



Government of **Western Australia**  
School Curriculum and Standards Authority

# HEALTH STUDIES

GENERAL COURSE

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Year 12 syllabus

## **Acknowledgement of Country**

Kaya. The School Curriculum and Standards Authority (the Authority) acknowledges that our offices are on Whadjuk Noongar boodjar and that we deliver our services on the country of many traditional custodians and language groups throughout Western Australia. The Authority acknowledges the traditional custodians throughout Western Australia and their continuing connection to land, waters and community. We offer our respect to Elders past and present.

## **Important information**

This syllabus is effective from 1 January 2024.

Users of this syllabus are responsible for checking its currency.

Syllabuses are formally reviewed by the School Curriculum and Standards Authority (the Authority) on a cyclical basis, typically every five years.

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## Rationale

The Health Studies General course focuses on the study of health as a dynamic quality of human life. Students undertaking this course develop the knowledge, understanding and skills necessary to promote an understanding of the importance of personal and community action in promoting health.

The influence of social, environmental, economic and biological determinants of health is a key focus of the course. Other course content includes the influence of beliefs, attitudes and values on health behaviour, and the importance of self-management and interpersonal skills in making healthy decisions.

Using an inquiry process, students draw on their knowledge and understandings of health concepts and investigate health issues of interest. Through this process, they develop research skills that can be applied to a range of health issues or concerns.

This course will prepare students for career and employment pathways in a range of health and community service industries. Students will have the opportunity to develop key employability and life skills, including communication, leadership, initiative and enterprise. Inquiry skills will equip students to adapt to current and future studies and work environments.

## Course outcomes

The Health Studies General course is designed to facilitate achievement of the following outcomes.

### Outcome 1 – Knowledge and understandings

Students understand factors and actions that influence health.

In achieving this outcome, students:

- understand the determinants of health
- understand actions and strategies that influence health
- understand and apply frameworks, models and theories to explain health concepts.

### Outcome 2 – Beliefs, attitudes and values

Students understand the influence of beliefs, attitudes, values and norms on health.

In achieving this outcome, students:

- understand the relationship between beliefs, attitudes, values, and health behaviour
- understand the influence of attitudes and values on health behaviour
- understand the range of factors influencing beliefs, attitudes, values and norms.

### Outcome 3 – Self-management and interpersonal skills

Students use self-management and interpersonal skills to promote health.

In achieving this outcome, students:

- apply self-understanding and decision-making skills
- apply communication and cooperation skills.

### Outcome 4 – Health inquiry

Students use inquiry skills and processes to investigate and respond to health issues.

In achieving this outcome, students:

- plan a health inquiry to define and research a health issue
- use a range of information to explore a health issue
- interpret information to develop a response to the health issue
- present findings and link the investigation to the response.

## Organisation

This course is organised into a Year 11 syllabus and a Year 12 syllabus. The cognitive complexity of the syllabus content increases from Year 11 to Year 12.

### Structure of the syllabus

The Year 12 syllabus is divided into two units which are delivered as a pair. The notional time for the pair of units is 110 class contact hours.

#### Unit 3

This unit focuses on building students' knowledge and understandings of health determinants and their interaction and contribution to personal and community health. Students define and consolidate understandings of health promotion and are introduced to key health literacy skills. Students expand on their understanding of the impact of beliefs on health behaviour and continue to develop personal and interpersonal skills which support health. Inquiry skills are consolidated and applied, including the ability to identify trends and patterns in data.

#### Unit 4

This unit focuses on the impact of health determinants on personal and community health. The concept of community development and the importance of participation and empowerment is introduced. Students learn about how chronic conditions are defined in the National Strategic Framework. The use of social marketing in health is explored and students are introduced to emotional intelligence as a mechanism for perceiving, controlling and evaluating emotions. Students continue to refine inquiry skills as they address relevant issues and produce insightful and well-researched reports.

Each unit includes:

- a unit description – a short description of the focus of the unit
- unit content – the content to be taught and learned.

