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Certified Health Education Specialist (CHES) exam

Questions & Answers PDF

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Question: 1

Which of the following is most likely to be the impact of a strictly enforced local ordinance against sleeping on the streets or in the parks overnight in the downtown area in order to remove the homeless?

- A. Increased numbers of shelters
- B. Shift of homeless population to outside the downtown area
- C. Decrease in the homeless population of the area
- D. Increase in crimes against property

Answer: B

Explanation:

The most likely impact of a strictly enforced local ordinance against sleeping on the streets or in the parks overnight in the downtown area in order to remove the homeless is a shift of the homeless population to outside of the downtown area. Ideally, there would be an increase in shelters, but this, unfortunately, is rarely the case as such ordinances are usually intended to rid the area of the homeless rather than to accommodate them.

Question: 2

Which of the following is an example of a voluntary health agency with which the health education specialist may collaborate in carrying out preventive health projects?

- A. Ford Foundation
- B. Shriner's
- C. American Heart Association
- D. The American Academy of Health Behavior

Answer: C

Explanation:

There are a number of different types of non-governmental health agencies:

Voluntary health agencies such as the American Heart Association and American Cancer Society

Philanthropic foundations such as the Ford Foundation and Rockefeller Foundation

Fraternal, religious, and service organizations such as Shriners, Salvation Army, Lion's, and Catholic Relief Fund

Professional health associations such as the American Academy of Health Behavior and American Alliance for Health, Physical Education, Recreation, and Dance

Question: 3

When storing and utilizing large amounts of personal data about members of a priority population, what is the primary concern?

- A. Accuracy
- B. Ease of access
- C. Clarity
- D. Security

Answer: D

Explanation:

When storing and utilizing large amounts of personal data about members of a priority population, the primary concern is security. Access to the data should be carefully controlled through passwords or other forms of identification. Personally identifiable information (PII), which includes any information that can be utilized to identify, locate, or contact a person (such as name, address, email address, telephone number, fingerprints, photographic image, and Social Security number), must be secured and confidentiality assured.

Question: 4

Which step in media literacy is the health education specialist utilizing when using media devices to convene a priority population?

- A. Reaction
- B. Awareness
- C. Reflection
- D. Analysis

Answer: A

Explanation:

The step in media literacy that the health education specialist is utilizing when using media devices to convene a priority population is reaction, the last step in the 4-step process. The first step, awareness, involves exploration of media sources through accessing information from a variety of different sources. The second step involves analysis of the various messages by comparing and contrasting. The third step involves reflection to evaluate the implicit and explicit messages from the individual's perception.

Question: 5

When considering the best method of surveying a population for a needs assessment, what is the first thing to consider?

- A. Resources needed for assessment
- B. Timeframe required for assessment
- C. Characteristics of the target population
- D. Ease of administration of assessment

Answer: C

Explanation:

When considering the best method of surveying a population for a needs assessment, the first thing to consider is the characteristics of the target population. The health education specialist must consider such factors as age, ethnic background, and socioeconomic status in order to pick a survey method that is likely to receive the best return. As preparation for more formal surveys, the health education specialist may conduct a literature review and windshield assessments.

Question: 6

The health education specialist plans to conduct community forums and to interview key informants regarding needs of a priority population for health-related information. Prior to the forums and interviews, the health education specialist should

- A. draw up a list of suggestions.
- B. review literature and social indicators.
- C. ask for volunteers to disseminate health information.
- D. form focus groups to discuss needs.

Answer: B

Explanation:

If the health education specialist plans to conduct community forums and to interview key informants regarding the needs of a priority population for health-related information, prior to the forums and interviews, the health education specialist should review literature and social indicators, such as census data, health statistical data, and welfare data so that the health education specialist comes armed with some information. The health education specialist may also carry out a windshield assessment to get an overall impression of the community.

Question: 7

If a television ad for a health campaign has a large reach but a poor recall, the problem is probably

- A. hour of viewing.
- B. size of audience.
- C. presentation of material.
- D. audience literacy.

