



HEALTH STUDIES

ATAR course examination 2019

Marking key

Marking keys are an explicit statement about what the examining panel expect of candidates when they respond to particular examination items. They help ensure a consistent interpretation of the criteria that guide the awarding of marks.

Section One: Multiple-choice

20% (20 Marks)

Question	Answer
1	a
2	b
3	a
4	c
5	b
6	d
7	b
8	d
9	a
10	b
11	a
12	b or d
13	b
14	c
15	c
16	d
17	a
18	c
19	c
20	b

Section Two: Short answer

50% (62 Marks)

Question 21

(11 marks)

- (a) Complete the table by inserting the key term matching each description. (5 marks)

Description	Marks
felt need	1
action plan	1
expressed need	1
evaluating outcomes/evaluation	1
prioritising issues/prioritisation of issues/prioritisation/priority setting	1
Total	5

- (b) Describe **three** benefits and **three** challenges related to undertaking a community needs assessment. (6 marks)

Description	Marks
For each of three benefits and three challenges (1 mark each)	
Describes any three relevant benefits	1–3
Describes any three relevant challenges	1–3
Total	6
<p>Answers could include:</p> <p>Benefits</p> <ul style="list-style-type: none"> • opportunity to engage with key stakeholders, and create relationships/partnerships that may be ongoing, improve community cohesion • strengthens community involvement/participation in identifying needs/making decisions • allows for better use of resources/more efficient use of government of community monies/investment • provides data to inform decisions • consulting communities about issues which matter to them may increase their interest and ownership of the issue • improved outcomes for the community • provides written documentation/case studies to record what has happened in the past (can learn from previous needs assessments) • builds confidence in community members and may build capacity and empowerment to support community to engage in future initiatives to improve health • can determine issues that require attention and inform the design of relevant interventions • allows prioritisation of health issues • provides the opportunity to clearly analyse the health issue in question. <p>Challenges</p> <ul style="list-style-type: none"> • may be difficult to engage all key stakeholders (lack of interest, no capacity to engage etc.) • may be difficult to ensure an unbiased, broad range of views is collected, such as in the case where there are strong views held by certain sub groups within the community • difficult to maintain commitment and impetus from the community, especially where gains are not visible or there are few short term achievements/celebrations • requires expertise and resources (fiscal and human), such as a skilled project team and investment in strategies that are identified as necessary to achieve change – these are resources the community may not have • difficult to see value in the process where change is slow • may be difficult to engage with communities who are mobile, or itinerant • resistance to change by stakeholders/community • may be difficult to ascertain exact needs due to underreporting, e.g. drug use, mental health and associated stigma. <p>Accept other relevant answers.</p>	

Question 22

(7 marks)

(a) Outline the purpose of healthcare system reform in Australia.

(2 marks)

Description	Marks
Detailed outline	2
States a relevant fact	1
Total	2
<p>Answers could include:</p> <ul style="list-style-type: none"> to prevent people from getting sick or sicker and reducing the impacts of poor health for communities to reduce disease spreading quickly and intervene early. Early detection means that treatment can be delivered before disease gets worse to improve social justice and equity as people who are underprivileged, poor or disadvantaged can access services for free or at low cost to provide vital medicines for all Australians with very little gap or cost to the patient, e.g. via the PBS to encourage high income earners to pay for private health insurance, reducing pressure on the public system to encourage people to access preventive services such as screening and immunisations. 	
Accept other relevant answers.	

(b) (i) Describe the intention of free screening programs.

(2 marks)

Description	Marks
Well-developed description of intent of reform	2
General description	1
Total	2
<p>Answers could include:</p> <p>Free screening programs such as for breast and bowel cancers are available/accessible for most Australians. The intention of this reform is to encourage more Australians to take up, or continue with screening, which is an early intervention strategy targeting a reduction in deaths through early detection. The barrier of 'cost' is removed. This may contribute to a reduction of advanced cancer diagnoses, and thus reduce the burden of disease and pressure on public health resources associated with tertiary treatments.</p>	
Accept other relevant answers.	

- (ii) Explain how these programs support the delivery of an equitable healthcare system. (3 marks)

Description	Marks
Well-developed explanation	3
General explanation	2
States a fact related to an equitable healthcare system	1
Total	3
<p>Answers could include:</p> <p>Free screening programs aim to deliver an equitable healthcare system because they remove the barriers to access, and supports access to screening services for individuals regardless of income, geographical location, race, ethnicity, age, gender, e.g. bowel cancer kits can be mailed. This supports all Australians to access high quality preventive public healthcare in a timely and affordable manner and in ways that are culturally appropriate and considerate of personal sensitivities/needs.</p>	
Accept other relevant answers.	

