

Population Change and Public Health Exercise 7A

1. Largest life expectancy gains in absolute terms were made during 1950 to 2000 in
 - A. Africa
 - B. Asia and Latin America
 - C. North America
 - D. Europe
2. Which of the following category accounts for more than half of burden of disease in Africa
 - A. Communicable diseases
 - B. Non-communicable diseases
 - C. Injuries
 - D. Reproductive illnesses
3. Change in age structure of the population due to decline in fertility is generally accompanied by
 - A. Change in the average age at death
 - B. Change in the cause structure of death
 - C. Both of the above
 - D. None of the above
4. Which of the following is not a proximate determinant of mortality
 - A. Occupation of a person
 - B. Vitamin A deficiency
 - C. A fatal fall
 - D. Inheriting a gene for sickle cell anaemia
5. The framework of proximate and distal determinants of mortality helps to
 - A. Analyze the reasons for trends and differentials in mortality over time and space
 - B. Understand the causes of mortality from a theoretical perspective
 - C. Both of the above
 - D. None of the above

Population Change and Public Health Exercise 7B

1. The relationship between income and health
 - A. Has remained unchanged over time
 - B. Has reversed over time, resulting in increase in mortality with increasing income
 - C. Has undergone an upward shift with increase in life expectancy at a given level of income
 - D. Has undergone a downward shift, with decrease in life expectancy at a given level of income, with basic relationship staying the same.

2. The 'structural shift' in the relationship between income and health over time can be attributed to
 - A. Improved nutrition due to improvements in agriculture technologies at a given level of income
 - B. Due to break-through in curative technology for some of the diseases
 - C. Breakthroughs in preventive health technology and public health campaigns
 - D. Increasing level of education with increase in income

3. The relationship between health and income is
 - A. One way, with higher income leading to better health
 - B. Is two way, with improved health contributing to economic growth and economic growth contributing to better health
 - C. There is no relationship at all between economic growth and health
 - D. None of the above.

4. The under 5 mortality shows a
 - A. Consistent negative relationship with maternal education across all countries
 - B. Consistent positive relationship with maternal education
 - C. No relationship with maternal education
 - D. Positive relationship in some countries and negative in other countries

5. Which of the following is true of relationship between maternal education and child mortality
 - A. There is a uniform relationship between maternal education and child mortality, and hence it is possible to predict level of under 5 mortality in a country, if maternal educational levels are known
 - B. Different child mortality levels may be observed at the same maternal education levels across different countries
 - C. Both of the above
 - D. None of the above

6. Which of the following is true of the relationship between maternal education and gains in mortality over time

- A. All the global health gains as measured by mortality reduction in the period 1960 to 1990 are attributed to gains in female education
 - B. Almost one-third of the health gains as measured by mortality reduction in the period 1960 to 1990 are attributed to gains in female education
 - C. Almost one-half of the health gains as measured by mortality reduction in the period 1960 to 1990 are attributed to gains in female education
 - D. None of the above
7. The maternal education operates to reduce the mortality by
- A. By reducing certain health risk behaviors
 - B. By raising the economic status of the mother
 - C. By increasing the age at marriage
 - D. By reducing the fertility
8. Which of the following is true of relationship between income and health
- A. There is no relationship between the two.
 - B. There is a consistent and uniform relationship between income and health across all countries in the world
 - C. There is a consistent relationship between income and health, however, the levels of mortality associated with a particular level of income may be different in different countries
 - D. None of the above

Population Change and Public Health Exercise 7C

1. Epidemiological polarization refers to
 - A. Widening health inequities between different population sub-groups in a given country or between different countries
 - B. Re-emergence of some diseases e.g. tuberculosis, malaria etc.
 - C. Narrowing down of differences in health status between different population sub-groups over time
 - D. Changing age and cause structure of mortality over time
2. Compression of morbidity implies
 - A. Increasing number years lived with disability and illness before death among the elderly due to increase in life-expectancy
 - B. Narrowing down of causes of morbidity and illness among elderly before death due to epidemiological transition.
 - C. Fewer years of disabled life before death among the elderly
 - D. All of the above
3. Epidemiological polarization is a phenomenon witnessed
 - A. Only in developing countries due to poor economic conditions
 - B. In both developing and developed countries
 - C. Only in developed countries due to growing socio-economic inequities
 - D. None of the above
4. Double burden of diseases in developing world refers to
 - A. Burden of both the infectious and nutritional diseases and new emerging epidemics of non-communicable diseases and injuries
 - B. Burden of existing illnesses couple with illness associated with HIV/AIDS
 - C. Doubling in the morbidity and mortality due to different causes
 - D. None of the above
5. During epidemiological transition
 - A. The crude death rate will go up
 - B. The age structure of the death will change, with increase in mortality at lower ages and decline in higher age groups
 - C. The cause structure of mortality changes from infections and nutrition related diseases to chronic non-communicable diseases
 - D. The age structure changes but the cause structure remains the same.
6. 'Health transition' refers to
 - A. Transition in health care practices over time
 - B. Transition in cause structure of mortality over time and changes in health systems to meet new challenges
 - C. Both of A and B
 - D. None of the above

7. Fertility decline
 - A. Followed mortality decline after world war II as predicted by DTT
 - B. Did not follow mortality decline immediately, leading to very high population growth rates in some of these countries
 - C. Ultimately followed in all the developing countries after a lag time
 - D. None of the above

8. The epidemiological transition is
 - A. Is a generalized theory which will be repeated in all the countries all over the world
 - B. Is well supported by the existing empirical evidence
 - C. Is a model to understand the change in mortality over time
 - D. None of the above

9. Existence of epidemiological polarization implies that
 - A. The health systems have to struggle with both infectious diseases and chronic illnesses
 - B. The health systems have to deal with the conflicting interests of the disadvantaged and poor sections of the society and the socially and economically advantaged sections of the society
 - C. Both of the above
 - D. None of the above

10. If there is no compression of morbidity then
 - A. The gains in mortality will be accompanied by gains in years lived with disability
 - B. The gains in mortality will be accompanied by gains in health years lived
There will be no gains in the mortality
 - C. The gains in mortality will be limited to only women
 - D. The gains in mortality will be limited to only women