



2010 Health and Human Development GA 3: Examination

GENERAL COMMENTS

Students answered most questions on the 2010 Health and Human Development examination. However, it was disappointing that some students did not attempt some questions, especially in areas such as the social model of health, the roles of the government and nongovernment organisations in promoting healthy eating and providing dietary advice, and elements of sustainability.

It is important that students read all parts of a question carefully and provide the required amount of detail in their answer. In Section C, Question 6cii., students needed to discuss the interrelationships between health, human development and sustainability; however, many students did not include a discussion. Many students discussed sustainable human development instead of sustainability. These students often provided the definition of sustainable human development rather than showing how the interrelationships were evident in the program described in Question 6ci. Students should remember that a good answer should address all parts of a question directly, provide the necessary amount of detail and use relevant data where required.

Students should use the number of lines provided and the marks allocated for each question as a guide to the depth and length of response required.

SPECIFIC INFORMATION

Note: Student responses reproduced herein have not been corrected for grammar, spelling or factual information.

For each question, an outline answer (or answers) is provided. In some cases the answer given is not the only answer that could have been awarded marks.

Section A

Question 1a.

Marks	0	1	Average
%	87	13	0.2

Students should have identified any one of the following health benefits:

- reduce incidence of stroke
- prevention of folate anaemia
- prevention of Spina Bifida.

No mark was given for the formation of red blood cells or for DNA as these are development examples.

It was evident that the dot point in the study design related to folic acid had not been considered. It is important that consideration is given to all parts of the study design.

Question 1b.

Marks	0	1	Average
%	66	34	0.4

Food Standards Australia New Zealand

The acronym FSANZ was not accepted.

Question 2

Marks	0	1	2	3	4	Average
%	17	12	23	16	32	2.3

Any two of:

- life expectancy – an indication of how long a person can expect to live; the number of years of life remaining for a person of a particular age if death rates do not change
- disability – Disability Adjusted Life Years (DALY) is a measure of the burden of disease – one DALY equals one year of healthy life lost due to premature death and time lived with illness, disease or injury

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- Health Adjusted Life Expectancy (HALE) – a measure of the burden of disease based on life expectancy at birth, including an adjustment for times of ill health; the number of years of full health that a person can expect to live, based on current rates of ill health and mortality
- under-five mortality rate – the number of deaths of children under five years of age per 1000 live births
- maternal mortality – the number of deaths of women during pregnancy or childbirth
- mortality – the number or rate of deaths in a specified time
- morbidity – ill health in an individual and the levels of ill health in a population group
- incidence – the number of new cases of an illness occurring during a given period
- prevalence – the number or proportion of cases of a particular disease or condition present in a population at a given time
- burden of disease – a measure of the impact of diseases and injuries, specifically the gap between current health status and an ideal situation where everyone lives to an old age, free of disease and disability.

Question 3

Marks	0	1	2	3	Average
%	24	46	22	8	1.2

Three marks were awarded for an explanation of how Medicare may influence the health status of Australians. Possible answers included:

- all Australians have access to affordable medical care. This enables them to attend health services (such as a general practitioner) to have regular health checks, maintaining positive health and preventing ill health from progressing. Many medical practitioners will bulk bill low-income earners, meaning there is no cost of care to the individual
- vaccinations are available at a subsidised cost through Medicare; therefore, all people can access them to prevent contagious diseases like measles and hepatitis A and B
- access to medical treatment is available to all Australians through public hospitals, subsidised general practitioners and specialists, including tests (for example, pathology) and X-rays that help to accurately diagnose and treat medical conditions
- access to eye tests or optometrists which help to diagnose vision problems and enable appropriate treatment or management.

The following is an example of a high-scoring response.

Medicare is Australia's universal health care scheme that provides health services to individuals at a subsidised rate. This may possibly affect Australia's health status by providing cheap access to health services to those who may not of been able to afford it meaning diseases are caught early or prevented increasing over all life expectancy and decreasing morbidity.