Question 23

(8 marks)

- (a) Identify and describe **two** socioeconomic determinants of health that may be responsible for this improved outlook. (4 marks)

Description	Marks
For each of two determinants (2 marks each)	
Description of socioeconomic determinant	1
Identification of socioeconomic determinant	1
Subtotal	2
Total	4
<p>Answers could include:</p> <p>Socioeconomic determinants of health</p> <ul style="list-style-type: none"> • education • employment • income • family • housing/neighbourhood • access to services (or access health services) • migration/refugee status <p>Sample description for employment</p> <ul style="list-style-type: none"> • nature of employment dictates a person's income, income may support or limit access to vital preventive healthcare services such as breast cancer screening • employment provides social contact and support for individuals, which is important for positive health and wellbeing following a diagnosis of breast cancer <p>Sample description for family</p> <ul style="list-style-type: none"> • breast cancer is well known to be hereditary which may dictate a woman's willingness to attend screening to ensure early detection (and therefore potentially reducing the severity of the cancer and/or greater chance of successful treatments) • family support and encouragement is vital in helping to encourage attendance at screenings, self-checks and to provide support should a diagnosis of breast cancer be made. <p>Accept other relevant answers.</p>	

- (b) Describe **two** examples of the way in which culture can influence someone's decision to access preventive healthcare services such as breast cancer screening. (4 marks)

Description	Marks
For each of two examples (2 marks each)	
Describes an example in which culture influences decisions	2
States an example in which culture influences decisions	1
Subtotal	2
Total	4
<p>Answers could include:</p> <ul style="list-style-type: none"> • lack of understanding/misguided beliefs about the importance of early detection and seeking/using preventive services • cultural traditions and/or beliefs conflict with the procedure which may lead to feelings of discomfort, females may feel uncomfortable accessing services where there is a need to undress to properly access services such as mammography or where there are male practitioners only • do not believe in/mistrust of modern medical technologies and/or western medicine, influence of elders or leaders and therefore do not place high value on such (including screening) • the belief in 'God's Will' and not wanting to interfere with this belief • language barriers may deter decisions to access preventive services • preventive services may not be valued or known about (poor health literacy). <p>Accept other relevant answers.</p>	

Question 24

(15 marks)

- (a) Identify the type of data being displayed in the infographic. (1 mark)

Description	Marks
quantitative	1
Total	1

- (b) Outline
- two**
- key messages being conveyed in the infographic. (2 marks)

Description	Marks
For each of two messages (1 mark each)	
Outlines any two key messages in the infographic	1–2
Total	2
<p>Answers could include:</p> <p>Key messages</p> <ul style="list-style-type: none"> • a high percentage (20% of people) living in rural and remote Australia experience mental illness • there is less medical expenditure in rural areas than in major cities (40% less) • there are fewer mental health services (such as psychologists) in rural and remote Australia than in major cities • mental health hospitalisations per 100,000 population increase the further someone lives from a major city, therefore there is a strong need for mental health services in rural and remote Australia • men in remote areas have twice the suicide rate than men living in major cities • the suicide rate among young Indigenous people is five times higher than non-Indigenous people • there are services available for anyone who is looking for support/someone to talk to, e.g. Lifeline • the government needs to take more action to address mental health problems in rural and remote Australia. <p>Accept other relevant answers.</p>	

- (c) Describe
- three**
- reasons why the data presented in the infographic is insufficient to make a full assessment about the mental health and wellbeing of Australians living in rural and remote regions. (6 marks)

Description	Marks
For each of three reasons (2 marks each)	
Describes a reason why the data is insufficient	2
States a reason why the data is insufficient	1
Subtotal	2
Total	6
<p>Answers could include:</p> <ul style="list-style-type: none"> • the data presented does not explain reasons why inequities occur, it only provides statistics on proportions/percentages of people affected and lack of services in remote areas • it is only one source of information. Examining multiple sources of information would provide the opportunity to identify corroborating or conflicting information and establish a more accurate and evidence-based assessment of the issue • qualitative data is a good way to determine a more rich and detailed picture of the issue, and further explore/analyse quantitative data • data presented is simple, more detail is needed to fully understand complexities • the data presented does not include details of how it has been collected, e.g. sample size of survey • other than hospitalisations, the data narrows in on men and young Indigenous people, and therefore does not give a full picture of others in the community. <p>Accept other relevant answers.</p>	

