



AMREF INTERNATIONAL UNIVERSITY
SCHOOL OF MEDICAL SCIENCES
DEPARTMENT OF REHABILITATIVE MEDICINE
BACHELOR OF SCIENCE IN PHYSIOTHERAPY

END OF TRIMESTER EXAMINATIONS JANUARY TO APRIL 2024

UNIT CODE: PHT 135

UNIT NAME: INTRODUCTION TO COMMUNITY HEALTH

DATE: 16TH APRIL 2024

TIME: 6PM-8PM

INSTRUCTIONS

1. All students will have two (2) hours to complete the examination
2. This is an **online exam**, Attempt all questions as per the instruction
3. It is the student's responsibility to report any page and number missing in this paper.
4. Check that the paper is complete
5. Total number of pages is 8 including the cover.
6. Read through the paper quickly before you start.
7. Upon finishing the exam paper, on submission, the message 'Your examination has been submitted' will appear.

TOTAL: _____/70

PERCENT: _____/100%

POINTS EARNED TOWARDS FINAL GRADE _____/70

Section A (30 Multiple choice questions (30 marks – one Mark Per question))

1. A group of people living or in the same place or having particular characteristics in common is known as:
 - a) Partnerships
 - b) Community
 - c) Collaboration
 - d) System

2. Primary Health care (PHC) reflects and evolves from and socio-cultural and political characteristics of the country and its communities.
 - a) Partnerships
 - b) Community partnership
 - c) Community System
 - d) The economic conditions
 - e) Community Collaboration

3. Community development seeks to individuals and group people with the skills they need to effect change within their communities.
 - a) Do nothing
 - b) Compliment
 - c) Diminish
 - d) Empower

4. Universal Health Care (UHC) means that:-
 - a. Communities receive the health services they need
 - b. Individuals receive the health services they need without suffering financial hardship
 - c. All individuals and communities receive the health services they need without suffering financial hardship
 - d. Communities receive the health services they need without suffering financial hardship

5. Which of the following is not true:- Article 8 of the Alma Ata conference stated that - All governments:
- a) Should formulate national policies & strategies
 - b) Should develop plans of action to launch and sustain PHC as part of a comprehensive national health system and in coordination with other sectors
 - c) Increase the number of Health workers in Facilities to cope with the increasing demand at the grass roots level
 - d) Should exercise political goodwill
 - e) Should mobilize the country's resources and to use available external resources rationally.
6. PHC entails three inter-related and synergistic components (Which one is not):
- a. Comprehensive integrated health services
 - b. Multi-sectoral policies and actions to address the upstream and wider determinants of health
 - c. Health care approach that focuses on organizing curative and rehabilitative health systems
 - d. Engaging and empowering individuals, families, and communities for increased social participation and enhanced self-care and self-reliance in health
7. Data and indicator analysis provide descriptive information on demographic and socioeconomic characteristics
- a) True
 - b) False
8. Community health approach focuses on the principles of , participation, intersectoral action and appropriate technology and a decentralized role played by the health system
- a) Community partnership
 - b) Equity
 - c) Quality and equality
 - d) Adequacy
9. Recognition of Community Health (CH) strategy is to bring services to community and households (HH) by providing them with medicines:
- a. True
 - b. False

10. Which of one of these qualities does not apply to Community health indicators (6 marks):
- Reliable
 - Available
 - Valid
 - Sensitive
 - Specific
 - Feasible
 - Relevant
11. Functionality of the **CHU** (Community Health Unit) should be based on attainment of : (**choose one of the following**):
- Existence of trained Health Committee that meets at least twice a year
 - Trained CHVs and CHAs that meet prescribed guidelines
 - Supportive supervision for all community health personnel done at least quarterly
 - All trained CHVs and CHAs have reporting and referral tools
 - All trained CHVs and CHAs make household visits as per their targets and at least to each household, once a quarter.
12. Post a community assessment from on developmental framework, which data should be determined?
- The history of the community
 - The demographics (such as age) of the persons living in the community
 - The emotional maturity of the community's residents
 - The number and quality of daycare centers and schools
13. Community diagnosis provides baseline information about :
- Sanitation and water problems in the community
 - Decisions are based on solid information and evidence.
 - The health status of community/ residents
 - Setting of priorities.
14. A community physiotherapist is completing a community assessment by using a systems framework. Which of the following is the key to the success of the assessment?
- Using a tool to systematically identify, collect, and organize appropriate data
 - Demanding a reasonable budget for assessment expenses
 - Telling everyone what he or she is doing so that the listener may have input
 - Allowing at least 2 weeks to collect data to ensure thoroughness