Question 4

Marks	0	1	2	Average
%	35	28	37	1

Characteristics used by the World Health Organization (WHO) to describe a developing country include (any two of):

- under-five mortality rate
- adult mortality
- child mortality
- infant mortality
- income
- adult literacy
- life expectancy
- level of economic development
- gross domestic product.

Question 5

Marks	0	1	2	Average
%	19	26	54	1.4

- Physical – levels of fitness, appropriate height to weight ratio, absence of disease, efficient functioning of the body and its systems, healthy immune system, capacity to perform tasks.
- Social – interacting with others, participating with people through interdependent social relationships, living in a community cooperatively.

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- Mental – thinking and feeling about self, feeling positive about life, sense of belonging, expressing appropriate emotions, confidence, self-esteem, levels of anxiety, how individuals deal with everyday situations, ability to cope with normal stress and make a contribution to the community.

One mark each was awarded for the identification and explanation of the dimension of health.

Many students identified determinants of health instead of dimensions of health and were not awarded any marks.

Question 6

Marks	0	1	2	Average
%	24	48	28	1.1

- The glycaemic index is a ranking of carbohydrate foods based on their overall effect on blood glucose levels.
- Bilateral aid is aid given by one government to another.

One mark was awarded for each definition.

Question 7

Marks	0	1	2	Average
%	30	22	49	1.2

Any two of:

- medical model of care practiced by clinicians
- based on diagnosis, treatment and cure using a range of technologies
- focuses on physical or biological aspects of disease and illness
- focuses on an individual's health rather than the health of the population.

Question 8

Marks	0	1	Average
%	45	55	0.6

The Millennium Development Goal that relates specifically to gender equality is 'Promote gender equality and empower women'.

The Millennium Development Goals are a key part of Unit 4, Area of Study 1. Students must know the correct names of the eight goals.

Question 9a.

Marks	0	1	Average
%	13	87	0.9

Any one of:

- diabetes mellitus
- hypertensive heart disease
- liver cancer
- colon and rectal cancer
- oesophagus cancer
- stomach cancer
- tracheal, bronchus and lung cancer
- chronic obstructive pulmonary disease.

Road traffic injury is an example of a cause of death that is expected to rise in ranking, but it is more likely to be attributed to factors such as speed and the use of seatbelts or helmets rather than global marketing.

Question 9b.

Marks	0	1	2	Average
%	46	27	27	0.8



- The global marketing of processed food has seen a replacement of local and traditional foods with those that have higher levels of sugar, fat and salt. This has contributed to the increased incidence of diseases such as diabetes mellitus, colon and rectal cancer, and hypertensive heart disease.
- The global marketing of tobacco has meant the consumption of it has increased. This has then increased the incidence of hypertensive heart disease, liver cancer, colon and rectal cancer, oesophagus cancer, tracheal, bronchus and lung cancer, and chronic obstructive pulmonary disease.
- The global marketing of alcohol has seen high levels of alcohol being consumed globally. This has increased the incidence of diabetes mellitus, road traffic injuries, colon and rectal cancer, liver cancer, and stomach cancer.

Many students were unable to apply the concept of global marketing to the rise in the ranking of the illness they had chosen in 9a. Global marketing is one of the concepts in Unit 4, Outcome 1. The global marketing of cars was not acceptable as the cars are not a direct cause of the injuries; the direct cause of the injury is the driver and their behaviour.

The following are examples of high-scoring student responses.

Global marketing is pushing for processed foods distributors to increase in developing areas to make up for lost revenue's in Developed countries where Health Promotion is at large. The more consumers of these energy dense foods high in saturated fats and sales will increase obesity rates which is a major risk factor for diabetes, specifically type 2 diabetes.

Tobacco smoking in many countries is linked to global marketing especially in developing countries where knowledge of the impact of smoking is low. Tobacco smoking is a risk factor for trachea, bronchus and lung cancer, therefore with the introduction of tobacco smoking via global marketing (where one country sells its goods to other countries), there will be an increase in trachea, bronchus and lung cancer as a leading cause of death.

Global marketing is bringing tobacco around the world. However, in many developing countries there is no legislation on the marketing and promotion of tobacco. Also, there is less promotion programs highlighting the risk of tobacco consumption in developing countries, so people are less aware. As a result global marketing may contribute to the increased ranking of trachea, bronchus and lung cancers because tobacco is a risk factor.