- (d) Apart from improved access to health care, explain **two** actions used to reduce health inequities faced by people living in rural and remote Australia. (6 marks)

Description	Marks
For each of two actions (3 marks each)	
A well-developed explanation which demonstrates sophisticated understanding of the concept and clearly explains how the action can be used to achieve better mental health outcomes for rural and remote	3
A relevant description which demonstrates good understanding of the concept	2
States a fact about the concept	1
Subtotal	3
Total	6
<p>Answers could include the following actions only:</p> <p>Improving health literacy</p> <ul style="list-style-type: none"> health literacy is the ability to access, read and comprehend health information. Having the ability to interpret health information correctly, and then apply it through self-care and disease management, can promote better health. Rural and remote dwellers should be supported to improve health literacy to take control of their health. Improving health literacy can be achieved by providing accessible/free mental health education to rural and remote residents that increases awareness of risk factors, symptoms, coping strategies and sources of help to better deal with mental health issues they or their family/friends may suffer from. This will allow better self-care and management, which may reduce the severity of the issue healthcare professionals need to be aware of patient health literacy levels and treat patients accordingly so that health information can be understood. A supportive environment will help the patient to feel comfortable in accessing care and encourage/empower them to apply strategies to manage mental health problems. For example, use jargon free communication, not overwhelm patients with information, be sensitive to language barriers and use strategies to overcome these. Further, healthcare professionals should confirm that patients have understood instructions they have been given and should ask them to 'teach-back' to ensure there are no misunderstandings. <p><i>Ottawa Charter</i> action areas (note: any of the action areas can be used)</p> <p>Building healthy public policy</p> <ul style="list-style-type: none"> identify public policy developments that will address mental health issues in rural and remote areas such as; mandatory mental health checks in workplaces, mandatory mental health care plans in workplaces for those diagnosed with mental health issues, mandatory mental health first aid training for all employees at workplaces, provision of mental health days allocated to those working in rural and remote areas, etc. changing policy that targets mental health in rural and remote areas can assist in reducing the burden mental health has on society and will assist in reducing high rates of suicide in rural and remote areas. For example, introducing policy which supports easier access to mental health care services for rural and remote dwellers. 	

Question 24(d) (continued)

Creating supportive environments

- health promotion in rural and remote areas should focus on mental health and promoting safe, stimulating, satisfying and enjoyable living and working conditions for people. This may include providing accurate information about mental health (to raise awareness and educate). For example having visual information such as displays, posters/brochures/television advertisements in public areas (medical centres, shopping centres, schools, community centres etc.) that inform people about mental health risk factors, symptoms, treatment and support services
- ensuring that the environment where people work, live and play encourages healthy behaviour and supports mental health may help to reduce the burden mental health has on the community and reduce rates of suicide. For example the provision of exercise facilities to encourage physical activity, or youth drop in centres to provide opportunities for social contact.

Reorienting health services

- the responsibility of health promotion for mental health in rural and remote areas is shared among individuals, community groups, health professionals, health service institutions and governments. All of these groups/agencies should work together to promote positive mental health and wellbeing
- healthcare professionals are available to provide professional help to those suffering from mental health issues such as doctors, psychologists, counsellors. In rural and remote areas, the GP is often the first point of contact for a patient so ensuring that GPs are supported to work with patients and can refer to appropriate services is necessary.

Developing personal skills

- health promotion supports personal and social development through providing information, education for health, and enhancing life skills. Engaging in developing personal skills will increase the options available to people to exercise more control over their own health and over their environments, and to make choices conducive to health. This could occur through education in schools, the home, workplaces and community settings, which focuses on identifying and managing stressors/improving coping skills etc.

Strengthening community action

- community participation in health promotion is essential in order for it to be truly effective. Mobilising groups within rural and remote areas can help to raise awareness of the issue of mental health. Using a community development approach enables community members to identify and develop initiatives that address mental health. Encouraging an inter-sectoral approach by including many sectors such as education, health, legal and media, can support communities to address health concerns
- empowering community members take ownership and control of their own endeavours and destinies. This may be achieved through organising a community awareness day, fair or fundraiser that educates the community on mental health and may include local guest speakers (drawing on local expertise and resources to enhance self-help and social support).

