

# Elsevier Community Health I & II Practice Test (Sample)

## Study Guide



**Everything you need from our exam experts!**

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# Introduction

Preparing for a certification exam can feel overwhelming, but with the right tools, it becomes an opportunity to build confidence, sharpen your skills, and move one step closer to your goals. At Examzify, we believe that effective exam preparation isn't just about memorization, it's about understanding the material, identifying knowledge gaps, and building the test-taking strategies that lead to success.

This guide was designed to help you do exactly that.

Whether you're preparing for a licensing exam, professional certification, or entry-level qualification, this book offers structured practice to reinforce key concepts. You'll find a wide range of multiple-choice questions, each followed by clear explanations to help you understand not just the right answer, but why it's correct.

The content in this guide is based on real-world exam objectives and aligned with the types of questions and topics commonly found on official tests. It's ideal for learners who want to:

- Practice answering questions under realistic conditions,
- Improve accuracy and speed,
- Review explanations to strengthen weak areas, and
- Approach the exam with greater confidence.

We recommend using this book not as a stand-alone study tool, but alongside other resources like flashcards, textbooks, or hands-on training. For best results, we recommend working through each question, reflecting on the explanation provided, and revisiting the topics that challenge you most.

**Remember:** successful test preparation isn't about getting every question right the first time, it's about learning from your mistakes and improving over time. Stay focused, trust the process, and know that every page you turn brings you closer to success.

Let's begin.

# How to Use This Guide

**This guide is designed to help you study more effectively and approach your exam with confidence. Whether you're reviewing for the first time or doing a final refresh, here's how to get the most out of your Examzify study guide:**

## **1. Start with a Diagnostic Review**

**Skim through the questions to get a sense of what you know and what you need to focus on. Your goal is to identify knowledge gaps early.**

## **2. Study in Short, Focused Sessions**

**Break your study time into manageable blocks (e.g. 30 - 45 minutes). Review a handful of questions, reflect on the explanations.**

## **3. Learn from the Explanations**

**After answering a question, always read the explanation, even if you got it right. It reinforces key points, corrects misunderstandings, and teaches subtle distinctions between similar answers.**

## **4. Track Your Progress**

**Use bookmarks or notes (if reading digitally) to mark difficult questions. Revisit these regularly and track improvements over time.**

## **5. Simulate the Real Exam**

**Once you're comfortable, try taking a full set of questions without pausing. Set a timer and simulate test-day conditions to build confidence and time management skills.**

## **6. Repeat and Review**

**Don't just study once, repetition builds retention. Re-attempt questions after a few days and revisit explanations to reinforce learning. Pair this guide with other Examzify tools like flashcards, and digital practice tests to strengthen your preparation across formats.**

**There's no single right way to study, but consistent, thoughtful effort always wins. Use this guide flexibly, adapt the tips above to fit your pace and learning style. You've got this!**

## Questions

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- 1. Which of the following is NOT a component of public health infrastructure that enables a public health organization to deliver services?**
  - A. Strong marketing campaigns for private practice**
  - B. A capable and qualified workforce**
  - C. Up-to-date data and information systems**
  - D. Agencies capable of assessment and responding to public health needs**
  
- 2. Which is an example of primary prevention at the population level?**
  - A. Immunization programs**
  - B. Cancer screening**
  - C. Antibiotic therapy for infections**
  - D. Palliative care**
  
- 3. The Ryan White HIV/AIDS Treatment Extension Act of 2009 provides funds to patients with HIV or AIDS for which services?**
  - A. Emergency services**
  - B. Housing assistance programs**
  - C. Dental care only**
  - D. Eye exams**
  
- 4. Which of the following is an upstream intervention?**
  - A. Increasing taxes on tobacco products**
  - B. Establishing a healthy food bank**
  - C. Education about handwashing**
  - D. Providing individual medical treatment**
  
- 5. What is a primary purpose of the Intervention Wheel?**
  - A. To identify and define the levels of practice and population-based interventions**
  - B. To replace clinical practice**
  - C. To limit practice to hospital settings**
  - D. To focus solely on individual treatment**

- 6. Which group supported the writing of the Public Health Code of Ethics?**
- A. American Public Health Association**
  - B. American Medical Association**
  - C. National Public Health Council**
  - D. World Health Organization**
- 7. What is the Centers for Disease Control and Prevention globally recognized for?**
- A. Conducting research and investigations and taking an action-oriented approach**
  - B. Providing direct patient care in clinics**
  - C. Regulating pharmaceutical manufacturing**
  - D. Managing hospital accreditation**
- 8. Which biodefense program was established to help public health professionals mount a proactive response to pandemics and biological disasters?**
- A. BioWatch**
  - B. Public Health Emergency Response Fund**
  - C. Global Health Security Initiative**
  - D. Community Health Surveillance Network**
- 9. Which program is a data-sharing program to facilitate surveillance of unusual patterns or clusters of disease in the United States?**
- A. BioSense**
  - B. EpiInfo**
  - C. HealthMap**
  - D. GOARN**

