



Western Australian Certificate of Education Examination, 2010

Question/Answer Booklet

HEALTH STUDIES

Stage 3

Please place your student identification label in this box

Student Number: In figures

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In words _____

Time allowed for this paper

Reading time before commencing work: ten minutes
Working time for paper: three hours

Materials required/recommended for this paper

To be provided by the supervisor

This Question/Answer Booklet
Multiple-choice Answer Sheet

To be provided by the candidate

Standard items: pens, pencils, eraser, correction fluid/tape, ruler, highlighters

Special items: nil

Important note to candidates

No other items may be taken into the examination room. It is **your** responsibility to ensure that you do not have any unauthorised notes or other items of a non-personal nature in the examination room. If you have any unauthorised material with you, hand it to the supervisor **before** reading any further.

Structure of this paper

Section	Number of questions available	Number of questions to be answered	Suggested working time (minutes)	Marks available	Percentage of exam
Section One: Multiple-choice	20	20	30	20	20
Section Two: Short answer	4	4	75	40	40
Section Three: Extended answer	4	2	75	40	40
Total					100

Instructions to candidates

1. The rules for the conduct of Western Australian external examinations are detailed in the *Year 12 Information Handbook 2010*. Sitting this examination implies that you agree to abide by these rules.
2. Answer the questions according to the following instructions.

Section One: Answer all questions on the separate Multiple-choice Answer Sheet provided. For each question shade the box to indicate your answer. Use only a blue or black pen to shade the boxes. If you make a mistake, place a cross through that square, do not erase or use correction fluid, and shade your new answer. Marks will not be deducted for incorrect answers. No marks will be given if more than one answer is completed for any question.

Sections Two and Three: Write your answers in this Question/Answer Booklet.

3. You must be careful to confine your responses to the specific questions asked and to follow any instructions that are specific to a particular question.
4. Spare pages are included at the end of this booklet. They can be used for planning your responses and/or as additional space if required to continue an answer.
 - Planning: If you use the spare pages for planning, indicate this clearly at the top of the page.
 - Continuing an answer: If you need to use the space to continue an answer, indicate in the original answer space where the answer is continued, i.e. give the page number. Fill in the number of the question(s) that you are continuing to answer at the top of the page.

Section One: Multiple-choice**20% (20 Marks)**

This section has **20** questions. Answer **all** questions on the separate Multiple-choice Answer Sheet provided. For each question shade the box to indicate your answer. Use only a blue or black pen to shade the boxes. If you make a mistake, place a cross through that square, do not erase or use correction fluid, and shade your new answer. Marks will not be deducted for incorrect answers. No marks will be given if more than one answer is completed for any question.

Suggested working time: 30 minutes.

1. The conflict between general acceptance of alcohol and zero-tolerance religious beliefs about alcohol is an example of
 - (a) conflict that results from a lack of cultural security.
 - (b) conflict between majority group alcohol norms and specific group norms.
 - (c) conflict between responsible drinking behaviour and risk-taking behaviour.
 - (d) conflict that involves the lack of assimilation by one group.

2. An ecological framework for health
 - (a) is not consistent with a holistic concept of health.
 - (b) places emphasis on risk factors.
 - (c) considers a range of variables that cause disease.
 - (d) advocates greater funding for environmental health.