Question 10a.

Marks	0	1	Average
%	45	55	0.6

Any one of:

- war/conflict
- earthquakes
- tsunamis
- floods
- drought.

Question 10b.

Marks	0	1	2	Average
%	41	26	34	0.9

Possible answers included:

- food – providing food drops for immediate use when, for example, floods prevent access to food stores
- shelter – such as tents for short-term accommodation after an earthquake
- water – providing water immediately after a tsunami until regular water supplies are fixed
- medical care – immediate and short-term relief following a natural disaster
- medical personnel – to provide medical help immediately following an earthquake
- clothing and hygiene resources – to provide immediate needs following a flood or earthquake.

One mark each was awarded for the example and the description of the relationship to short-term emergency assistance. Many students did not understand what humanitarian aid was.

Question 11

Marks	0	1	2	Average
%	45	33	22	0.8

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Possible answers included:

- AusAID may provide aid to enable a government to build infrastructure such as schools, providing the community with education opportunities which allow people to take control of their lives and to develop to their full potential
- AusAID contributes to organisations, such as the United Nations, that may be used to reduce the incidence of HIV/AIDS and to improve the treatment globally. This contributes to improved health and wellbeing, enabling people to participate in their local community.

One mark each was awarded for the example and the link to one aspect of sustainable human development. Many students did not answer this question. Many students could not apply the concept of sustainable human development.

Question 12

Marks	0	1	2	3	4	Average
%	8	12	27	22	31	2.6

Possible answers included the following.

Behavioural determinant

- Men are more likely to drink alcohol than women. Driving under the influence of alcohol may lead to road traffic accidents.
- Men are more likely than women to be involved in risk-taking behaviours such as speeding, which increases the risk of road accidents.
- Men are more likely than women to take drugs and drive, which increases the risk of road accidents.

Social determinant

- Men are more likely than women to take risks by speeding and showing off to friends, raising the likelihood of road accidents.

Biological determinant

- Male hormones, for example testosterone, have been linked to increased risk-taking behaviour in men.

To score full marks, students needed to give appropriate examples and name the specific determinant. Many students mixed dimensions with determinants; these are two different concepts in Unit 3, Outcome 1.

Section B

Question 1a.

Marks	0	1	Average
%	47	53	0.6

The number or proportion of cases of a particular disease or condition present in a population at a given time

Many students did not answer this question.

Question 1b.

Marks	0	1	2	Average
%	11	36	52	1.4

Possible reasons included:

- the disease contributes significantly to the burden of disease
- the disease contributes significantly to ill health, disability and premature death in Australia
- the incidence is rising
- the complications of the disease contribute to other conditions and therefore the ill health of individuals
- the costs and strains placed on health care services in Australia to treat people with the condition
- potential for a range of strategies to be implemented to reduce the burden of disease.

Question 1c.

Marks	0	1	2	3	4	Average
%	8	19	36	27	10	1.1

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Possible answers included:

- saturated fat protects the organs, develops and maintains cell membranes, is a part of hormones in the body, and provides fat-soluble vitamins
- major food sources of saturated fat – animal fats, such as meat and full cream dairy products (milk, butter, cheese), palm and coconut oil, sausages, fried takeaway foods, cakes and biscuits
- fibre adds bulk to the faeces and promotes regular bowel movements, and lowers cholesterol levels in the blood and glucose absorption into the cells
- major food sources of fibre – wholegrain breads and cereals, legumes, fruits, vegetables, nuts and seeds.

No marks were awarded for simply listing fried or takeaway foods. It was important to state the function of these foods; not all fried and takeaway foods are high in saturated fats. Many students were unable to answer this question even though nutrients are included as a dot point in Unit 3, Outcome 1.

Question 1d.

Marks	0	1	2	3	4	5	6	Average
%	38	17	19	10	8	4	3	1.6

Possible answers included the following.