Accept other relevant answers which describe each of the actions listed.

Question 25

(9 marks)

- (a) Apart from raising awareness and using champions, identify and explain **two** advocacy strategies used to convince policy makers to consider this important campaign message. (6 marks)

Description	Marks
For each of two strategies (2 marks each)	
Coherent, well-structured explanation of a relevant strategy	2
Relevant explanation of a strategy	1
Subtotal	4
Identification of two strategies (1 mark each)	
Identification of advocacy strategy	1
Subtotal	2
Total	6
<p>Answers could include:</p> <p>Lobbying</p> <ul style="list-style-type: none"> lobbying to try and persuade or influence authority figures such as the government to take notice of the issue (alcohol sponsorship in sport). Having the support and backing from the government will help advocate for/enable funding for the campaign and lobby for change. <p>Creating debate</p> <ul style="list-style-type: none"> creating debate allows for all opinions and ideas to be shared through various forums. Schools, workplaces, families etc. are effective avenues to debate/discuss the campaign and influence change. <p>Developing partnerships</p> <ul style="list-style-type: none"> having a collaborative relationship with other like-minded organisations is a positive step for wider awareness and strength. The purpose of such partnerships would be to strive towards the common goal of restricting/banning alcohol advertising in the sporting world. <p>Building capacity</p> <ul style="list-style-type: none"> capacity building involves developing sustainable skills, structures, resources and commitment among individuals, communities and governments to improve health. Such as building individual and community capacity to identify ways to address the issue of alcohol advertising in sport with policy makers. <p>Mobilising groups</p> <ul style="list-style-type: none"> mobilising groups is about preparing and organising groups to support and bring about awareness of an issue, i.e. ending advertising of alcohol in sport. Having large numbers across different groups is a powerful tool especially for grass roots campaigns. <p>Framing issues</p> <ul style="list-style-type: none"> framing the issue of ending alcohol advertising in sport is about structuring or presenting a problem or an issue to the wider community to create support and enact change to achieve a desired response. There needs to be clear explanations of the context of the problem and how it can be addressed (solution-focused) to gain the most support and following from your audience. <p>Influencing policy</p> <ul style="list-style-type: none"> understanding how government policy is made (how decisions are made) is key to being able to influence policy that promotes healthy behaviour. In this case, evidence (data) related to alcohol-related harm could be used to influence policy makers. Successful advocacy to influence policy needs sustained and long term efforts. 	

Question 25 (continued)

- (b) Provide a detailed rationale for the importance of government policy support in restricting alcohol advertising in sport. (3 marks)

Description	Marks
Provides a detailed rationale underpinned by logical and accurate discussion and strong understanding of the importance of government policy to support health behaviour	3
Provides a rationale underpinned by general discussion and understanding of the importance of government policy to support health behaviour	2
Provides a brief or limited rationale	1
Total	3
<p>Answers could include:</p> <ul style="list-style-type: none"> • government policy is an effective way to support healthier choices by removing unhealthy influences of alcohol advertising and attempting to change the association between alcohol use and sport. It makes healthier choices easier for the community and helps to promote a consistent message around alcohol • where governments show leadership and support via policy initiatives, the campaign may gain the interest and respect of the community. The community may place their trust in the messages as it is backed by government policy, and this may cause a re-examination of their beliefs and attitudes towards the association between alcohol and sport. 	
Accept other relevant answers.	

Question 26

(12 marks)

- (a) Outline the purpose of the SDGs. (2 marks)

Description	Marks
Detailed outline	2
States a relevant fact	1
Total	2
SDGs are a universal call to action to <ul style="list-style-type: none"> • end poverty • protect the planet • support all people worldwide to enjoy peace and prosperity • SDGs emphasise a holistic approach to achieving sustainable development for all. 	