**10. Which program is described as preventing and controlling disease or death, while promoting health and quality of life that results from interactions between people and their environment?**

- A. The Centers for Disease Control and Prevention's Environmental Hazards and Effects Program**
- B. National Center for Environmental Health**
- C. Center for Chronic Disease Prevention and Health Promotion**
- D. Environmental Protection Agency Hazardous Air Program**

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## Answers

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1. A
2. A
3. A
4. A
5. A
6. A
7. A
8. A
9. A
10. A

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## **Explanations**

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- 1. Which of the following is NOT a component of public health infrastructure that enables a public health organization to deliver services?**
- A. Strong marketing campaigns for private practice**
  - B. A capable and qualified workforce**
  - C. Up-to-date data and information systems**
  - D. Agencies capable of assessment and responding to public health needs**

Public health infrastructure centers on the systems, people, and data that make population-wide health services possible. A capable and qualified workforce ensures there are skilled professionals to plan, implement, and evaluate public health programs. Up-to-date data and information systems enable ongoing surveillance, monitoring, and evidence-based decisions. Agencies capable of assessment and responding to public health needs provide the governance and operational capacity to identify risks, develop policies, and coordinate action. Marketing campaigns for private practice, while valuable in clinical settings, focus on promoting individual care and private sector services rather than building the capacity to deliver population-level public health. Therefore, marketing for private practice does not fit as a component of public health infrastructure.

- 2. Which is an example of primary prevention at the population level?**
- A. Immunization programs**
  - B. Cancer screening**
  - C. Antibiotic therapy for infections**
  - D. Palliative care**

Preventing disease before it occurs is the aim of primary prevention at the population level. Immunization programs vaccinate large groups, building immunity and reducing the incidence of infectious diseases across the community. Cancer screening, by contrast, detects disease early in people without symptoms, which is secondary prevention. Antibiotic therapy for infections treats an established illness, not prevention. Palliative care focuses on comfort for those with advanced disease, a form of tertiary prevention. So immunization programs are the best example of primary prevention at the population level.

**3. The Ryan White HIV/AIDS Treatment Extension Act of 2009 provides funds to patients with HIV or AIDS for which services?**

- A. Emergency services**
- B. Housing assistance programs**
- C. Dental care only**
- D. Eye exams**

The funding is designed to remove urgent barriers that would prevent someone with HIV or AIDS from getting and staying in medical care. Emergency services capture that immediate, essential support to keep treatment on track—covering urgent costs or situations that could force a gap in care, such as unexpected medical expenses or barriers that prevent timely access to services. While the program does support a range of services that can include dental care or other needs, the focus here is on providing rapid, enabling assistance so patients can continue their treatment, which is why emergency services is the best fit. Housing help or eye exams may be part of broader supportive services in some contexts, but they are not the primary category described by the act for funding access to HIV care.

**4. Which of the following is an upstream intervention?**

- A. Increasing taxes on tobacco products**
- B. Establishing a healthy food bank**
- C. Education about handwashing**
- D. Providing individual medical treatment**

Upstream interventions change the broader context that creates health risks, using policy, economic, or environmental shifts to prevent problems before they occur. Increasing taxes on tobacco products fits this idea because it uses a policy lever to reduce tobacco use across the population by making it more costly, which lowers the incidence of tobacco-related diseases over time. The other options operate more at the individual or service level: a healthy food bank provides resources to people, which helps in the moment but doesn't shift the policy environment; education about handwashing teaches a personal behavior; and providing medical treatment addresses illness after it happens. So the tobacco tax exemplifies changing the system to prevent disease on a population level.

**5. What is a primary purpose of the Intervention Wheel?**

- A. To identify and define the levels of practice and population-based interventions**
- B. To replace clinical practice**
- C. To limit practice to hospital settings**
- D. To focus solely on individual treatment**

The Intervention Wheel provides a shared framework that organizes public health nursing actions across different levels of practice—from individuals and families to groups and communities—so nurses can identify and categorize population-based interventions alongside person-focused care. This framework helps plan, implement, and evaluate health efforts that promote, protect, and prevent within the entire community, not just in clinical or hospital settings. It's not about replacing clinical practice or restricting practice to one setting or one mode of care; it emphasizes using population-focused approaches as well as individual care to improve community health.

