

MTTC Health Education (112) 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. List two essential classroom food-safety practices for handling snacks and leftovers.**
 - A. Eating snacks without washing hands**
 - B. Handwashing before handling food and promptly refrigerating perishable items**
 - C. Leaving perishable items on the counter overnight**
 - D. Wearing gloves at all times and never washing hands**

- 2. In the context of school prevention for eating disorders, which type of approach should be considered first for reaching a broad range of students?**
 - A. An understanding by design approach**
 - B. A self-efficacy model that emphasizes personal confidence to change behavior**
 - C. A social norms approach that highlights accurate peer behaviors to motivate change**
 - D. A cognitive dissonance approach that helps students question, resist, and speak out against media, cultural, and societal messages in order to change their beliefs**

- 3. Which student goal statement best exemplifies an appropriate and effective personal health-related goal for a semester?**
 - A. I will lose 15 pounds by decreasing the fat around my waist and hips.**
 - B. I will not smoke, drink, or do drugs, and I will run between 5 and 10 miles every week.**
 - C. I will eat a healthier diet including fruits, vegetables, and whole grains.**
 - D. I will do aerobic exercise twice a week and do strengthening exercises once a week.**

- 4. In a class where students' questions about sex are answered with science-based prevention information, which outcome is most directly improved?**
 - A. Increase abstinence rates**
 - B. Have fewer misconceptions about sexual activity and its consequences**
 - C. Encourage parental involvement**
 - D. Increase test scores**

- 5. The protective factors listed include relationships with mentors and opportunities for engagement, plus clear expectations and safety. These should be categorized as which type of assets?**
- A. External assets provided by family, school, and community.**
 - B. Internal assets fostered by positive values and commitment to learning.**
 - C. Interpersonal competencies needed for relationship management.**
 - D. Self-management competencies needed to resist and handle stress.**
- 6. Name two evidence-based stress-management strategies commonly taught in adolescent health education.**
- A. Deep breathing and progressive muscle relaxation**
 - B. Multivitamins and caffeine avoidance**
 - C. High-intensity interval training and fasting**
 - D. Social media detox and painting**
- 7. Which description best distinguishes clinical depression from typical adolescent moodiness?**
- A. Mood improves from day to day.**
 - B. Symptoms are brief and isolated.**
 - C. Symptoms persist consistently for several weeks.**
 - D. Depression is caused solely by stress from school.**
- 8. Which assessment type is designed to monitor understanding during instruction?**
- A. Summative**
 - B. Formative**
 - C. Holistic**
 - D. Portfolio**
- 9. Distinguish incidence from prevalence in health data.**
- A. Incidence is new cases in a time period; prevalence is total existing cases at a point in time**
 - B. Incidence is total cases; prevalence is new cases**
 - C. Incidence counts deaths**
 - D. Prevalence counts recoveries**

10. Which role is explicitly described as part of the FAME program?

- A. FAME Auditor**
- B. FAME Coach**
- C. FAME Coordinator**
- D. FAME Student Leader**

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Answers

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

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Explanations

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1. List two essential classroom food-safety practices for handling snacks and leftovers.
 - A. Eating snacks without washing hands
 - B. Handwashing before handling food and promptly refrigerating perishable items**
 - C. Leaving perishable items on the counter overnight
 - D. Wearing gloves at all times and never washing hands

Good classroom food-safety practice starts with clean hands and keeping perishables cold. Washing hands with soap and water before handling snacks or leftovers reduces the chance of transferring germs to the food. Promptly refrigerating perishable items slows bacterial growth and helps keep leftovers safe by keeping them out of the temperature danger zone (generally below 40°F/4°C). The other options don't fit because skipping handwashing invites germs onto food, leaving perishable items out on the counter overnight allows bacteria to multiply, and insisting on gloves at all times while never washing hands can give a false sense of cleanliness and still spread contamination.

