**Title: Health Seeking Pathways for Stroke Clients in a Rural Setting: Optimising Early Intervention for Stroke Rehabilitation in Occupational Therapy**

**Multiple Choice Questions**

1. The understanding of health seeking behaviour and health seeking pathways is critical for
2. Effective interventions for clients seeking help from multiple service providers
3. Delaying help seeking for early intervention to ensure one decides on using westernized or allopathic medical treatment
4. Stroke is a time dependant condition. This refers to
5. one receiving specialist care as soon as one suffers a stroke
6. the stroke clients condition becoming complicated if not treated immediately
7. preventable complications and subsequent burden of disease, care or death if delays occur at any stages of the early intervention care pathway
8. Prominent factors determining health seeking behaviours that affected the stroke clients and caregivers were
9. the physical home of the stroke clients
10. financial constraints
11. cultural beliefs on disease and disability causation
12. B & C
13. Delayed consultations for early interventions for stroke service users result in
14. preventable complications such as disability and deficits in executive functioning that demands caregiver assistances
15. high risk of complications and disability that could have been prevented
16. the psychological and physical well-being of the family being affected
17. A, B & C
18. The Individual level of the Socio-ecological Model (SEM) by Bronfenbrenner (1990) looks at
19. formal and informal social networks and support systems that can influence an individual’s behaviour such as family, religious networks and socio-cultural influence on stroke client health seeking behaviour
20. the stroke client’s knowledge, attitude and beliefs influence on health seeking behaviours
21. appropriate communications and referral systems between traditional health practitioners, community health workers and the public health care system
22. Overall, the time taken by the stroke participants to seek help between onset of the stroke and first encounter with the health system ranged from
23. 1 hour to 1 month
24. 3 months
25. 5 hours
26. Stroke clients who chose the hospital as their first health care encounter were also not satisfied by the services they received. This is due to
27. the lack of psychoeducation pertaining the stroke, its causes and manifestations
28. the attitude and poor handling of the staff
29. rehabilitative results were not instant and stroke clients failed to be patient
30. A, B & C
31. Considering that 12 out of 16 stroke clients started at a traditional healer after a stroke onset, what programme of healthcare would you provide for the Ceza community?
32. Rehabilitative
33. Promotive and Preventive
34. Palliative
35. Given that 12 stroke clients who reached the hospital were treated and some admitted but none were referred to an Occupational Therapist, what type of health care team approach was used by the hospital?
36. Multidisciplinary
37. Interdisciplinary
38. Transdisciplinary
39. Health culture is an umbrella term which includes health perspectives(knowledge, beliefs and attitudes), customs, superstitions, and skills that a population shares regarding health, disease and care. Based on this article, what is the most common component about stroke?
40. The Knowledge component: what the stroke client knows
41. The Belief component: what people think and believe
42. The Attitude component: what people feel and experience

***Answers***

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