- The Australian Guide to Healthy Eating assists people to understand the relationship between food and nutrients, and the amounts and varieties of food that should be eaten each day to ensure a balanced diet. Following this food model the levels of obesity may be reduced, which helps to prevent diabetes mellitus.
- Health professionals who assess the likelihood of adequate intake of appropriate nutrients to prevent diabetes mellitus can use nutrient reference values. These values can be used to moderate intakes of fat and carbohydrates that help to prevent or reduce the incidence of obesity – a precursor to diabetes mellitus.
- The Dietary Guidelines provide a framework that guides the selection of foods that can prevent diabetes mellitus. The Guidelines include advice on the importance of eating a variety of nutritious foods each day, which includes eating plenty of vegetables, legumes and fruits, all of which are high in fibre, low in kilojoules and help to reduce the risk of obesity and diabetes mellitus.

Students needed to incorporate an example of a specific dietary guideline that could link to a reduction in the incidence of diabetes mellitus.

Other Australian Government promotions that students could have included were:

- Get Set 4 Life
- Food Standards Australia and New Zealand
- Children’s Nutrition and Physical Activity Survey
- The Stephanie Alexander Kitchen Garden National Program
- Go for 2 and 5.

This question was not answered well. Too many students linked diabetes to intake of sugar; this was incorrect as the risk factor for diabetes mellitus is overweight/obesity and answers should have focused on this relationship.

The following are examples of high-scoring responses.

Australian Guide to Healthy Eating is a guide that is a conceptual framework for educating Australians on the relationship between food and nutrients. It specifies what and how much food should be consumed in order to maintain optimal health. This way they are reducing the prevalence of diabetes through education and awareness about healthy eating (eating a wide range of foods, their food pie chart and recommended serving sizes) which is a protective factor against developing obesity and diabetes (type 2).

The Australian Gov. has introduced dietary guidelines for Australian adults, as well as for children. Guidelines such as ‘enjoy a wide variety of nutritious foods’, ‘avoid foods with high saturated fats and sugar’ ensure that people obtain adequate nutrients and prevent weight gain which acts as a protective factor for diabetes.

Question 2a.

Marks	0	1	2	Average
%	27	49	23	1

Any two of:

- development of nutrition policies for use in school canteens

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- taxation of processed foods
- review of food selection models
- inform the development of appropriate health promotion strategies.

This question was not answered well as many students were unable to identify how the Australian Government could use the information.

Question 2b.

Marks	0	1	2	3	4	5	Average
%	12	13	26	24	17	9	2.5

2bi.

Any two of:

- cancer control
- obesity
- cardiovascular health
- diabetes mellitus.

Students needed to use the correct name of a National Health Priority Area (NHPA). Many students gave cardiovascular disease as their response; however, this was incorrect.

2bii.

Cancer control – fruit and vegetables contain fibre, are high in protective antioxidants and low in kilojoules, all of which are protective factors for reducing the incidence of a range of cancers, particularly colorectal cancer.

If a student named an NHPA incorrectly in part 2bi. but accurately described the relationship between it and fruit and vegetable consumption in 2bii., they could still be awarded marks.

The following is an example of an excellent response.

Obesity – fruits and vegetables are high in fibre and are nutrient dense. This promotes satiety compared to foods high in saturated fat and energy dense, which are absorbed quickly. Therefore, eating fruits and vegetables rather than fast foods which are high in kilojoules will act as a protective factor against obesity.

2biii.

Any one of:

- the costs to governments to provide hospitals, medicines and diagnostic tests
- allied health costs; for example, dieticians to guide diets to reduce weight
- costs of implementing prevention initiatives
- costs of implementing screening programs
- costs associated with seeing health professionals such as doctors and specialists.

Question 2c.

Marks	0	1	2	3	Average
%	31	38	21	10	1.1

- The Heart Foundation could implement a strategy such as 'Just add Fruit and Veg' that promotes the consumption of fruits and vegetables via their website, through fresh fruit markets, fruit shops and in brochures.
- Nutrition Australia has produced the Healthy Living Pyramid, which promotes the consumption of plenty of fruits and vegetables. Information about the Healthy Living Pyramid is widely available in shops, on the Nutrition Australia website and in brochures and posters.
- Nutrition Australia promotes fruit and vegetable consumption through National Nutrition Week in schools, workplaces and the media.

