### UNIVERSITY OF SWAZILAND

#### FACULTY OF HEALTH SCIENCES

## (FIRST SEMESTER)

# FINAL EXAMINATION PAPER **DECEMBER, 2010**

**COURSE:** 

**NUR 323** 

**COURSE TITLE:** 

COMMUNITY MENTAL HEALTH NURSING III

TIME ALLOWED:

2 HOURS

MARKS ALLOCATED: 75

#### **INSTRUCTIONS:**

- 1. THIS PAPER CONTAINS FOUR QUESTIONS
- 2. ANSWER ONLY THREE QUESTIONS
- 3. QUESTION 1 IS COMPULSORY
- 4. EACH QUESTION CARRIES A TOTAL OF 25 MARKS
- 5. ANSWER EACH QUESTION ON A SEPARATE SHEET OF **PAPER**

PLEASE DO NOT OPEN THE QUESTION PAPER UNTIL PERMISSION HAS BEEN GRANTED BY THE INVIGILATOR.

### **QUESTION 1.**

#### SECTION A: MULTIPLE CHOICE (1 mark each)

- 1. The purpose of mental status examination is:
  - a) To objectively determine and record observable aspects of the patient's psychological functioning
  - b) Provides specific information which assists in the establishment of diagnosis
  - c) Both A and B
  - d) None of the above
- 2. The mood in mental status examination refers to:
  - a) The sustained feeling that prevails over time felt by the client
  - b) The sustained feeling as observed by the nurse
  - c) The feeling of anger expressed by relatives towards the client
  - d) All of the above
- 3. The capacity of the patient to be aware and to understand that he or she has a problem or illness and to be able to review its probable causes and arrive at tenable solutions is the:
  - a) Insight
  - b) Judgement
  - c) Memory
  - d) Reliability
- 4. The nursing process can be defined as:
  - a) A problem-solving approach that enables the nurse to provide care in an organized scientific manner.
  - b) A philosophy to help nursing attain professional status by offering an alternative to the medical model
  - c) An educational tool to help achieve patient centered nursing
  - d) All of the above
- 5. The goal of the nursing process is to:
  - a) Alleviate, minimize, or prevent actual or potential health problems.
  - b) Communicate nursing interventions among and with nursing staff
  - c) Ensure a scientific reasoning or basis in client centred care
  - d) All of the above

- 6. A 24-year old man with a diagnosis of chronic schizophrenia is admitted to the psychiatric unit. He is talking loudly as the nurse approaches him. When asked who he is talking to, he said, "I hear God's voice." This is an indication of:
  - a) A disorder of thought process
  - b) A disorder of thought content
  - c) A disorder of perception
  - d) A disorder of speech
- 7. The disorder in question 6 above is referred to as:
  - a) Delusion of grandeur
  - b) Delusion of persecution
  - c) Auditory hallucination
  - d) Visual hallucination
- 8. Medical disorders, on the multi-axial diagnosis, appear in:
  - a) Axis I
  - b) Axis II
  - c) Axis III
  - d) Axis IV
- 9. The nurse is assessing a client with chronic schizophrenia who has stopped taking his medication and is being admitted with acute psychotic symptoms. The client's perception of the present problem would best be documented by the nurse:
  - a) Using exact words in client statements
  - b) With information obtained from the family
  - c) By observing behaviour for several hours
  - d) As interpreted from client's words
- 10. Which of the following is most important in establishing a trusting environment for the organised delivery of nursing care to a client?
  - a) Cooperation of the client
  - b) A complete psychosocial assessment
  - c) The client's perception of the current situation
  - d) Accepting and non-judgemental attitude of the nurse

### **SECTION B:**

Differentiate between the following terminologies (2 marks each)

- 1. Circumstantiality and Tangentiality
- 2. Echolalia and Echopraxia
- 3. Akathisia and Akinesia
- 4. Tardive dyskanesia and Bradykinesia
- 5. Hallucination and Illusion

## **SECTION C: MATCHING QUESTIONS**

Match the following responses to the most appropriate phrase (1 mark each)

| Phrase |  | Responses                |
|--------|--|--------------------------|
| 1.     | Actual or potential problem the nurse can legally address                                    | a) Assessment            |
| 2.     | Measurable and realistic goal that anticipates the   | b) Nursing diagnosis     |
|        | improvement or stabilisation of the client   | c) Nursing interventions |
| 3.     | Collection of subjective and objective data concerning<br>the psychosocial needs of a client | d) Evaluation            |
| 1      |  | e) Expected outcome      |
| 4.     | Actions taken to assist client to achieve anticipated outcomes                               | f) Prioritising          |
| 5.     | Determines success of interventions used in meeting anticipated outcomes                     | g) Medical diagnosis     |

[Total marks= 25]

### **QUESTION 2**

- A. State and discuss the three major components of Watson Theory of Human Caring (15 marks)
- B. Compare Watson's theory with the nursing process (10 marks)

[Total marks: 25]

## **QUESTION 3**

In order to be effective, a mental health program needs to have a comprehensive approach to service provision. Explain:

- a) What is meant by comprehensive mental health service? (2 marks).
- b) The components of a comprehensive mental health program. (10 marks).
- c) You have been posted at the Northern Hhohho region as a regional community mental health nurse. You notice that more than 60% of the mental health problems in that part of the country are due to abuse of drugs especially dagga. You plan to design a program to address the situation.
  - 1. What approach are you going to use in designing the program and why? (3 marks).
  - 2. Outline and discuss the steps you are going to follow in designing the program (10 marks).

[Total marks: 25]

## **QUESTION 4**

Stigma and discrimination is very rife in the field of mental health. This has implications on access to services by those who need them. Discuss:

- a) How stigma and discrimination affects access to mental health services (10 marks)
- b) How you think stigma and discrimination can be dealt with (15 marks).