### Organisation of content

For each unit, the content is organised as follows.

| Content organisers                       | Sub-organisers                              |
|--|---|
| Health concepts                          | Holistic health                             |
|  | Principles, frameworks, models and theories |
|  | Actions and strategies                      |
|  | Consumer health                             |
| Attitudinal and environmental influences | Beliefs, attitudes and values               |
|  | Social and cultural norms                   |
| Skills and processes                     | Self-management skills                      |
|  | Interpersonal skills                        |
|  | Health inquiry                              |

## Representation of the general capabilities

The general capabilities encompass the knowledge, skills, behaviours and dispositions that will assist students to live and work successfully in the twenty-first century. Teachers may find opportunities to incorporate the capabilities into the teaching and learning program for the Health Studies General course. The general capabilities are not assessed unless they are identified within the specified unit content.

### Literacy

The course assists in the development of literacy by introducing specific terminology used in health contexts. Students learn and apply language used to describe factors influencing health, health status, and health-related frameworks, models and theories. They develop critical health consumer skills to assist them to access, read, interpret, understand and evaluate health information and navigate the healthcare system. They consolidate and develop communication skills to effectively operate in personal and group situations through participation in a range of practical and collaborative teaching and learning activities.

### Numeracy

Students develop data analysis skills as they apply inquiry processes to investigate health issues. Students interpret and analyse health information, identifying patterns and relationships in data to consider trends, draw conclusions and make recommendations which inform health behaviour and practices.

### Information and communication technology capability

The course enhances information communication and technology (ICT) learning by supporting students to effectively and safely access online health information and services to manage their own health and wellbeing. Students are encouraged to apply practices that comply with legal obligations as they locate, generate and access information, and select and evaluate data for research activities. Health information in online environments is expansive and originates from a diverse range of credible and less credible sources. Students develop and apply targeted search techniques and skills to assess the suitability and relevance of information.

### Critical and creative thinking

Students learn to collect, analyse and organise information as they investigate risk and protective factors. They scrutinise information and put ideas into action through the creation and implementation of health promotion actions and strategies designed to improve personal and community health outcomes. Students apply problem-solving techniques and negotiate solutions in a range of situations and environments. They also reflect on their own and others' actions as they evaluate factors which influence health-related decisions.

### Personal and social capability

The development of self-awareness, self-management, social awareness and social management skills are key features within the course. Students learn to recognise and reflect on their emotional responses as they embark on developing self-management, decision-making and interpersonal skills. Reflection is used as a means of identifying personal strengths and building on these, and determining successful strategies to address barriers and enablers to health. Students develop and refine communication skills, work independently and collaboratively, and use initiative to overcome barriers and achieve success. Students



build resilience and develop productive coping strategies which support them to be adaptable to changing personal and social circumstances. Through the study of health promotion strategies to address health priorities, students investigate how they and others can make positive contributions to the health of communities.

### **Ethical understanding**

Personal and social attitudes and values are important influences on health-related decisions. Students examine the role of attitudes and values and how they affect lifestyle choices as either barriers or enablers. Students consider how values, beliefs and differing interpretations of health information influence ethical understandings and contribute to disparities in health between populations.

### **Intercultural understanding**

Cultural attitudes and perspectives are important influences on health and wellbeing. While reviewing factors affecting health and designing health promotion initiatives, students examine the complexities of culture and its impact on beliefs and practices.

## **Representation of the cross-curriculum priorities**

The cross-curriculum priorities address the contemporary issues which students face in a globalised world. Teachers may find opportunities to incorporate the priorities into the teaching and learning program for the Health Studies General course. The cross-curriculum priorities are not assessed unless they are identified within the specified unit content.

### **Aboriginal and Torres Strait Islander histories and cultures**

Through the study of relevant contexts, opportunities will allow for the development of students' understanding and appreciation of the diversity of Aboriginal and Torres Strait Islander Peoples' histories and cultures. For example, students learn about the importance of family and kinship structures for maintaining and promoting health, safety and wellbeing as they study determinants that influence personal and community health.

### **Asia and Australia's engagement with Asia**

In this course, students engage with diverse cultures, traditions and belief systems and develop self-management and interpersonal skills that reflect cultural understanding, empathy and respect.

### **Sustainability**

In this course, students explore how they connect and interact with environments and people in different social and cultural groups within personal networks and the wider community. They consider how these connections contribute to the creation of supportive environments in which healthy choices are made easier. Students explore factors influencing health, including the role of natural and built environments in supporting health-related decisions and behaviours.