- (b) Provide a summary of each goal and explain how it aims to address health inequities. (10 marks)

Description	Marks
For each of two summaries (2 marks each)	
A well-developed summary which demonstrates a good understanding	2
General summary which demonstrates limited understanding	1
Subtotal	4
For each of two explanations (3 marks each)	
A well-developed, detailed explanation which demonstrates sophisticated understanding, with link to addressing health inequity	3
A general explanation which demonstrates some understanding	2
A limited explanation which demonstrates basic understanding	1
Subtotal	6
Total	10
Answers could include: Note: Full title of goal is not required. Goal 2 – end hunger, achieve food security and improved nutrition and promote sustainable agriculture Summary Although there have been recent improvements in reducing hunger and malnutrition, there are still enormous barriers for development in many nations. This goal aims to end all forms of hunger and malnutrition by 2030 and make sure all people (especially children) have access to enough nutritious food all year round. How it addresses health inequities This goal addresses health inequities by promoting sustainable agricultural practices and ensuring global support for improving agricultural productivity. Access to sufficient nutritious food is essential to ensure healthy populations who can work and contribute to the economy and fight illness and infection. Goal 3 – ensure healthy lives and promote well-being for all at all ages Summary Although there have been improvements in reducing child mortality and improving maternal health and controlling communicable disease (such as HIV), there are still many children and adults dying prematurely from preventable conditions. This includes mothers dying in child birth from complications.	

Question 26(b) continued)

How it addresses health inequities

This goal addresses health inequities by promoting universal health coverage and better provision of, and access to, health services for all. There is a focus on supporting research and development for safe and affordable medicines including vaccinations.

Goal 4 – ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

Summary

This goal highlights the importance of quality education in improving health. There has been some progress in meeting this goal, however there are still many children worldwide who do not go to school or drop out. This may be due to high levels of poverty, armed conflict/locality (there are disparities between urban and rural areas), and emergency situations.

How it addresses health inequities

This goal addresses health inequities by focusing on inclusive and quality education as this is one of the most powerful and proven policies for sustainable development. This goal is for both boys and girls and includes the provision of free primary and secondary schooling, vocational training and to eliminate gender and wealth disparities. Education is the key to attaining work and sufficient personal income to afford nutritious food and essential healthcare, as well as a stronger economy that contributes to economic growth.

Goal 5 – achieve gender equality and empower all women and girls

Summary

This goal is about ending all forms of gender inequality including all forms of discrimination against women and empowering girls and women. In some countries there are major inequalities in the labour market and women are denied jobs. There is sexual exploitation and violence against women and unequal division of unpaid work.

How it addresses health inequities

This goal addresses health inequities by reducing barriers to achieving health. Women make up around half of the world's population and are entitled to achieve the same opportunities in life as male counterparts. Achieving gender equality supports women to become better educated and participate in the workforce, which provides them with the better access to conditions for good health.

Goal 6 – ensure availability and sustainable management of water and sanitation for all

Summary

This goal is about the provision of and access to clean water and adequate sanitation. This requires an investment in proper infrastructure and encouraging good hygiene practices. It also focuses on protecting and restoring water-related ecosystems such as forest, mountains, wetlands and rivers to guard against water scarcities.

How it addresses health inequities

This goal addresses health inequities by ensuring a plentiful supply of clean drinking water, and proper sanitation which negates the spread of infectious disease (which may be preventable). Clean drinking water is a basic need and essential for good health.

Accept other relevant answers.

Section Three: Extended answer

30% (30 Marks)

Question 27

(15 marks)

Explain how this model could be used to determine prevention strategies to improve the health of refugee groups in Australia. In your response, include **one** example of a relevant prevention strategy for **each** of the five levels of the model.

Description	Marks
For each of five levels (3 marks each)	
Explanation of how the level of a model could be used to determine strategies relevant to the situation using a relevant example	3
Description of how the level of a model could be used to determine strategies relevant to the situation using a relevant example	2
Statement of how a level of a model could be used to determine strategies relevant to the situation	1
Subtotal	3
Total	15
<p>Answers could include:</p> <p>Individual At this level, an individual's characteristics, traits and identity influence health behaviour. These characteristics can include factors such as knowledge, skills (such as self-efficacy) attitudes, age, gender, level of education, financial resources and socio-economic status. Prevention strategies should take into account these factors. Example Refugees settling in Australia may require free or subsidised health care to remove barriers to accessing health care such as poor/limited knowledge of health care services. Other barriers may include cost, where economic circumstances may prevent access.</p> <p>Interpersonal At this level, the impact of formal and less formal support systems (support networks) can influence health decisions/behaviours. Support systems can include family, friends, co-workers and religious and/or cultural connections. Prevention strategies can utilise these networks to broaden the reach of health messages. Example Refugee support groups can be used to promote healthy messages and provide knowledge and skills to support healthy decision making.</p> <p>Organisational At this level, organisations in which an individual participates can support health decisions/behaviours such as by enabling healthy behaviour or applying restrictions/regulations to make healthier choices easier. This can include schools and workplaces. Example Workplaces could provide services to support health and reduce the impact of trauma, such as counselling services.</p> <p>Community At this level, social networks and the broader aspects of the community including the built environment can have an impact on health decisions/behaviours. Prevention strategies should have an impact on building and promoting positive social networks and facilities and services that support health. Example Establishing community connections/social groups for refugees where health priorities can be identified and addressed with appropriate support from community healthcare providers.</p>	