Other nongovernment organisations included:

- Diabetes Australia
- Cancer Council.



The following are high-scoring responses.

A nongovernment organisation such as Nutrition Australia could develop the 'food Pyramid' further into not only 'sometimes, moderate, always' but into specific age groups which emphasises the need of fruit and vegetables in 14 -16 year olds for maintaining a healthy lifestyle.

Nutrition Australia could use the healthy living pyramid in order to illustrate to 14 – 16 year old children that fruit and vegetables should be eaten more compared to any of the other food groups. Nutrition Australia could conduct health promotion programs in schools and the media by eg getting famous athletes to educate and promote the importance of eating fruit and vegetables in schools and on TV.

An NGO (Nutrition Australia) could use this data to form a basis for introducing a 'healthy lunchbox policy in schools to encourage healthy eating in a fun capacity. Teachers, staff and parents would be involved in ensuring lunch boxes were 'healthy zones' with fruit and vegetables forming the foundations of school time meals.

Question 3a.

Marks	0	1	2	3	4	5	6	Average
%	43	6	9	9	20	7	5	2

Possible answers included the following.

Intersectorial collaboration: This involves a range of government and nongovernment organisations working together to promote health and to implement programs. Examples from the program include:

- the program is implemented by the Greater Shepparton City Council and funded by VicHealth
- the program works in areas such as education, employment, and sport and recreation.

Acts to reduce social inequalities: Seeks to address the social determinants, which include gender, culture, race, socio-economic status, location and physical environment. Examples from the program include:

- the focus is on the community as a whole and not just the migrant refugees and Aboriginal communities directly affected by discrimination and racism
- a goal is to identify ways to reduce discrimination and promote diversity at the local level
- ensure that the environments are safe and welcoming for people from a range of cultural backgrounds
- increase understanding and empathy among different community groups.

Empowers individuals and communities: People can participate in decision making about their health. They are more likely to participate when they have a sense of power and ownership over their lives. Examples from the program include:

- the responses will include a range of different approaches such as communications, community development and supporting organisations with training and other resources
- the focus is on the community as a whole, not just on people from migrant, refugee and Aboriginal communities directly affected by discrimination or racism.

Many students did not answer this question. Many students used the Ottawa Charter for Health Promotion; however, this was incorrect.

The following are examples of high-scoring responses.

Involves intersectorial collaboration. The program aims to work with community members, local organisations, VicHealth and those involved in education, training and sport and recreation in order to work together and achieve a positive health outcome. By getting a diverse group of people working together the program is more likely to be successful and meet the needs of the community.

Reduce social inequities. The LEAD program aims to improve acceptance of cultural diversity. In doing so, those who may have been discriminated against due to culture, beliefs or race are given the chance to be equals on a level playing field. Increasing understanding and involving the whole community reduces and eliminates social inequities.

Empowering individuals and the community. The LEAD program works at a local level, and aims to involve the community as a whole. By coming together, and communicating with one another, individuals strengthen ties with each other, develop understanding and are empowered to make decisions that are fair. Through understanding the health of the entire community benefits.

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Addresses all determinants of health. The program focuses on the broader social and environmental determinants of health not just physical health and addresses the notion that social determinants such as social inclusion and social support can have an impact on social health. By creating safe environments and promoting empathy and understanding among different community groups, the program promotes social inclusion and support, which will have a positive impact on the health of people from different cultural groups.

Question 3b.

Marks	0	1	2	3	4	5	Average
%	41	12	13	17	10	7	1.7

Possible answers included the following. The program is:

- appropriate, affordable and equitable
- appropriate because all cultures represented in Shepparton are involved as a community. This should lead to better mental health as the focus is on educating diverse groups and empowering people to be involved in decision making within the community and to achieve a better quality of life
- affordable as it provides the community with a range of resources in a number of sectors designed to provide a decent standard of living for all. With a focus on education there is a greater chance of ensuring sustainability over time
- equitable as it is available to all people in the local community. Therefore, health should be enhanced for all, contributing to improved mental health and a decent standard of living. Freedom from discrimination enables participation in the decision-making processes within the community and greater empowerment.