## Unit 3

### Unit description

This unit builds students' knowledge and understandings of health determinants and their interaction and contribution to personal and community health. Students define and consolidate their understandings of health promotion, and are introduced to a personal behaviour change model and a framework for health promotion action. Health literacy skills, which support positive health consumer practices, and a range of factors influencing the use of health products and services, are examined. Students expand on their understanding of the impact of beliefs on health behaviour by exploring the elements of the health belief model. Personal skills and strategies which support the development of self-management and interpersonal skills are also a focus. Students consolidate and continue to develop inquiry skills, including the ability to identify trends and patterns in data and apply this information to support conclusions.

### Unit content

An understanding of the Year 11 content is assumed knowledge for students in Year 12. It is recommended that students studying Unit 3 and Unit 4 have completed Unit 1 and Unit 2.

This unit includes the knowledge, understandings and skills described below.

### Health concepts

#### Holistic health

- determinants of health
  - social
    - stress
    - early life
    - social exclusion
    - work
    - unemployment
    - social support
    - addiction
    - food
    - transport
    - culture
  - environmental
    - features of the natural and built environment
    - geographical location
  - socioeconomic
    - education
    - employment
    - income
    - family, neighbourhood
    - housing
    - access to services

- biomedical
  - birth weight
  - body weight

### **Principles, frameworks, models and theories**

- definition of health promotion
- purpose and elements of the *Ottawa Charter* for health promotion
- steps in the stages of change model
  - pre-contemplation
  - contemplation
  - preparation
  - action
  - maintenance
  - relapse

### **Actions and strategies**

- action areas of the *Ottawa Charter*
  - building healthy public policy
  - developing personal skills
  - creating supportive environments
  - strengthening community action
  - reorienting health services
- definition and importance of extrinsic and intrinsic motivation for behaviour change

### **Consumer health**

- definition of, and skills required for, health literacy
  - accessing, reading and comprehending health information
  - engaging in self-care and disease management
- factors influencing use of health products and services
  - media
  - transport
  - cost
  - consumer confidence

### **Attitudinal and environmental influences**

#### **Beliefs, attitudes and values**

- purpose and elements of the health belief model
  - perceived susceptibility
  - perceived severity
  - perceived barriers
  - perceived benefits
  - cues to action
  - self efficacy

**Social and cultural norms**

- influence of the media on social norms and health behaviour

**Skills and processes****Self-management skills**

- coping skills and strategies
  - stress management
  - accessing support
  - time management

**Interpersonal skills**

- skills required for working effectively with individuals and groups
  - negotiation
  - conflict resolution
- characteristics of introvert and extrovert personality styles

**Health inquiry**

- planning a health inquiry
  - identification and description of a health issue
  - development of focus questions to research a health issue
- use of a range of information to explore a health issue
  - identification and use a range of reliable information sources
  - identification and application of criteria for selecting information sources
- interpretation of information
  - summary of information
  - identification of trends and patterns in data
  - development of general conclusions
- presentation of findings in appropriate format to suit audience

# Unit 4

## Unit description

This unit focuses on the impact of health determinants on personal and community health. The concept of community development and the importance of participation and empowerment is introduced. Students learn about how chronic conditions are defined in the National Strategic Framework. The use of social marketing in health is explored and students are introduced to emotional intelligence as a mechanism for perceiving, controlling and evaluating emotions. Students continue to refine inquiry skills as they address relevant issues and produce insightful and well-researched reports.

## Unit content

This unit builds on the content covered in Unit 3.

This unit includes the knowledge, understandings and skills described below.

### Health concepts

#### Holistic health

- impact on personal and community health status of social, environmental, socioeconomic and biomedical determinants of health

#### Principles, frameworks, models and theories

- definition and purpose of community development
- community development principles
  - sustainability
  - diversity
  - social justice
  - human rights
  - addressing disadvantage
  - valuing local culture, knowledge, skills and resources
- relationship between participation and empowerment in community development
- definition of chronic conditions:
  - have complex and multiple causes
  - may affect individuals either alone or as comorbidities
  - usually have a gradual onset, although they can have sudden onset and acute stages
  - occur across the life cycle, although they become more prevalent with older age
  - can compromise quality of life and create limitations and disability
  - are long-term and persistent, and often lead to a gradual deterioration of health and loss of independence
  - while not usually immediately life threatening, are the most common and leading cause of premature mortality

## **Actions and strategies**

- measures of health status
  - mortality
  - life expectancy
- preventive strategies to maintain, avoid and manage risk for personal and community health
  - screening
  - immunisation
  - health education
- primary, secondary and tertiary prevention