Question 27 (continued)

Society/Societal

At this level, local, state and national policies and regulations impact health decisions/ behaviours. Health and social policies will have either a direct or indirect impact on health. Prevention strategies should aim to influence societal policy to support a smooth integration into the community and remove barriers that may result in health problems being magnified.

Example

Policies that provide free or ongoing health checks for refugees would enable individuals to remain in contact with the healthcare system, and over time, this could improve levels of health literacy.

Question 28

(15 marks)

- (a) Explain why a focus on managing chronic conditions such as kidney disease is an important feature of Australia's healthcare system. (3 marks)

Description	Marks
A well-developed, detailed explanation which demonstrates a good understanding	3
A general explanation which demonstrates some understanding	2
A limited explanation or some facts stated to demonstrate basic understanding	1
Total	3
Answers could include:	
<ul style="list-style-type: none"> the ability to effectively manage chronic conditions eases pressure on an already overburdened healthcare system kidney disease is a chronic condition that Harry will have for life it is important for Harry to remain in good health and properly manage his condition with ongoing care he will need to be able to detect problems/issues associated with kidney disease and know when it is necessary to access help/support and how to do this this will require an adequate level of health literacy so that he can recognise if his condition deteriorates, and be able to act on this and seek support. it will require a good relationship with his healthcare provider and support for family. 	
Accept other relevant answers.	

- (b) (i) Outline each of the principles of equity, access and sustainability from the National Strategic Framework for Chronic Conditions. (3 marks)

Description	Marks
For each of three principles (1 mark each)	
Clear and accurate outline of the principles	1–3
Total	3
Answers could include:	
<p>Equity All Australians should receive high quality health care irrespective of background, personal circumstances or location.</p> <p>Access There needs to be high standards, and appropriate support and services for all Australians experiencing chronic conditions. Services should be accessible (regardless of location), equitable and affordable for all.</p> <p>Sustainability Planning and effective management of resources is critical to the delivery of longer-term improved health outcomes. The key to good health is ensuring sustainable services and the delivery of these over the long-term. It shouldn't be just a short-term fix.</p>	
Accept other relevant answers.	

- (ii) Explain how each of these principles could be applied to support Harry to manage his condition effectively. (9 marks)

Description	Marks
For each of three explanations (3 marks each)	
A well-developed, detailed explanation which demonstrates sophisticated understanding of principle	3
A general explanation which demonstrates some understanding of principle	2
A limited explanation which demonstrates basic understanding of principle	1
Subtotal	3
Total	9
Answers could include:	
<p>Equity Harry should be well looked after by local health professionals which includes regular care and ongoing review of his health in the longer term including support/education. He should be given the same quality of care someone would be given in the metropolitan area (given he is a resident in a remote location). This may include a multidisciplinary approach to treatment and management of his condition across the different healthcare professionals he may be in contact with. This multidisciplinary approach will support Harry and his family to make better health decisions and also encourage wider responsibility for improving health.</p>	
<p>Access The treatment and medication should be free or low cost and easy to access to allow Harry to manage his condition. The PBS provides subsidies for some of the medications. There should be ongoing monitoring given Harry lives in a remote community. If Harry is able to access treatment and other support services at an affordable (or no) cost he will be in a better position to manage his condition effectively and live a healthy life.</p>	
<p>Sustainability The clinic should aim to provide long-term benefits and education to Harry and others with the same condition. The goal of reducing the occurrence of kidney disease in rural communities should be a priority. This can be done by offering education to not only the patient but to family members and the wider community. An investment in teaching preventive actions such as good nutrition and regular exercise is a way of ensuring that scarce resources are more efficiently used.</p>	
Accept other relevant answers.	

Question 29

(15 marks)

(a) Make a detailed comparison of the statistics for both countries.

