Summary report of the 2017 ATAR course examination:
Health Studies

Year	Number who sat	Number of absentees
2017	644	12
2016	580	10

Examination score distribution – Written
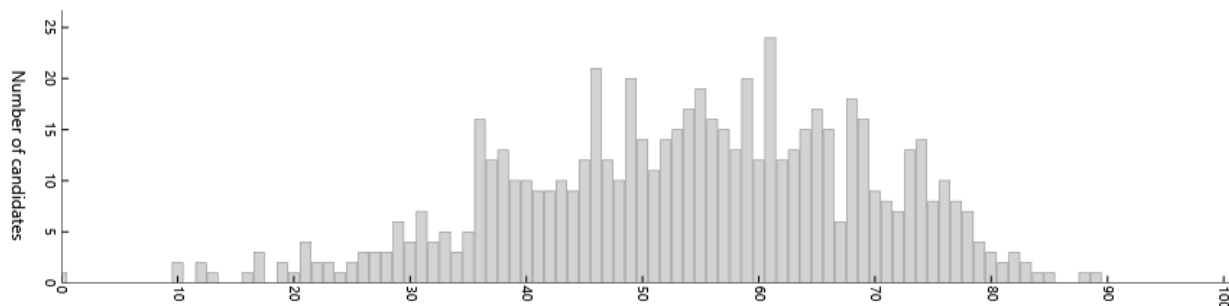
Summary
The examination was attempted by 643 candidates. The whole of paper mean was 53.90%, which is lower than the mean of the paper in 2016 (60.55%). The examination acted as a good discriminator, producing scores ranging from 10% to 88.5%.

The examination consisted of three sections. Candidates were required to answer all of Sections One and Two, and choose two from four questions in Section Three. All candidates attempted all questions in Sections One and Two; while all but two candidates attempted questions in Section Three (the extended answer section).

Section means were:
Section One: Multiple-choice   Mean 11.54(/20)   Max 18.00   Min 5.00
The overall mean for the Multiple-choice section was 57.70%.

Section Two: Short answer   Mean 27.14(/50)   Max 46.00   Min 2.00
The overall mean for the Short answer section was 54.29%.

Section Three: Extended answer   Mean 15.27(/30)   Max 29.50   Min 0.00
The overall mean for the Extended answer section was 50.88%.

General comments
Overall the Multiple-choice was challenging and attracted a lower mean than in 2016. The short and extended answer sections also attracted low means; however, these were similar to means for these sections in 2016.

Advice for candidates
- In addition to reading all questions in full, candidates are advised to analyse each question. This includes identifying the taxonomy or verbs that are used in each question as well as the content that is being examined. Further, candidates are encouraged to connect areas of syllabus content. This should be done prior to attempting to answer each question.
- Using examples is a useful strategy to illustrate understandings.

- Consider the use of dot points or start a new line to answer each part of the question (in the case of being asked to provide 'a number' of things, e.g. *provide three reasons*).
- Predict how marks are to be allocated and structure responses accordingly.
- Respond clearly and concisely. Make the full use of the examination time and plan answers in the spare pages – for both Sections Two and Three.
- Be aware that unnecessary information in a response does not attract marks, nor do wordy introductions or conclusions.
- Always use the syllabus as a primary revision tool. Anticipate questions that could be included in the examination as part of revision programs and practise these under timed examination conditions.

Advice for teachers
- Ensure all areas of the syllabus content are included in teaching and learning programs.
- Address all content areas with sufficient interrogation, to ensure that candidates are able to provide depth of understanding.
- Pre-empt possible examination questions in revision tasks. This could include developing/modifying questions based on previous papers.
- Do not rely solely on text books, nor assume they correctly interpret syllabus content.
- Incorporate current public health issues in teaching and learning programs to support student learning. Use these current health issues to demonstrate how content areas can be connected.
- Continue to promote candidates' understanding of the language of the course. Consider using glossaries and other strategies to consolidate candidates' understandings of the terminology that is unique to Health Studies.
- This examination required candidates to link content areas and this should be incorporated in teaching and learning programs. Teachers should seek opportunities to relate syllabus content areas where appropriate, thus broadening candidate's understandings of the relationships between key content areas.
- Use previous examinations and marking keys as part of revision programs. Analyse marking keys, in particular how model answers attract marks. Engage candidates as examiners; encouraging them to write their own questions and mark responses from other candidates.
- Provide candidates with examination practice questions (under examination conditions) for both short and extended response items.

Comments on specific sections and questions
Section One: Multiple-choice (20 Marks)
Attempted by 643 candidates   Mean 11.54(/20)   Max 18.00   Min 5.00
Multiple-choice items generally worked well in discriminating candidate ability and this section attracted a mean of 57.70%. The most difficult questions were 1, 7, 10, 14 and 16 which focused on content related to measures of health inequity, needs assessment, Maslow's Hierarchy of Needs, impact of social determinants on health and barriers to health inequity. The easiest questions were numbers 4, 13, 18 and 19 which focused on content related to healthcare reforms, United Nations Sustainable Goals, health inquiry and cultural influences on decision-making.

Section Two: Short answer (50 Marks)
Attempted by 643 candidates   Mean 27.14(/50)   Max 46.00   Min 2.00

The short answer items generally worked well to discriminate between candidate performance, with this section attracting a mean of 54.29% and range of marks between 2 and 46.00 (out of a possible total of 50). The most difficult questions in this section were 21 and 22.

Section Three: Extended answer (30 Marks)

Attempted by 641 candidates Mean 15.27(/30) Max 29.50 Min 0.00

Overall candidates achieved a mean of 50.88% for this section, the lowest mean for all sections. The most popular question was 27, followed by 29, 28 and 30. All questions scored reasonably evenly in terms of the mean for each. Comments on each question can be found under each of the data tables.