## **Consumer health**

- ethical issues arising from contemporary health practices
  - organ donation
  - in-vitro fertilisation
  - stem-cell therapy
  - genetically modified foods

## **Attitudinal and environmental influences**

### **Beliefs, attitudes and values**

- social marketing
  - definition
  - product, price, place, promotion
  - examples of social marketing campaigns

## **Skills and processes**

### **Self-management skills**

- definition of and competencies for emotional intelligence
  - self awareness
  - self-regulation
  - self-motivation
  - social awareness
  - social skills

### **Interpersonal skills**

- characteristics and appropriate use of autocratic, democratic and laissez-faire leadership styles

### **Health inquiry**

- planning a health inquiry
  - identification and description of a health issue
  - development of focus questions to research a health issue
- use of a range of information to explore a health issue
  - identification and use a range of reliable information sources
  - identification and application of criteria for selecting information sources

- interpretation of information
  - summary of information
  - identification of trends and patterns in data
  - development of general conclusions
- presentation of findings in appropriate format to suit audience

## School-based assessment

The *Western Australian Certificate of Education (WACE) Manual* contains essential information on principles, policies and procedures for school-based assessment that needs to be read in conjunction with this syllabus.

Teachers design school-based assessment tasks to meet the needs of students. The table below provides details of the assessment types for the Health Studies General Year 12 syllabus and the weighting for each assessment type.

**Assessment table – Year 12**

| Type of assessment   | Weighting |
|--|-----------|
| <p><b>Inquiry</b></p> <p>Students plan, conduct and communicate the findings of a health inquiry.</p> <p>Evidence can include: oral and/or written reports, posters or wall charts, websites, PowerPoint presentations, debates, articles for publication, and/or any combination of these.</p>                                      | 20%       |
| <p><b>Project</b></p> <p>Students explore ideas and manage the components of the task.</p> <p>Evidence can include: reports, displays, health fairs/expos, demonstrations, campaigns, merchandise (production or design), pamphlets, brochures, fact sheets, newsletters, web pages, and/or any combination of these.</p>            | 40%       |
| <p><b>Response</b></p> <p>Students apply knowledge and skills to analyse and respond to stimuli or prompts that can include: scenarios, diagrams, graphs, tables, media excerpts/scripts, photos and/or health promotion resources.</p> <p>Evidence can include: tests, in-class essays and/or responses to a specific stimulus.</p> | 25%       |
| <p><b>Externally set task</b></p> <p>A written task or item, or set of items, of 50 minutes duration, developed by the School Curriculum and Standards Authority and administered by the school.</p>   | 15%       |

Teachers are required to use the assessment table to develop an assessment outline for the pair of units.

The assessment outline must:

- include a set of assessment tasks
- include a general description of each task
- indicate the unit content to be assessed
- indicate a weighting for each task and each assessment type
- include the approximate timing of each task (for example, the week the task is conducted, or the issue and submission dates for an extended task).

In the assessment outline for the pair of units, each assessment type must be included at least once over the year/pair of units. The externally set task occurs in Term 2.

The set of assessment tasks must provide a representative sampling of the content for Unit 3 and Unit 4.

Assessment tasks not administered under test/controlled conditions require appropriate validation/authentication processes. For example, student performance for a health inquiry could be validated by a task (such as a structured essay or extended response) which is completed in class after the assessment is submitted.



## Externally set task

All students enrolled in the Health Studies General Year 12 course will complete the externally set task developed by the Authority. Schools are required to administer this task in Term 2 at a time prescribed by the Authority.

### Externally set task design brief – Year 12

|                |   |
|----------------|---|
| <b>Time</b>    | 50 minutes  |
| <b>Format</b>  | Written   |
|                | Conducted under invigilated conditions  |
|                | Typically between two and six questions/items   |
|                | Questions can require students to refer to stimulus material  |
| <b>Content</b> | The Authority informs schools during Term 3 of the previous year of the Unit 3 syllabus content on which the task will be based |

Refer to the *WACE Manual* for further information.