(5 marks)

Description	Marks
Comprehensive and detailed comparison demonstrating sophisticated analytical skills. Reference is made to all statistics	5
Detailed comparison demonstrating a high level analytical skills. Reference is made to most statistics	4
General comparison demonstrating satisfactory analytical skills. Reference is made to some statistics	3
Limited comparison with minimal reference to statistics	2
No comparison with minimal reference to statistics	1
Total	5
<p>Answers could include:</p> <ul style="list-style-type: none"> • Australia has a much higher gross national income per capita than Indonesia (\$42 540 compared to \$9260) • Life expectancy for both males and females is higher for Australians, than for Indonesians (by 14 years) • there is a much higher probability of dying between 15 and 60 for males and females living in Indonesia compared to Australia (205 males compared to 77 per 1000 population and 146 females compared to 45 per 1000 population) • Australian expenditure on health per capita is much higher than Indonesia (\$4357 compared to \$299 per person) • Australia's total expenditure on health as a percentage of gross domestic product is higher than that of Indonesia (three times as much). <p>Accept other relevant answers.</p>	

- (b) Discuss how the social determinants of transport and the social gradient could affect the overall health of a country as shown through health indicator data. (10 marks)

Description	Marks
For each of two social determinants (5 marks each)	
Comprehensive understanding of the social determinant and its effect on health indicator data/population health	5
High level of understanding	4
General understanding	3
Limited understanding	2
Statement made about the social determinant of health	1
Subtotal	5
Total	10
<p>Answers could include:</p> <p>Transport</p> <ul style="list-style-type: none"> • good transport infrastructure and systems are necessary for good health in many ways. For example, efficient transport systems can connect people with essential services and can reduce the risk of injury and premature death, as well as provide an active means for people to get around. People may be more inclined to walk and cycle, thus achieving the benefits of regular physical activity and protection against heart disease. Providing opportunities for safer walking and cycling can support increased physical activity which supports a reduction in sedentary lifestyles, and sedentary related conditions such as obesity and Type 2 Diabetes. This can have an impact on rates of premature illness (morbidity) and overall life expectancy • transport can assist in promoting the social engagement of citizens. Social isolation is associated with poorer health and may contribute to differences in life expectancy due to premature death. Social connection/inclusion through relationships provides emotional support, which can make an important contribution to good health • road infrastructure is essential for creating safer conditions on roads. Poor road infrastructure may increase the likelihood of premature injury (morbidity) and death (mortality) from vehicle crashes or incidents involving pedestrians • means of transport can affect the severity of accidents from road crashes and therefore impact on rates of premature death. For example, where there are large numbers of motor bikes/scooters used as the main form of transport, riders (and pedestrians) are more at risk of injury (and premature death) than those riding/driving in typical passenger vehicles. <p>Social gradient</p> <ul style="list-style-type: none"> • the social gradient refers to the position on a continuum according to socio-economic circumstances/characteristics. Generally, life expectancy is shorter and diseases are more common in populations who are disadvantaged both socially and economically, and therefore low on the social gradient • disadvantage can take many forms, from being poorly educated, having no or insecure employment, living in a poor or unsafe neighbourhood and/or having poor housing conditions. It is not uncommon for people suffering disadvantage to have multiple factors which contribute to disadvantage, making them susceptible to additional stressors for extended periods of time. Such stress can contribute to preventable and/or chronic conditions and premature morbidity and mortality • the effects of being low on the social gradient accumulate throughout life and over time contribute to poor health outcomes, thus impacting rates of premature morbidity and mortality. <p>Accept other relevant answers.</p>	

Question 30

(15 marks)

- (a) Identify which source is likely to be the most reliable for the inquiry, providing a reason for your decision. (2 marks)

Description	Marks
Identification	
Source 3	1
Reason	
One of the following: <ul style="list-style-type: none"> .gov.au indicates it is an Australian government website which means it has been written by a reputable source specific to Western Australia, as the scenario states; therefore, it will be more reliable for this inquiry. 	1
Total	2

- (b) Outline **four** strategies you would use to assess the reliability of the author(s) of online health information. (4 marks)

