CPD Challenge

Questions

Q1 Which of the following statements about efforts to reduce maternal mortality and promote maternal health and well-being are TRUE or FALSE?

a. The preventable deaths of millions of women are solely due to biomedical complications of pregnancy, childbirth, and the postnatal period.
b. Expanding the health sector to address maternal health determinants and adapting health systems to counter the negative effects of eco-social factors—through increased access to quality assured commodities and services—is essential for improving maternal health and well-being and reducing maternal mortality.
c. Social determinants of maternal health, individual characteristics, and health system features do not significantly contribute to maternal health and well-being.
d. Comprehensive, multipronged actions that combine health system enhancements, address social determinants, and tackle biomedical factors are crucial for improving maternal health and well-being and achieving sustainable reductions in maternal mortality.
e. All of the above statements are TRUE.

Q2 Which of the following interventions targeting maternal health in low- and middle-income countries are TRUE or FALSE?

a. Health system infrastructure must be considered in interventions to ensure effective implementation and sustainability.
b. Healthcare-seeking behaviors are embedded within social and cultural norms, environmental conditions, family influences and provider attitudes.
c. Effective engagement with communities and families is important to create new norms surrounding pregnancy and delivery.
d. Community mobilization and involvement to enable tailored interventions with optimal contextual fit
e. Increasing knowledge and awareness at an individual and healthcare-provider level to produce intended outcomes.

Q3 Please indicate whether the following statements about the prevalence of mental hea lth problems in adolescents in sub-Saharan Africa are TRUE or FALSE.

a. There are currently significant gaps in knowledge regarding the burden of mental disorders among youth in sub-Saharan Africa.
b. Despite wide variations in estimates of common mental disorders and symptoms among youth in sub-Saharan Africa, it is clear that rates are high and require concerted attention at both clinical and policy levels.
c. The prevalence of depression, anxiety disorders, emotional and behavioral difficulties, post-traumatic stress, and suicidal behavior in the adolescent population is generally low and not well documented.
d. Most research on child and adolescent mental health prevention and promotion in low- and middle-income countries is primarily conducted in high-income countries.
e. All of the above statements are TRUE.

Q4 Which of the following statements regarding the use of Long-Acting Extended Delivery (LAED) formulations for HIV prevention in sub-Saharan Africa are TRUE or FALSE?

a. The introduction of oral HIV pre-exposure prophylaxis (PrEP) in 2012 revolutionized HIV prevention; however, its effectiveness depends on user adherence, and its implementation in sub-Saharan Africa has faced numerous challenges.
b. Barriers at the patient level, interpersonal level, and structural level—including daily pill burden, side effects, lack of partner support, testing and disclosure issues, and costs—have been shown to reduce adherence to oral PrEP.
c. Long-acting extended delivery (LAED) formulations for PrEP, such as injectable cabotegravir (CAB-LA) and the dapivirine vaginal ring (DPV-VR), are critical additions to the HIV prevention toolkit, especially for populations at significant risk, such as adolescent girls and young women (AGYW) and other key populations facing substantial barriers to preventive services.
d. The successful rollout of the DPV-VR and CAB-LA may be hindered by factors such as a shortage of healthcare providers, inadequate parenteral medication infrastructure, increased workload for providers, patient concerns, the cost of medications, and the potential for drug resistance.
e. Currently, sub-Saharan Africa has developed advanced laboratory capabilities for monitoring patients on LAED formulations and enhancing research on non-injectable LAED formulations, which should help improve HIV prevention delivery.

Answers

1. a). F, b). T, c). F, d). T, e). F.
2. a). T, b). T, c). T, d). T, e). T.
3. a). T, b). T, c). F, d). T, e). F.
4. a). T, b). T, c). T, d). T, e). F.