## Grading

Schools report student achievement in terms of the following grades:

| Grade    | Interpretation           |
|----------|--------------------------|
| <b>A</b> | Excellent achievement    |
| <b>B</b> | High achievement         |
| <b>C</b> | Satisfactory achievement |
| <b>D</b> | Limited achievement      |
| <b>E</b> | Very low achievement     |

The teacher prepares a ranked list and assigns the student a grade for the pair of units. The grade is based on the student's overall performance as judged by reference to a set of pre-determined standards. These standards are defined by grade descriptions and annotated work samples. The grade descriptions for the Health Studies General Year 12 syllabus are provided in Appendix 1. They can also be accessed, together with annotated work samples, through the Guide to Grades link on the course page of the Authority website at [www.scsa.wa.edu.au](http://www.scsa.wa.edu.au).

To be assigned a grade, a student must have had the opportunity to complete the education program, including the assessment program (unless the school accepts that there are exceptional and justifiable circumstances).

Refer to the *WACE Manual* for further information about the use of a ranked list in the process of assigning grades.

## Appendix 1 – Grade descriptions Year 12

|   |  |
|---|--|
| A | <p><b>Health concepts</b></p> <p>Provides clear and detailed explanations of the impact of health determinants, principles and frameworks, and a range of appropriate actions and strategies to avoid or reduce risks to health.</p> <p>Provides clear and detailed explanations of multiple influences shaping beliefs, attitudes and values, and describes the complexities of their relationship to health behaviour.</p> <p>Identifies and evaluates factors and issues related to healthcare.</p> |
|   | <p><b>Skills</b></p> <p>Clearly identifies appropriate health decisions and strategies and applies them effectively to unfamiliar situations.</p> <p>Describes the influence of a range of overt cultural factors on personal and group interactions.</p>  |
|   | <p><b>Health inquiry</b></p> <p>Independently produces research questions; consistently uses reliable and relevant sources of information; demonstrates correct recording and simple referencing techniques.</p> <p>Clearly and accurately interprets evidence to develop a valid argument; presents information in well-structured ways using appropriate health language.</p>  |
| B | <p><b>Health concepts</b></p> <p>Provides clear explanations of the impact of health determinants, principles and frameworks, and actions and strategies to avoid or reduce risks to health.</p> <p>Provides clear explanations of overt influences shaping beliefs, attitudes and values, and describes their relationship to health behaviour.</p> <p>Identifies factors and issues related to healthcare.</p>   |
|   | <p><b>Skills</b></p> <p>Identifies appropriate health decisions and strategies and applies them effectively to familiar situations.</p> <p>Describes the influence of overt cultural factors on personal and group interactions.</p>   |
|   | <p><b>Health inquiry</b></p> <p>Independently produces simple research questions; uses reliable and relevant sources of information; demonstrates mostly correct recording and simple referencing techniques.</p> <p>Clearly interprets evidence to develop a mostly valid argument; presents information in structured ways using appropriate health language.</p>  |
| C | <p><b>Health concepts</b></p> <p>Provides generalised explanations of the impact of health determinants, principles and frameworks, and simple actions and strategies to avoid or reduce risks to health.</p> <p>Provides generalised explanations of influences shaping beliefs, attitudes and values, and describes their relationship to health behaviour in simple ways.</p> <p>Identifies general factors and issues related to healthcare.</p>   |
|   | <p><b>Skills</b></p> <p>Identifies some appropriate health decisions and strategies and applies them to familiar situations.</p> <p>Describes the influence of simple cultural factors on personal and group interactions.</p>   |
|   | <p><b>Health inquiry</b></p> <p>With guidance, produces mostly relevant focus questions; uses mostly reliable and relevant sources of information; demonstrates general recording and referencing techniques.</p> <p>Interprets evidence in a general sense; presents information in simple ways using basic but appropriate health language.</p>  |

|   |  |
|---|--|
| D | <b>Health concepts</b><br>Provides basic explanations of health determinants, principles and frameworks, and few actions or strategies to avoid or reduce risks to health.<br>Provides basic explanations of influences shaping beliefs, attitudes and values, and describes their relationship to health behaviour in simple terms.<br>Provides basic explanations of factors and issues related to healthcare. |
|   | <b>Skills</b><br>Identifies, and inconsistently applies, a limited number of appropriate health decisions and strategies.<br>Describes, in a very limited way, the influence of simple cultural factors on relationships.  |
|   | <b>Health inquiry</b><br>With guidance, produces simple focus questions; uses minimal sources of information; demonstrates limited recording and referencing techniques.<br>Makes limited attempts to interpret evidence; typically presents information in simple ways that often lack clarity.   |
| E | Does not meet the requirements of a D grade and/or has completed insufficient assessment tasks to be assigned a higher grade.  |