Many students did not answer this question. The elements of sustainability are included in a dot point in Unit 4, Outcome 2. Many students ended their response with the definition of sustainable human development rather than predicting how it would be achieved.

The following is an example of a high-scoring response. This answer could have been improved by the inclusion of a more full explanation of how sustainable human development is achieved by the program.

For the program to be sustainable the elements of equity, affordability and appropriateness must be met. First and foremost, it can be stated that this program is equitable as the entire community can be involved, therefore no one is discriminated against. Furthermore, there is a large focus on not just those who are discriminated against, but rather the community as a whole, making the program appropriate. Through educating people about cultural differences and discrimination, the social objective for sustainability is also met. As no cost is involved to the community (as it is VicHealth funded) the program also affordable allowing all individuals to participate and, as a result, the whole community experiences better health. Through better health promotions, the community can reach its full potentials by expanding its choices and enhancing capabilities. People within the community can become empowered and as knowledge is obtained the needs of the present are met and decisions can be made without compromising needs of the future.

Question 4a.

Marks	0	1	2	Average
%	45	29	26	0.8

Possible answers included the following.

- Most of the women spent a large proportion of their time collecting water. These women are not compensated for the large amount of time allocated to sustaining their family, and this means that they do not have the choice to spend time on paid work, education, childrearing, family care or relaxation, which may be more productive or rewarding. It means that an environment in which women can develop to their full potential and lead productive and creative lives according to their needs is not created.
- Women may collect the water at the same time as other women. It can be a social time where they exchange knowledge, learn how to participate in their community and take part in decisions that affect their lives – they can work together to better their environments. It can create an environment in which the women can develop their potential and lead productive and creative lives.

Many students focused on individual human development rather than on human development as defined by the United Nations (UN). The UN definition of human development is provided in the study design.

Question 4b.

Marks	0	1	2	3	4	5	6	Average
%	11	25	21	18	13	8	5	2.4



Possible answers included the following.

- Increasing access to safe drinking water promotes health as it means there is less likelihood of diarrhoea and other water-borne diseases that can be deadly, especially for children. It also means that there is less of a burden on women collecting water, and their time can be spent on more productive activities that can promote their physical, social and mental health, such as childrearing, relaxation or paid work. If people are healthy and they have more time available as they are no longer collecting water, then they are able to earn a living, be productive and contribute to economic development, which contributes to all dimensions of health.
- Sustainable human development is about having choices. Having access to safe drinking water means women can lead productive and creative lives according to their needs and interests. Women in particular will have greater choice about and freedom to engage in productive activities. This will result in opportunities for women to develop to their full potential and contribute to the ongoing development of their community, including environmental, social and economic objectives of sustainability.

Many students answered the question by providing a definition of sustainable human development and were unable to explain how increasing access to safe drinking water enabled sustainable human development.

The following is an example of a high-scoring response.

By increasing access to safe drinking water, women and girls (especially) will no longer experience physical health issues (eg sore backs, necks) due to having to carry heavy buckets of water over long distances. Furthermore, as the water is safe disease is prevented which in turn enables social health to improve as individuals can interact with one another without the burden of injury or sickness. People no longer need to stress about having access to water ensuring an improvement in mental health.

Through increasing access to safe drinking water, all dimensions of health are significantly improved for women and girls as well as the community. As a result, the community can develop to its full potential, enhancing its capabilities and expanding its choices. Access to safe drinking water provides a better standard of living and therefore enables communities and individuals to become empowered. With access to safe drinking water (eg wells) sustainability can also be met as the needs of the present for water is met without compromising the access to water in the future.

Question 5a.

Marks	0	1	Average
%	5	95	

Sub-Saharan Africa

Almost all students were able to read the data correctly.

Question 5b.

Marks	0	1	2	Average
%	22	35	43	

Both developed and developing countries have made progress towards decreasing the under-five mortality rate per 1000 live births between 1990 and 2007. The developed regions have reduced under-five mortality rates from 11 deaths per 1000 to 6 deaths per 1000 live births. Developing countries have not made as much progress but have decreased under-five mortality rates from 103 deaths per 1000 to 74 deaths per 1000 live births.