15. Which of one of these qualities does not apply to Community health indicators:
- a) Reliable
 - b) Available
 - c) Valid
 - d) Sensitive
 - e) Specific
 - f) Feasible
 - g) Relevant
16. A human rights-based approach is based on the following key principles: availability and accessibility; acceptability and quality of services and participation; equality and non-discrimination;
- a) Parallel and non-inclusive process
 - b) A participatory process
 - c) Transparent and non-responsive process.
17. Which of the following is a very practical and feasible way of obtaining comprehensive community health data?
- a) Requesting community residents to respond to an Internet survey
 - b) Performing a windshield survey
 - c) Completing a comprehensive survey with community residents
 - d) Using data already collected and available on the Internet
18. is not amongst the six objectives of the Kenya health policy 2014 – 2030.
- a. Halting and reversing the rising burden of communicable diseases,
 - b. Increasing immunization rates,
 - c. Reducing the burden of violence and injuries,
 - d. Eliminating communicable diseases providing essential healthcare,
 - e. Minimizing exposure to health risk factors,
 - f. Strengthening collaboration with other sectors that have an impact on health.
19. Which of the following is not classified as health indicators:
- a. Demographic and Fertility indicators
 - b. CHVs in a table banking group
 - c. Mortality Indicators
 - d. Mortality indicators
 - e. Morbidity indicators
 - f. Disability rates

20. Problem oriented community diagnosis responds to.
- All needs in the community
 - A particular need within the community
 - Men, women and children and all diseases that affect them in that community
21. Functionality of the CHU should be based on attainment of (which one is not true)
- Trained CHVs and CHAs that meet prescribed guidelines
 - Coordination by county community health leadership
 - Existence of trained Health Committee that meets at least twice a year
 - Supportive supervision for all community health personnel done at least quarterly
 - All trained CHVs and CHAs have reporting and referral tools
 - all trained CHVs and CHAs make household visits as per their targets and at least to each household, once a quarter.
22. The basic information needed on community diagnosis include all the following except:
- Available health services
 - Community leadership and their subgroups
 - People and population
 - Environment and disease patterns,
23. Which one amongst the following is the last stage during community entry process:
- Identification of those who are at risk
 - Identification and quantification of health problem
 - Set priorities for planning
 - Identification of community needs and problems
 - Determine available resources
24. Functionality of the Community Health Unit (CHU) should be based on attainment of :
- Supportive supervision for all community health personnel done at least quarterly
 - Coordination by county community health leadership
 - Existence of trained Health Committee that meets at least twice a year
 - Trained Community Health Volunteers (CHVs) and Community Health Assistants (CHAs) that meet prescribed guidelines
 - All trained CHVs and CHAs have reporting and referral tools

- f. All trained CHVs and CHAs make household visits as per their targets and at least to each household, once a quarter.
25. Which of following factors affect community health amongst others?
- a) Community inclusivity
 - b) Community organization
 - c) Community mobilization,
 - d) Community preparedness
26. In community diagnosis problem Oriented community diagnosis responds to
- a. All needs in the community
 - b. A particular need within the community
 - c. Certain needs as required by the community
 - d. All the needs as required by the community
27. The community health care approach is based on:
- a) Universal health indicators
 - b) the Primary Health Care (PHC) concept
 - c) The UHC (Universal health care) approach
 - d) The Declaration of Astana
28. Which one of the following is not a requirement to accomplish effective community entry?
- a) Paraphrase and show interest
 - b) Be empathetic and encourage others to listen Maintain good eye contact.
 - c) Be sympathetic and very kind
 - d) Listen to both sides of the issue
29. Which of the following steps is the 1st during formation of the CHU structures in community entry?
- a) Formation of linkage structures
 - b) Training teams
 - c) Awareness creation,
 - d) Situation analysis
 - e) Establishing the M & E mechanism
30. The community health committee shall include - Which of these is not?
- a) A prescribed number of which not more than two thirds shall be from same gender
 - b) Representation from the local women's group
 - c) Representation from religious and cultural groups within the context

d) Representation from youth and people with disabilities

Section B -Short structured questions – 20 marks

1. Explain the elements of PHC in Kenya (10)
2. Describe in detail how UHC as envisaged currently in Kenya and how it's expected to operate in your specific county. (5 marks)
3. What was the purpose of the Astana declaration? (5 marks)

Section C –Long structured questions – 20 marks

1. Explain the roles of a community health volunteers (CHV) - (10 Marks)
2. As a Physiotherapist working in the community health programme, you have been asked to initiate a disability intervention strategy in a “community” in your county. This is as a result of an upsurge in the number of children under 5 years noted to have various types of disabilities in the last one year (monthly and annual reports 2023). Cerebral palsy, autism, spina-bifida, club foot, cleft lip/pallet and developmental delays amongst others (10 marks).