionalization. Advocacy for patients’ rights relating to hospitalization and commitment became an ethical issue before the Decade of the Brain.


2. A community mental health nurse works in a mental health services system that is undergoing change to become a seamless system. To promote integrity of the new system, the nurse should focus on: (Select all that apply.)
   a. psychopathology.
   b. symptom stabilization.
   c. medication management.
   d. patient and family psychoeducation.
   e. patient reintegration into the community.
   f. holistic issues relating to patient care.

ANS: D, E, F

A seamless system of mental health services will require new conceptualizations. Nurses will need to focus more on recovery and reintegration than on symptom stabilization and more on holistic issues such as finances and housing than on medication management. Consumers and family members will also need to be provided with extensive psychoeducation.


3. A newcomer to a community support meeting asks a nurse, “Why aren’t people with mental illnesses treated at state institutions anymore?” What would be the nurse’s accurate responses? (Select all that apply.)
   a. “Funding for treatment of mental illness now focuses on community treatment.”
   b. “Psychiatric institutions are no longer accepted because of negative stories in the press.”
   c. “There are less restrictive settings available now to care for individuals with mental illness.”
d. “Our nation has fewer people with mental illness; therefore, fewer hospital beds are needed.”

e. “Better drugs now make it possible for many persons with mental illness to live in their communities.”

ANS: A, C, E

Deinstitutionalization and changes in funding shifted care for persons with mental illness to the community rather than large institutions. Care provided in a community setting, closer to family and significant others, is preferable. Improvements in medications to treat serious mental illness made it possible for more patients to live in their home communities. Prevalence rates for serious mental illness have not decreased. Although the national perspectives on institutional care did become negative, that was not the reason many institutions closed.