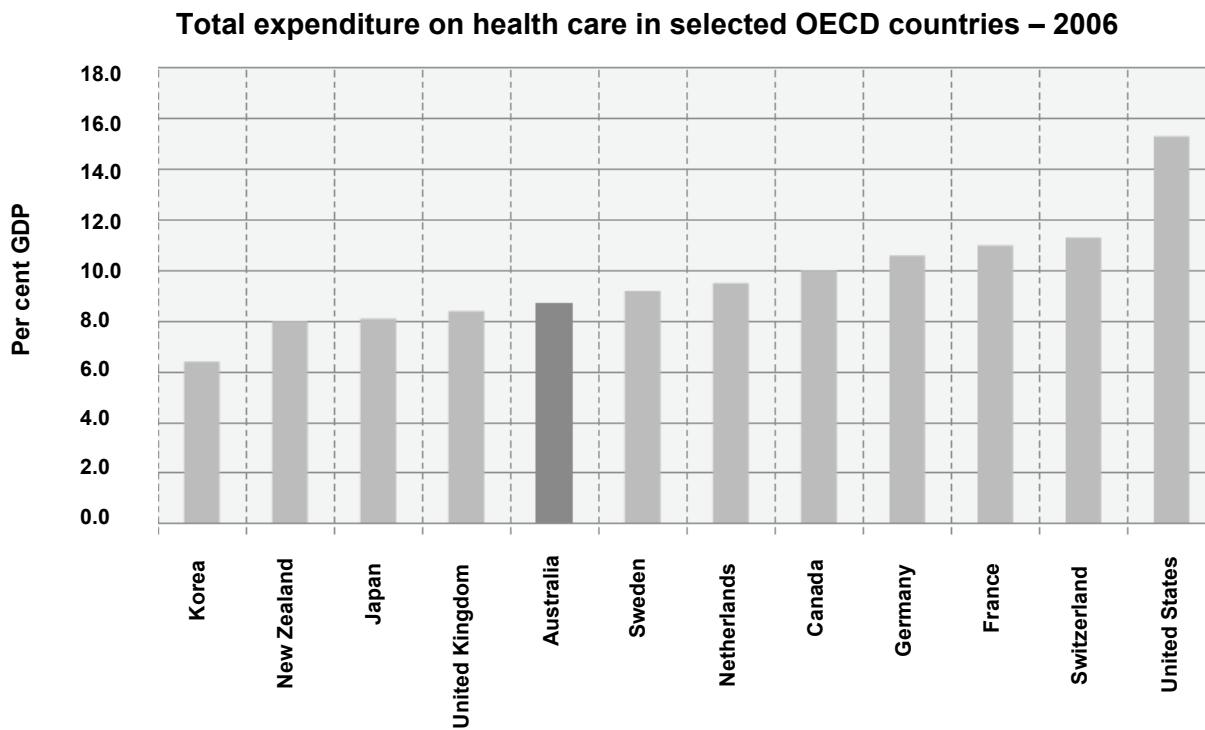
3. Self-management skills that support ongoing positive health behaviours include
 - (a) stress management and resilience.
 - (b) empathy and mediation.
 - (c) decision making and negotiation.
 - (d) assertion and empathy.

4. Indicators of the health of a country include comparisons of
 - (a) life expectancy, degree of disability and gender.
 - (b) prevalence of chronic disease, age and mortality.
 - (c) life expectancy, mortality and prevalence of chronic disease.
 - (d) gender, age and degree of disability.

5. A needs assessment enables us to
 - (a) find out about the community we are working with to help plan a program.
 - (b) measure how successful a program was.
 - (c) collect information about a program as it is being implemented.
 - (d) determine the success of a program six months after it has been completed.

6. Culturally-appropriate actions and strategies to improve the health of specific groups should
- (a) always reflect popular norms of the culture.
 - (b) be relevant to the specific health needs of the group.
 - (c) be pitched at a moderate to high level of health literacy.
 - (d) reflect consistent local media messages.
7. Identification of options and perspectives is **most** appropriate for
- (a) stress management and conflict resolution.
 - (b) simple decision making and communication.
 - (c) a detailed cost-benefit analysis.
 - (d) decision making in complex situations.
8. The term used to describe majority behaviours that are recommended for good health is
- (a) specific group norms.
 - (b) prescriptive norms.
 - (c) proscriptive norms.
 - (d) popular norms.
9. A good hypothesis should **not** be
- (a) written as a definite statement.
 - (b) written as a question.
 - (c) based on observations and knowledge.
 - (d) able to be tested.
10. A competent level of health literacy may be **best** demonstrated by the ability to
- (a) facilitate community meetings and advocate for better health.
 - (b) find health information and evaluate it for personal relevance and validity.
 - (c) visit a healthcare professional and follow the treatment regime.
 - (d) successfully navigate the hospital system.
11. Data used to measure health inequities relating to a national health priority area include
- (a) school attendance patterns over time.
 - (b) statistics on concession card holders.
 - (c) rates of morbidity and mortality.
 - (d) government expenditure on related programs.
12. Assertiveness can be described as
- (a) expressing one's point of view while respecting those of others.
 - (b) expressing one's point of view regardless of other influences.
 - (c) enabling a group of people to reach their own decision.
 - (d) a collaborative process among people that results in an agreement.