2. In the context of school prevention for eating disorders, which type of approach should be considered first for reaching a broad range of students?
 - A. An understanding by design approach
 - B. A self-efficacy model that emphasizes personal confidence to change behavior
 - C. A social norms approach that highlights accurate peer behaviors to motivate change
 - D. A cognitive dissonance approach that helps students question, resist, and speak out against media, cultural, and societal messages in order to change their beliefs**

A cognitive dissonance approach works best first because it actively engages a wide range of students in examining the cultural messages that drive body image pressures. By having students critique media, cultural, and societal standards and then align their beliefs with actions—such as resisting harmful messages and speaking up for healthier norms—the intervention creates an internal motivation to change attitudes and beliefs. This kind of universal, participatory activity doesn't rely on students already feeling at risk or having high self-efficacy; it reaches everyone by appealing to critical thinking and personal responsibility, and it can be implemented across diverse classrooms with lasting impact. Other strategies have value, but they're not as broadly suited for universal reach on their own. An instructional design framework helps with lesson structure but isn't an intervention targeting beliefs or media literacy. Building self-efficacy focuses on confidence to change behavior, which may work for some individuals but doesn't automatically shift cultural norms that underlie eating disorders. Highlighting what peers actually do can correct misperceptions, but it may require careful framing and may not universally resonate as strongly as empowering students to openly challenge damaging messages and advocate for healthier standards.

3. Which student goal statement best exemplifies an appropriate and effective personal health-related goal for a semester?

- A. I will lose 15 pounds by decreasing the fat around my waist and hips.
- B. I will not smoke, drink, or do drugs, and I will run between 5 and 10 miles every week.
- C. I will eat a healthier diet including fruits, vegetables, and whole grains.
- D. I will do aerobic exercise twice a week and do strengthening exercises once a week.**

Focusing on a semester-long personal health goal means choosing something you can regularly do, track, and build into a routine. The best choice is a plan that clearly specifies what you will do, how often, and keeps you within realistic bounds. The statement about doing aerobic exercise twice a week and strengthening exercises once a week fits this well. It names exact activities and precise frequencies, so you can easily measure whether you've met the goal each week. It also covers both cardio and strength, promoting overall fitness rather than chasing a single outcome. This kind of goal is achievable within a semester, helps you form a sustainable habit, and is safety-minded since it avoids extreme targets. By contrast, the other options mix vague wording (like "eat a healthier diet") with no clear targets or frequency, or set ambitious outcomes (such as a specific weight loss) that aren't paired with a practical plan. They're harder to monitor or maintain over a semester. So, a plan that specifies concrete activities and how often you'll do them provides a clear path for steady, trackable progress throughout the semester.

4. In a class where students' questions about sex are answered with science-based prevention information, which outcome is most directly improved?

- A. Increase abstinence rates
- B. Have fewer misconceptions about sexual activity and its consequences
- C. Encourage parental involvement
- D. Increase test scores**

Presenting sex questions with science-based prevention information directly improves students' knowledge. When factual, evidence-based answers replace myths, students gain a clearer, more accurate understanding of sexual activity, contraception, pregnancy risks, STIs, and consequences. This direct effect—reducing misconceptions about how sex and protection work—is the primary outcome of this approach. Other potential effects, like changes in abstinence rates, parental involvement, or overall test performance, may occur but are not the immediate, most direct result of teaching with science-based information.

5. The protective factors listed include relationships with mentors and opportunities for engagement, plus clear expectations and safety. These should be categorized as which type of assets?

A. External assets provided by family, school, and community.

B. Internal assets fostered by positive values and commitment to learning.

C. Interpersonal competencies needed for relationship management.

D. Self-management competencies needed to resist and handle stress.

These factors reflect resources and structures provided by the youth's environment—mentors offering guidance, opportunities to participate, and clear rules that keep them safe. They originate outside the individual and come from outside environments like family, school, and community, so they are external assets. Internal assets would be the youth's own values, commitments, and skills developed within the person, not the outside supports.