**6. Which group supported the writing of the Public Health Code of Ethics?**

- A. American Public Health Association**
- B. American Medical Association**
- C. National Public Health Council**
- D. World Health Organization**

Public health ethics codes are produced by the professional groups that guide the field. The American Public Health Association is the leading organization for public health professionals, and it developed and promotes the Public Health Code of Ethics to provide a framework for how public health workers should protect community health, promote equity, and balance individual rights with the common good. The American Medical Association focuses on physicians and medical ethics rather than a broad public health code. The World Health Organization issues international guidance but does not author a single national-level public health ethics code for professionals. The National Public Health Council isn't the group that produced this code. So the group associated with writing and supporting the Public Health Code of Ethics is the American Public Health Association.

**7. What is the Centers for Disease Control and Prevention globally recognized for?**

**A. Conducting research and investigations and taking an action-oriented approach**

**B. Providing direct patient care in clinics**

**C. Regulating pharmaceutical manufacturing**

**D. Managing hospital accreditation**

The main idea here is that the CDC is known for conducting research and investigations and turning those findings into action to prevent disease and protect public health. The agency analyzes surveillance data, studies how illnesses spread, and organizes evidence-based interventions, guidelines, and emergency responses that countries can implement to curb outbreaks and improve population health. This action-oriented, prevention-focused role is what defines the CDC on a global scale. The other roles described aren't the CDC's primary function. Providing direct patient care in clinics is the work of clinicians and healthcare facilities. Regulating pharmaceutical manufacturing is typically handled by regulatory bodies like the FDA in the United States and equivalent agencies elsewhere. Managing hospital accreditation is done by accreditation organizations that assess and certify healthcare facilities.

**8. Which biodefense program was established to help public health professionals mount a proactive response to pandemics and biological disasters?**

**A. BioWatch**

**B. Public Health Emergency Response Fund**

**C. Global Health Security Initiative**

**D. Community Health Surveillance Network**

Early detection and rapid response to biological threats rely on environmental biosurveillance. BioWatch is the program designed to monitor the air for specific biological agents in real time, giving public health authorities an alert and the data needed to initiate protective measures and deploy resources quickly. This proactive setup allows for containment steps, exposure advisories, and swift activation of response protocols before widespread illness occurs. The other options describe funding mechanisms, international policy coordination, or generic surveillance systems, none of which provide the dedicated airborne biosurveillance and rapid alert function that BioWatch offers.

**9. Which program is a data-sharing program to facilitate surveillance of unusual patterns or clusters of disease in the United States?**

- A. BioSense**
- B. EpiInfo**
- C. HealthMap**
- D. GOARN**

BioSense is a data-sharing program designed to facilitate surveillance of unusual patterns or clusters of disease in the United States. It gathers near real-time data from hospitals and other health facilities as part of the National Syndromic Surveillance Program, so public health officials can monitor for anomalies across jurisdictions. By aggregating and analyzing these signals, BioSense helps detect potential outbreaks early and supports rapid situational awareness and investigation. EpiInfo is a software tool used for designing data collection forms and analyzing epidemiologic data; it does not function as a national data-sharing surveillance platform. HealthMap collects outbreak signals from online sources to provide global disease alerts, not the US-focused data-sharing system described. GOARN is the World Health Organization's Global Outbreak Alert and Response Network, which coordinates international outbreak responses, not a US-specific data-sharing program.

**10. Which program is described as preventing and controlling disease or death, while promoting health and quality of life that results from interactions between people and their environment?**

- A. The Centers for Disease Control and Prevention's Environmental Hazards and Effects Program**
- B. National Center for Environmental Health**
- C. Center for Chronic Disease Prevention and Health Promotion**
- D. Environmental Protection Agency Hazardous Air Program**

The idea being tested is how environmental health translates into preventing illness and promoting well-being by looking at how people interact with their surroundings. The CDC's Environmental Hazards and Effects Program is built around exactly that: it identifies environmental risks, studies how exposures affect health, and puts in place actions to reduce harm, with the goal of preventing disease or death and improving quality of life as people live and work in their environments. This aligns directly with the mission of environmental health in public health practice. The other options describe different units or agencies with broader or separate focus areas (such as a general environmental health center, chronic disease prevention, or EPA programs), which don't map as specifically to the described goal of preventing disease and promoting health through environmental interactions.

## Next Steps

**Congratulations on reaching the final section of this guide. You've taken a meaningful step toward passing your certification exam and advancing your career.**

**As you continue preparing, remember that consistent practice, review, and self-reflection are key to success. Make time to revisit difficult topics, simulate exam conditions, and track your progress along the way.**

**If you need help, have suggestions, or want to share feedback, we'd love to hear from you. Reach out to our team at [hello@examzify.com](mailto:hello@examzify.com).**

**Or visit your dedicated course page for more study tools and resources:**

**<https://elseviercommhealth1and2.examzify.com>**

**We wish you the very best on your exam journey. You've got this!**

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