

PRINCIPLES OF PUBLIC HEALTH EXAM 1 (SAMPLE)

STUDY GUIDE



SAMPLE STUDY GUIDE WITH LIMITED QUESTIONS

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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 classification best describes organizations not funded by government funds?**
 - A. Governmental
 - B. International
 - C. Nongovernmental
 - D. Quasi-Governmental

- 2. Which term describes a worldwide outbreak?**
 - A. Anthroponoses
 - B. Epidemic
 - C. Zoonoses
 - D. Pandemic

- 3. Which disease category has humans as the only known reservoir?**
 - A. Epidemic
 - B. Pandemic
 - C. Anthroponoses
 - D. Zoonoses

- 4. Incidence vs. prevalence – which statement is correct?**
 - A. Incidence rate captures new cases over time, while prevalence rate captures all existing cases at a point or period
 - B. Incidence rate captures all existing cases, while prevalence rate captures only new cases
 - C. Both rates capture only new cases
 - D. Both rates capture only existing cases

- 5. In public health, which describes the distinction between policy development and decision-making data?**
 - A. Policy development relies on synthesized evidence such as systematic reviews and cost-effectiveness analyses; decision-making uses surveillance data, program evaluations, and community input.
 - B. Policy development relies on surveillance data only; decision-making uses randomized trials only.
 - C. Policy development uses anecdotes; decision-making uses opinions.
 - D. Policy development and decision-making use identical data sources.

- 6. Define selection bias and give an example in public health research.**
- A. Selection bias occurs when study participants are not representative due to non-random selection; example: surveying only clinic patients may miss those who do not seek care.
 - B. Bias due to measurement errors in outcome.
 - C. Bias due to randomization.
 - D. Bias due to confounding.
- 7. Which statement best differentiates health promotion from disease prevention?**
- A. Health promotion aims to improve well-being; disease prevention aims to reduce disease incidence.
 - B. Health promotion aims to reduce disease incidence; disease prevention aims to improve well-being.
 - C. They are the same.
 - D. Health promotion requires vaccination.
- 8. Which term describes organizations that derive some funding from the government but operate independently of direct government supervision?**
- A. Governmental
 - B. Quasi-Governmental
 - C. Nongovernmental
 - D. International
- 9. Which term denotes the ability of a biological agent to enter and grow in the host?**
- A. Infectivity
 - B. Transmission
 - C. Pathogenicity
 - D. Immunity
- 10. What is the minimum recommended amount of physical activity for adults per week according to general guidelines?**
- A. Only light stretching daily.
 - B. At least 60 minutes daily of aerobic activity with no strength training.
 - C. At least 150 minutes of moderate-intensity aerobic activity per week (or 75 minutes vigorous), plus ≥ 2 days of strength training.
 - D. Engage in vigorous activity only once a month.

Answers

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

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Explanations

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1. Which classification best describes organizations not funded by government funds?

- A. Governmental
- B. International
- C. Nongovernmental**
- D. Quasi-Governmental

Non-governmental organizations are independent from government funding and control. They rely on private donations, foundations, and other non-government sources for support, which lets them pursue public health goals with autonomy. They may partner with governments or international bodies, but their core financing and decision-making aren't driven by the government budget. Governmental entities are funded and operated by the state. International organizations gather multiple countries' resources and are typically funded by member governments, sometimes with private contributions. Quasi-governmental groups blend government funding or oversight with private funds or management. These different funding sources and controls are what set nongovernmental organizations apart.

2. Which term describes a worldwide outbreak?

- A. Anthroponoses
- B. Epidemic
- C. Zoonoses
- D. Pandemic**

When a disease spreads beyond borders and affects people across multiple countries or continents, the situation is described as a pandemic. This term signals a far-reaching, worldwide reach, not just a local or regional spike in cases. An epidemic, by contrast, refers to a surge in cases in a particular community or region that is above what's normally expected. Zoonoses are diseases transmitted from animals to humans, and anthroponoses are diseases that are transmitted from person to person but can be limited to specific populations or regions. The key distinction is scale and geography: pandemic = global, epidemic = localized or regional.

3. Which disease category has humans as the only known reservoir?

- A. Epidemic
- B. Pandemic
- C. Anthroponoses**
- D. Zoonoses

Anthroponoses are diseases for which humans are the only known reservoir. A reservoir is the population in which a pathogen normally lives and multiplies; when only humans harbor it, the pathogen is maintained solely through human-to-human transmission, with no non-human hosts required. This makes control rely heavily on interrupting person-to-person spread, through vaccination, case finding, and isolation. Classic examples include measles, rubella, diphtheria, and poliomyelitis; smallpox is another historic case that has been eradicated. In contrast, epidemic or pandemic describes the size of an outbreak, not the reservoir. Zoonoses involve animal reservoirs, meaning non-human hosts are part of the pathogen's life cycle.

4. Incidence vs. prevalence – which statement is correct?

- A. Incidence rate captures new cases over time, while prevalence rate captures all existing cases at a point or period
- B. Incidence rate captures all existing cases, while prevalence rate captures only new cases**
- C. Both rates capture only new cases
- D. Both rates capture only existing cases

Understanding the difference between incidence and prevalence starts with what each measure counts. Incidence looks at new cases that appear in a population during a defined time period, giving a sense of the rate at which people are developing the condition. Prevalence, on the other hand, counts all existing cases—both new and pre-existing—at a specific point in time (point prevalence) or over a defined period (period prevalence). So the correct statement is that incidence measures new cases over time, while prevalence measures all existing cases at a point or over a period. The other descriptions mix up what each rate counts—for example, incidence is not about all existing cases, and prevalence is not limited to only new cases.