6. Name two evidence-based stress-management strategies commonly taught in adolescent health education.

A. Deep breathing and progressive muscle relaxation

B. Multivitamins and caffeine avoidance

C. High-intensity interval training and fasting

D. Social media detox and painting

Two evidence-based stress-management strategies commonly taught in adolescent health education are deep breathing and progressive muscle relaxation. Deep breathing helps calm the body's stress response by activating the relaxation (parasympathetic) system, which slows the heart rate, lowers blood pressure, and reduces feelings of anxiety. It's easy for teens to learn and can be used anywhere, making it a practical tool during exams, social stress, or everyday worry. Progressive muscle relaxation trains students to notice and release muscle tension by systematically tensing and then relaxing different muscle groups, which lowers overall arousal, improves mood, and can aid sleep. These approaches are favored in schools because they have solid support in research, are accessible without special equipment, and teach students practical skills they can apply on their own. The other options don't fit as well because vitamins and caffeine avoidance aren't recognized as direct, evidence-based stress-management techniques; high-intensity exercise and fasting focus more on fitness and nutrition, not specifically on coping with stress in a school setting; and while activities like a social media detox or painting can help reduce stress, they aren't as consistently supported as standalone, teachable stress-management methods like breathing and PMR.

7. Which description best distinguishes clinical depression from typical adolescent moodiness?

- A. Mood improves from day to day.**
- B. Symptoms are brief and isolated.**
- C. Symptoms persist consistently for several weeks.**
- D. Depression is caused solely by stress from school.**

Durations and pervasiveness distinguish clinical depression from typical adolescent moodiness. When mood changes are part of normal moodiness, they tend to fluctuate and often improve within a short period, not lingering and affecting daily life across settings. Clinical depression, by contrast, features symptoms that persist consistently for several weeks and interfere with functioning at school, with friends, and at home. That sustained, pervasive pattern is what signals a potential depressive disorder rather than everyday mood swings. The other descriptions don't fit depression: mood that improves day to day is more typical moodiness; brief, isolated symptoms don't show the sustained impact; and depression is not caused solely by school stress but arises from a combination of factors that affect mood over time.

8. Which assessment type is designed to monitor understanding during instruction?

- A. Summative**
- B. Formative**
- C. Holistic**
- D. Portfolio**

Formative assessment is designed to monitor understanding during instruction, providing ongoing feedback that helps both you and your teacher see what's understood and what isn't while learning is still in progress. This lets instruction be adjusted in real time, with quick checks, questions, or prompts guiding the next steps. Summative assessment is used after instruction to judge mastery, holistic assessment looks at overall quality rather than ongoing monitoring, and a portfolio collects work over time for reflection and demonstration of growth rather than immediate instructional monitoring.

9. Distinguish incidence from prevalence in health data.

- A. Incidence is new cases in a time period; prevalence is total existing cases at a point in time**
- B. Incidence is total cases; prevalence is new cases**
- C. Incidence counts deaths**
- D. Prevalence counts recoveries**

Incidence and prevalence measure two different aspects of how a disease affects a population. Incidence captures new cases that develop during a defined time period, reflecting the risk of developing the disease over that interval. Prevalence captures all existing cases at a specific moment in time (point prevalence) or over a defined period (period prevalence), reflecting the overall burden of the disease in the population. For example, if 20 new cases occur in a population of 1,000 during one year, the incidence is 20 per 1,000 per year. If, at the end of that year, 60 people in the population are living with the disease (including those who were already sick and those who became sick that year), the prevalence is 60 per 1,000, or 6% at that point in time. This shows why incidence and prevalence measure different things: incidence focuses on new occurrences, while prevalence focuses on all existing cases at a given time.

10. Which role is explicitly described as part of the FAME program?

- A. FAME Auditor**
- B. FAME Coach**
- C. FAME Coordinator**
- D. FAME Student Leader**

In the FAME program, the role that is explicitly described is the coach. This position is designed to guide participants, provide feedback, and help fellows apply health education practices in real settings, offering ongoing mentorship throughout the program. The coaching role stands out because it directly supports participants' growth and ensures consistent progress, which is a common feature in structured professional development programs. The other titles—auditor, coordinator, and student leader—aren't described as formal, explicit roles within FAME in the materials, so they aren't identified as part of the program in the same way.

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.

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

<https://mttc112.examzify.com>

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

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