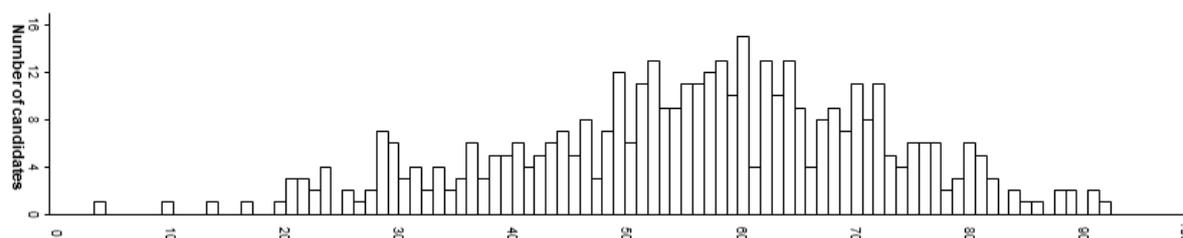




## Summary report for candidates on the 2015 WACE examination in Health Studies Stage 3

Year	Number who sat	Number of absentees
2015	419	10
2014	209	3
2013	278	5

### Examination score distribution – Written



### Summary

The mean of the examination was 56.23% with scores ranging from 4% to 93% indicating that the paper was a good discriminator. The standard deviation was 16.26%. The written examination consisted of three sections with candidates being required to attempt 100% of the 20 multiple-choice questions; 100% of the five short answer questions; and 50% of the four extended answer questions. The section means were as follows:

- Section One: Multiple-choice (Mean 12.01) with scores ranging from 4 to 18/20.
- Section Two: Short answer (Mean 25.77) with scores ranging 0 to 48.5/50.
- Section Three: Extended answer (Mean 18.60) with scores ranging 0 to 30/30.

Correlation of question section marks with total marks was very good (0.70 to 0.92), indicating that there was consistency across question sections within the paper. Candidates were capable of both factual recall, analysis of the impact of health policy and social and cultural factors on health, and interpretation of data to formulate substantiated conclusions. Candidates displayed general capabilities in health literacy through the adoption and application of specific health terminology and an awareness of the communication skills required in health contexts. Candidates were most challenged by items requiring self-directed, written responses that showed capability in the areas of critical and creative thinking, e.g. being able to scrutinise information and devise ideas that they could then turn into suggested actions/ strategies (Section Two and Section Three).

### General comments

The mean of 56.23% was slightly lower than the mean last year (2014) of 58.46%. The paper was aligned to the syllabus; the fit between the two was even tighter than previous years' papers. No candidates were unable to complete the paper, notwithstanding a small number of candidates who did not attempt some questions (which is not unusual). As expected, for items that were more complex or nuanced, then the distractors had greater impact.

Many candidates specifically demonstrated sound knowledge of social determinants in health and self-management skills in the multiple choice; health literacy in the short answer

section; and identification and outlining of the United Nation's Millennium Development Goals in the extended answer section.

#### *Advice for candidates*

Many of the problems identified in your responses could be attributed to an inability to address what the question asks of you. For example, the key to some of the multiple-choice questions was in the stem, seeking the **best** explanation. You are reminded to read questions fully and ensure you take time to understand the meaning of key verbs, such as identify as opposed to identify and outline, describe or explain. You need to ensure you grasp the difference between a question requiring you to recall the syllabus compared to one that requires you to apply a framework, model or theory to a case study to explain health concepts. Similarly, you need to understand when questions are seeking application of self-management and interpersonal skills to a given situation.

Some answers are very well organised, for instance, setting out and labelling of responses to key parts of the question that succinctly directly answer the question, and then proceeding to logically delve into the relevant specifics. Use of bullet points or highlighter pens to label the pertinent words/phrases (which sometimes form headings/sub headings) of the question is helpful. These words/phrases directly align to the syllabus. You are encouraged to address short answer, but particularly the extended answer questions, in such a systematic way as it appears to ensure the question is directly and fully answered.

#### **Comments on specific sections and questions**

##### **Section One: Multiple-choice**

Attempted by 419 Candidates      Mean 12.01/20      (Max: 18      Min: 4)

Items in Section One (Multiple-choice) generally worked very well. Questions 10 and 18 were the easiest with means above 80%. Questions 4, 5 and 9 were the most challenging, with means of less than 30%; being 19.57%, 24.82%, 29.83% respectively. The low mean of 20% for Question 4 suggests candidates did not really understand the terms used within the syllabus pertaining to communication and collaboration skills in health settings; mediation, negotiation, compromise, managing conflict, arbitration, leadership and facilitation. While candidates might be able to list the terms, a question that requires them to differentiate between the terms will need them to understand their meaning and apply the communication and collaboration skills to a relevant scenario. Many candidates opted for an alternative answer including one which confused arbitration and mediation and thus this was a distractor for those candidates who didn't know the difference between the two terms.

##### **Section Two: Short answer** Attempted by 418 Candidates

Mean 25.77%(/50)      Max 48.50%      Min 0.00%

Candidates achieved a lower mean for this section (51.40%) than would normally have been expected for the Short answer section. In summary, this is because many candidate responses did not reflect knowledge or understanding in the syllabus areas being examined. Question 25 was the most challenging question in the whole paper; Question 25(a) achieved a mean of 36.52% and Question 25(b), a mean of 33.68%. The low mean for Question 25(a) is difficult to explain given the answer is a word-for-word capture of the syllabus under its sub-organiser ('actions to address health inequity'). Candidates needed to capture the three points from the syllabus:

- Improving access to health care;
- Improving health literacy; and
- Ottawa Charter action areas.

**Section Three:** Extended answer Attempted by 417 Candidates  
Mean 18.60%(/30)    Max 30.00%    Min 0.00%

Candidates achieved a higher mean for this section (61.95%) than would normally have been expected. This is potentially because three questions achieved means around 65% and large numbers of candidates attempted those questions, e.g. 267 candidates attempted Question 26(a) (mean 67.34%); 261 candidates attempted Question 26(b) (mean 65.71%); and 242 candidates attempted Question 27 (mean 66.89%). Essentially, if candidates had adequately prepared, not surprisingly, they would have been able to answer these questions well because the paper was so closely aligned to the syllabus, and the areas of needs assessment (Question 26(a)), self-management skills (Question 26(b)) and strategies for health promotion advocacy (Question 27) would be expected topics for assessment. Two questions achieved much higher than usual means, being Question 28(b) (71.84%) and Question 29(a) (84.92%). For Question 28(b), the marking key afforded candidates a broad range of potentially correct responses, as is in line with the syllabus, and most candidates could demonstrate sound knowledge in this area of social determinants. Candidates could achieve high marks for Question 29(a) if they were able to outline the United Nation's Millennium Development Goals (MDGs). The MDGs were not examined in the past year (the 2014 WACE examination paper) other than in one multiple-choice, and not at all in the 2013 paper, thus perhaps, intuitively, candidates and teachers paid attention to this area.