5. In public health, which describes the distinction between policy development and decision-making data?

- A. Policy development relies on synthesized evidence such as systematic reviews and cost-effectiveness analyses; decision-making uses surveillance data, program evaluations, and community input.**
- B. Policy development relies on surveillance data only; decision-making uses randomized trials only.
- C. Policy development uses anecdotes; decision-making uses opinions.
- D. Policy development and decision-making use identical data sources.

The distinction being tested is that policy development relies on synthesized, rigorous evidence and economic analysis, while decision-making hinges on ongoing monitoring and practical evaluation. For policy development, you want broad, high-quality information that summarizes what works across multiple settings and weighs costs and benefits—think systematic reviews and cost-effectiveness analyses. This helps policymakers choose options with the best potential impact and value for money before adopting a policy at a population level. In contrast, decision-making focuses on data gathered during implementation: surveillance data track health trends and outcomes in the real world, program evaluations assess how well programs are working in practice, and community input brings local needs and preferences into the process. This combination supports adapting and refining decisions as conditions change. The other options misfit because they either rely on only a single data source, depend on anecdotes or opinions, or claim that both processes use the same data.

6. Define selection bias and give an example in public health research.

A. Selection bias occurs when study participants are not representative due to non-random selection; example: surveying only clinic patients may miss those who do not seek care.

B. Bias due to measurement errors in outcome.

C. Bias due to randomization.

D. Bias due to confounding.

Selection bias is a systematic distortion that happens when the way participants are chosen or retained in a study makes the group studied unrepresentative of the target population, leading to biased estimates of associations or effects. For example, surveying only people who visit clinics to study a disease will miss those who do not seek care, so the results may not reflect what's happening in the broader population. This idea is what best captures selection bias: non-random selection creates a sample that differs in important ways from those not selected. In contrast, measurement bias arises from errors in how outcomes or exposures are measured, bias from randomization isn't a standard bias (randomization aims to prevent bias), and confounding involves a third variable related to both exposure and outcome rather than issues with how participants were selected.

7. Which statement best differentiates health promotion from disease prevention?

A. Health promotion aims to improve well-being; disease prevention aims to reduce disease incidence.

B. Health promotion aims to reduce disease incidence; disease prevention aims to improve well-being.

C. They are the same.

D. Health promotion requires vaccination.

Health promotion is about boosting overall well-being and addressing the social and environmental factors that influence health, not just stopping disease. Disease prevention, on the other hand, focuses specifically on stopping diseases from occurring or spreading, which is captured by reducing the number of new cases (incidence). So, describing health promotion as aiming to improve well-being and disease prevention as aiming to reduce disease incidence best differentiates the two. For example, programs that encourage physical activity and healthy eating enhance quality of life (health promotion), while vaccination campaigns prevent a specific disease and lower its incidence (disease prevention). Vaccination is a tool used in disease prevention, not a requirement for health promotion.

8. Which term describes organizations that derive some funding from the government but operate independently of direct government supervision?

- A. Governmental
- B. Quasi-Governmental**
- C. Nongovernmental
- D. International

Quasi-Governmental organizations are hybrids that blend public support with private management. They receive some funding from the government to carry out public-service missions, but they operate with their own boards and day-to-day management, so they aren't directly supervised by the government. This setup allows them to pursue public goals with more flexibility than a fully government-run agency, while still relying on public funds. Fully governmental entities are directly part of the government, with government employees and direct control. Nongovernmental organizations are private and typically rely on private funding with little to no government oversight. International bodies operate across borders and aren't controlled by a single government.

9. Which term denotes the ability of a biological agent to enter and grow in the host?

- A. Infectivity**
- B. Transmission
- C. Pathogenicity
- D. Immunity

Infectivity is the capacity of a biological agent to enter a susceptible host and multiply, establishing an infection. It focuses on how readily the agent can begin its life cycle inside the host. This differs from transmission (how the agent spreads between hosts), pathogenicity (the ability to cause disease once infection is established), and immunity (the host's defenses against infection). An agent can be highly infectious (easy to enter and grow) yet vary in how severely it diseases the host, illustrating that infectivity and virulence are related but distinct concepts.

10. What is the minimum recommended amount of physical activity for adults per week according to general guidelines?

- A. Only light stretching daily.
- B. At least 60 minutes daily of aerobic activity with no strength training.
- C. At least 150 minutes of moderate-intensity aerobic activity per week (or 75 minutes vigorous), plus ≥ 2 days of strength training.**
- D. Engage in vigorous activity only once a month.

The key idea is that adult physical activity health guidelines call for both cardio and strength work each week. The minimum target combines a weekly amount of aerobic exercise with dedicated muscle-strengthening activity. Specifically, you should aim for at least 150 minutes of moderate-intensity aerobic activity per week (or 75 minutes of vigorous-intensity activity), and include strength training on at least two days. This balance supports heart health, energy metabolism, and muscle and bone strength. Moderate-intensity activity includes things like brisk walking or steady cycling where you can talk but not sing easily; vigorous activity includes more intense efforts like running or hard cycling where talking is difficult. The total can be accumulated in smaller sessions throughout the week. Why the other options don't fit: stretching alone doesn't provide enough aerobic or strengthening benefit; doing 60 minutes of aerobic activity every day without any strength training misses the required strengthening component; and exercising vigorously only once a month is far below weekly guidance.

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://principlesofpublichealth1.examzify.com>

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

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