Questions 13 and 14 refer to the following graph.



13. Based on the information in the figure above, which statement is **incorrect**?
- Australia's infant mortality outcomes are excellent and are the result of expenditure.
 - New Zealand and Japan spent 8.0 per cent of GDP on health.
 - In 2006-07, Australia spent approximately 8.7 per cent of GDP on health.
 - Korea spent a smaller percentage of GDP on health than other countries.
14. Which statement makes the **most** accurate comparison of the differences in GDP expenditure on health?
- Japan's and New Zealand's health systems provide similar levels of care.
 - Australia spends less on aged care than the United States.
 - Canada's health system is more advanced than Australia's.
 - Japan's and New Zealand's expenditure on health care is the same.
15. Improving access to dental health care is Australia's fourth key priority for improving access and equity. Nearly one-third of all Australian adults avoid or delay visiting dentists due to costs; there are more than 650,000 people on public dental waiting lists; and the dental health of our children is worsening. Based on this information, which statement is correct?
- Most Australians' dietary patterns have changed in the last two decades and this is the main reason for the decline in dental health.
 - The cost of regular dental check-ups has had an impact on some Australian adults maintaining good dental health care.
 - Medicare coverage is insufficient for most people in Australia to be able to afford regular dental care.
 - The declining dental health of children is a result of the termination of water fluoridisation in some States and Territories.

16. Which of the following needs are found at the base of Maslow's Hierarchy?
- (a) air, food, water and relationships
 - (b) air, food, water, shelter and warmth
 - (c) water, food, protection and security
 - (d) achievement, fulfilment and self respect
17. Following the usage instructions on a bottle of cough medicine is an example of
- (a) communication skills.
 - (b) advocacy.
 - (c) health literacy.
 - (d) decision making.
18. Government policies and regulations often restrict or promote health behaviours by changing the environment in which people live. Which of the following is an example of the environment being changed?
- (a) changing the drinking age
 - (b) laws for wearing seat belts
 - (c) laws for wearing bike helmets
 - (d) daylight saving
19. Communication skills used in advocacy to address disadvantage and inequity include
- (a) active listening, empathy, enabling and arbitrating.
 - (b) lobbying, protests, demonstrations and petitions.
 - (c) values clarification and inquiry.
 - (d) cost-benefit analysis and supported decision making.
20. Restrictions on cigarette advertising are an example of
- (a) actions to make healthier choices easier.
 - (b) policy measures to support behaviour change.
 - (c) strategies designed to protect vulnerable people.
 - (d) system reform that is an Australian Government responsibility.

End of Section One

See next page

Section Two: Short answer**40% (40 Marks)**

This section has **four (4)** questions. Answer **all** questions. Write your answers in the spaces provided.

Spare pages are included at the end of this booklet. They can be used for planning your responses and/or as additional space if required to continue an answer.

- Planning: If you use the spare pages for planning, indicate this clearly at the top of the page.
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Suggested working time: 75 minutes.

Question 21**(10 marks)**

Bullying is a significant predictor of future physical, psychological and academic problems. An ecological framework for health helps us to understand bullying behaviour and helps us to plan bullying interventions.

- (a) (i) Explain the premise underlying an ecological framework. (2 marks)

- (ii) Describe **three (3)** factors that may influence bullying among secondary school students, one from each of the following:

- individual,
- social and
- school community perspective.

(3 marks)

- (b) List **five (5)** strategies for using an ecological framework for health to reduce the prevalence of bullying in a school community. (5 marks)

Question 22**(10 marks)**

Access to and availability of adequate and nutritious food is an important social determinant of health.