Description	Marks
For each of four strategies (1 mark each)	
Clear and accurate outline of strategies	1–4
Total	4
<p>Note: Listing criteria such as <i>what are the qualifications of the author</i> without sufficient discussion would not be acceptable.</p> <p>Answers could include:</p> <ul style="list-style-type: none"> determine if the author is qualified to write on the topic and has any authority on the subject. If the author has written on the subject before, scrutinise where this information has been published cross-check the credentials of the author against other web-based information such as personal homepages or other published work. Don't take it for granted that the information provided by the author is accurate if there are multiple authors, ensure that they are all checked for credentials and cross-checked to determine the accuracy of these credentials (as above) find out if the author is linked to any commercial agencies associated with the work. This can help to determine if there is a conflict of interest or bias, opinion or inaccuracies, such as in the case where the author may gain financially or otherwise look closely at the domain name/URL (deconstruct the web address). Where the author is an educational institution or government body, you can usually rely on the information that is presented – provided it is up-to-date (current). Where the domain name is a .org, .net, or .com, view with caution where the author is not listed, look for other cues as to how the information has been constructed. There could be a reason why the author's name is not included search to see if the author has published similar research in peer review publications. 	
Accept other relevant answers.	

Question 30 (continued)

- (c) Apart from details relating to an author's credentials, such as name, occupation, etc., identify **three** criteria you would apply to determine reliable sources of information related to the health issue. Justify your choice. (9 marks)

Description	Marks
Identification of three criteria (1 mark each)	
Identifies a valid criterion	1
Subtotal	3
Justification of three criteria (2 marks each)	
Thorough justification	2
Some justification	1
Subtotal	6
Total	9
<p>Answers could include:</p> <ul style="list-style-type: none"> determine the purpose of the information. This includes why it was written and who the intended audience is. Information can have many different purposes such as to inform or teach, persuade or explain in more detail. Knowing this will help to understand what has been written, why it has been written and for which audience determine if the information is accurate (fact check). Verification of information may be necessary such as determining where the information came from, whether it is based on fact/evidence as opposed to opinion, cross-checking the information against other sources and whether it has been reviewed (or refereed). Knowing this will help to determine if the information is up-to-date and consistent with other sources, and can therefore be trusted as being accurate look for the publication date. Is the information current (last 5 years) or does it need to be updated? If this information is out of date it may suggest the source is not reliable any more as there may have been more up-to-date research done into the issue. Or does it not matter if it's current for the issue being researched? If your inquiry is focusing on the history of an issue, old sources may be necessary to form your argument determine the reputation of the publication. If the source is from a well-known publication such as a medical journal it can be presumed all sources within it are going to be reliable due to the reputation the publication has built. If the publication is an unreliable source, e.g. Wikipedia, it may not be suitable to form the basis of your argument in your inquiry and it would be necessary to broaden your search to include other reputable sources determine the type of publication. If the publication is a scientific report it will be more reliable than if it is an eye-witness account or fiction. Similarly publications such as journal articles may be more reliable than a website, as it is more difficult to have an article published in a journal than it is to create a website. Domain names can be purchased, therefore, anyone could create a website with limited credentials identify the location of the publication – sources used for an inquiry should be local where possible to ensure the context is relevant. If the inquiry is comparing other countries/states it may be necessary to use additional non-local sources. If using statistics, it is preferred they are Australian and up-to-date 	

- locate the **contact information** for the course. This allows you to ask further questions to verify the information provided. If something is not clearly articulated or in contrary to something you have found on multiple other sources it would be appropriate to ask questions to clarify. If they are not provided, it may suggest they do not want to be contacted and the information provided may not be accurate, use with caution
- identify if there is a **copyright**. If there is, investigate who holds it and when was it obtained? A copyright grants the creator of an original work exclusive rights for its use and distribution. This suggests that the author of the source has not copied another person's work and it is authentic. There is a fee to obtain a copyright and it is beneficial for authors to copyright their work if they do not want others to claim original ideas or research. If the copyright is outdated then it may hold very little value as the claims made may no longer be accurate/valid
- scrutinise the **organisation** of a source. If a website, is it easy to navigate around? Is it complete? Are there credible references? If it is messy and unorganised it may indicate it is not reliable and anyone has created it. Reliable sources will often pay professionals to create their websites in order to ensure it is user friendly. Journal articles and books are edited by publishers and editors and a consistent, professional layout is applied.

Accept other relevant answers.

ACKNOWLEDGEMENTS

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Goals 2–6 information from: United Nations Sustainable Development Group. (n.d.). *Sustainable development goals*. Retrieved September, 2019 from <https://www.un.org/sustainabledevelopment/sustainable-development-goals/>

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*Published by the School Curriculum and Standards Authority of Western Australia
303 Sevenoaks Street
CANNINGTON WA 6107*