Answer: C

Explanation:

If a television ad for a health campaign has a large reach (the number of people who were exposed to or viewed the ad) and a poor recall (number of people who recalled seeing the ad or remembered the message), then the problem is probably the presentation of the message. Television ads are brief—usually 15, 30, or 60 seconds. Thirty-second ads usually show better return on investment than 15-second ads. Ads must rapidly catch the viewers' attention and be memorable enough to ensure recall.

Question: 8

The health education specialist is concerned about healthcare disparities and wants to participate in advocacy efforts. The health education specialist's advocacy efforts should begin with

- A. local public health department.
- B. personal practice.
- C. state legislature.
- D. federal legislature.

Answer: B

Explanation:

If the health education specialist is concerned about healthcare disparities, the health education specialist's advocacy efforts should begin with personal practice, ensuring equity in provision of care and selection of the priority population. When developing programs, the health care specialist should consider those in the community who lack adequate care, such as immigrants, people with low incomes, and the homeless. Other advocacy efforts may include joining local, state, and national organizations to actively lobby to overcome health disparities.

Question: 9

The health education specialist has placed information about the need for vaccinations on a kiosk in a local mall. What type of communication channel is the health education specialist utilizing?

- A. Community
- B. Interpersonal
- C. Mass media
- D. Organizational

Answer: A

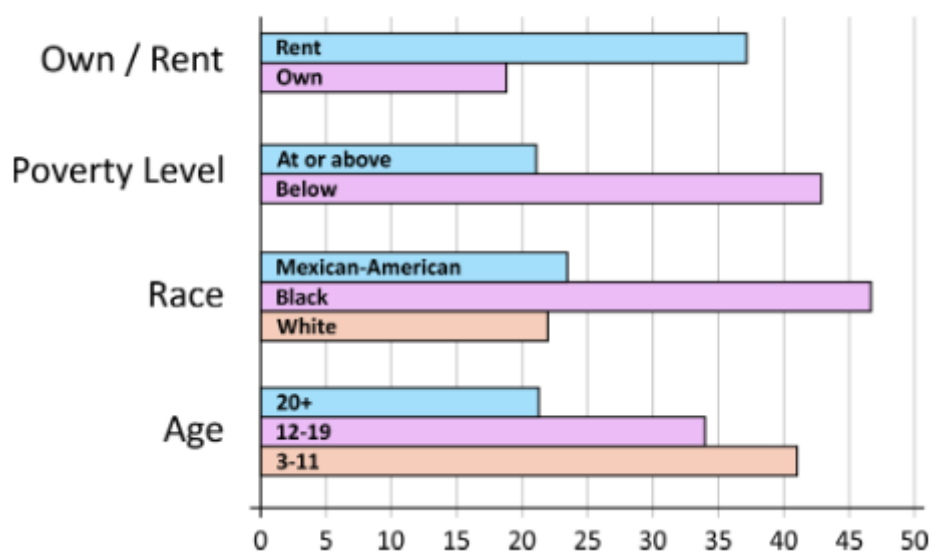
Explanation:

If the health education specialist has placed information about the need for vaccinations on a kiosk in a local mall, the type of communication channel the health education specialist utilizing is the community channel. Community channels also include school campaigns, town hall meetings, community events, faith-based campaigns, community educational programs, public speeches. Community channels often engender trust because they may be familiar and may reach a large audience; however, community channels may be difficult to establish and behavior change resulting from community channels is difficult to measure.

Question: 10

Based on the information in the graph, which two factors are most critical in determining exposure to second-hand smoke?

Exposure to Secondhand Smoke 2010-2020



- A. Poverty level and race
- B. Race and age
- C. Home ownership and age
- D. Poverty level and home ownership

Answer: A

Explanation:

Based on the information in the graph, the two factors that are most critical in determining exposure to second-hand smoke are the poverty level and race. Home ownership is closely aligned with the poverty level because those below the poverty level are often unable to own a home, and exposure to secondhand smoke is higher among those below the poverty level. Of the three ethnic groups, Blacks have exposure to secondhand smoke at more than double the rates of whites or Mexican-Americans.



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