- (a) Explain how issues of inequity influence access to healthy and nutritious food in Australia. (4 marks)

- (b) Describe **three (3)** strategies to address issues of food inequity in Australia. (6 marks)

Question 23**(10 marks)**

- (a) Define what is meant by the term 'health equity'.

(2 marks)

- (b) Identify a population group in Australia that experiences health inequity.

(1 mark)

Population group

- (c) Explain
- three (3)**
- factors that create the inequity for the group identified in part (b).

(3 marks)

- (d) Explain
- two (2)**
- action areas of the WHO Ottawa Charter for Health Promotion and outline
- two (2)**
- strategies relevant to address these action areas to improve the health status of the group you have identified in part (b). (4 marks)

Question 24**(10 marks)**

- (a) Outline the purpose of the Australian Agency for International Development (AUSAID).
.

- (b) Explain **four (4)** ways in which the Australian Government's aid funding to developing countries is utilised.
.

- (c) You are working in the western Pacific region and you are successful in obtaining financial assistance from AUSAID to increase health promotion. In the context of the five action areas of the WHO Ottawa Charter, explain **two (2)** ways in which you could improve the health status of young men in the region.
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End of Section Two**See next page**

Section Three: Extended answer**40% (40 Marks)**

This section contains **four (4)** questions. You must answer **two (2)** questions. Write your answers in the space provided.

Spare pages are included at the end of this booklet. They can be used for planning your responses and/or as additional space if required to continue an answer.

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Suggested working time: 75 minutes.

Question 25**(20 marks)**

Select **one (1)** preventable health issue.

Preventable health issue: _____

- (a) Discuss **two (2)** likely consequences of this health issue not being addressed. (2 marks)

- (b) List **four (4)** reasons why health reform is necessary in relation to this issue and provide a justification for each reason. (8 marks)

- (c) What kinds of arguments are likely to be raised by members of the public, politicians, health and other professionals against spending part of the limited health budget on your chosen health issue? How would you respond to such arguments? (10 marks)

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Question 26

(20 marks)

- (a) Using examples, describe how social and cultural norms and behaviours might determine the formation of personal beliefs and attitudes about HIV/AIDS. In your response, differentiate between beliefs, attitudes and behaviours. (10 marks)

- (b) Using examples, discuss **five (5)** essential skills necessary to support positive health behaviours in relation to the prevention of HIV/AIDS. (10 marks)

Question 27**(20 marks)**

Over the past two decades, public health advocacy in favour of tobacco control has led to the introduction of many regulatory policies restricting peoples' access to cigarettes and their use.

- (a) Describe how advocacy could be used to encourage action in relation to a public health issue you have studied in this course. Your answer should refer to at least **five (5)** strategies that could be used. (10 marks)

More than 85 per cent of the population of Madagascar lives on less than US\$2.00 per day, with half of the population falling below the poverty line. Alarmingly, 88 per cent of the rural population lack access to safe drinking water.

- (b) Challenges facing developing nations include the availability of clean drinking water. Discuss how you would advocate for the provision of clean water for primary-school children in Madagascar. (10 marks)

Question 28**(20 marks)**

- (a) Describe the importance of using effective communication and collaboration skills in health settings. In your response, refer to **five (5)** essential skills. (10 marks)

- (b) Using examples, discuss **five (5)** essential skills for decision making in complex health situations: for example, the treatment of chronic diseases such as arthritis. (10 marks)

End of questions

Additional working space

Additional working space

Additional working space

ACKNOWLEDGEMENTS

Section One: Multiple-choice

Questions 13, 14 and 15 Graph adapted from: Department of Health and Ageing. (2009). A Healthier Future For All Australians – Final Report of the National Health and Hospitals Reform Commission – June 2009. (c) Commonwealth of Australia. 2009. Retrieved May, 2010, from <http://www.health.gov.au/internet/nhhrc/publishing.nsf/Content/nhhrc-report>

Section Three: Extended answer

Question 27(b) Government of Madagascar, 2007. *Madagascar Action Plan 2007–2012*. Retrieved July 28, 2009 from www.imf.org/external/publisher/2007//cr0759.pdf

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