Data was provided in this question and students should have used it to frame their answers. Some students misinterpreted the numbers; for example, by stating that a developed country reduced deaths from 11 000 to 6000.

Question 5c.

Marks	0	1	2	3	4	Average
%	22	18	28	21	11	

An appropriate nongovernment organisation; for example, CARE Australia.

- A strategy implemented by CARE Australia is a nutrition program. Mothers regularly attend nutrition workshops where they are provided with health advice and the growth of their children is monitored. Volunteers, with the support of CARE, distribute supplementary food to malnourished babies, pregnant women and mothers.
- This strategy is helping mothers to build their children's immune systems and improve the children's chance of survival, growth and long-term health, ultimately reducing the under-five mortality rate and helping to achieve the Millennium Development Goal.



Other examples of Australia-based nongovernment organisations could have been World Vision Australia, Caritas, Water Aid Australia, Australian Red Cross, Tabitha Australia and Oxfam Australia.

The following are examples of high-scoring responses.

Oxfam Australia. Oxfam could implement a 'pump and well' building program in rural villages to provide them with clean water for drinking. Water borne diseases such as dysentery cause a high amount of mortality in children, and therefore provision of safe water would save millions of children's lives. High mortality from this disease is preventable but lack of access to health care in developing countries hinders this. Therefore access to clean water is the most effective way of solving this problem.

World Vision Australia could implement the 'sponsor a child' campaign' in developing countries where the money given could be used to provide safe water and increased access to education and health care and immunisation, as well as provide nutritious food to the child and other children in the community. This will reduce the mortality rates due to malnutrition and communicable diseases, thereby decreasing child mortality.

Question 6a.

Marks	0	1	2	3	Average
%	19	9	26	45	2

Ethiopia would belong to mortality strata D or E because:

- Ethiopia has very high child mortality, ranking 27th in the world in the under-five mortality rate, with a rate of 210 per 1000 and an infant mortality rate of 69 per 1000
- Ethiopia also has the largest HIV/AIDS-infected population in the world, contributing to very high adult mortality rates
- children in Ethiopia die from childhood diseases that could easily be prevented through immunisation and basic health services.

It was important that students used the data from the stimulus material to justify their answers.

Question 6b.

Marks	0	1	2	3	4	5	6	Average
%	25	16	20	16	13	7	4	2.1

Possible answers included the following.

Income

- Ethiopia is a very poor country, with one third of the population surviving on less than \$1 USD per day. This will have a significant impact on health status. When families are living in poverty, it is difficult for them to afford to buy food, water, adequate housing, health care and education.
- Women and children are often most affected by a lack of food. Children become undernourished, which reduces their immunity to a range of communicable diseases such as measles, influenza, pneumonia, tuberculosis, pertussis, diphtheria and tetanus. These diseases contribute to high rates of death and disability in children.
- A lack of water results in high levels of diseases such as diarrhoea and cholera, which contributes to high rates of death and disability in children and adults.
- Poor housing can contribute to high rates of infectious diseases and respiratory infections.
- With low income levels, the capacity of the Ethiopian government to collect taxes that can be used to provide essential infrastructure such as clean water supplies, basic health care and educational opportunities is limited. This makes it more difficult for individuals and families to attain good health.

Gender equality

- Women in Ethiopia have a lower status than men, with female enrolment/attendance at school being low compared to males.
- Without gender equality, the health status of women is reduced. Women are often valued only for their role in childbearing and domestic work.
- Women often have children when they are young. This increases the risk of infection and death and often leads to long-term reproductive health issues.
- Women often have to work long hours doing hard physical work even when they are pregnant, which affects their physical health. They are often exhausted, have a low immune system and high rates of illness.
- Without gender equality, women are likely to suffer ill health due to domestic violence.

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- Gender inequality also contributes to poor social and mental health. Women are excluded from social events and feel disempowered and lack control over their lives.

It appeared that many students misread this question.

Question 6c.

Marks	0	1	2	3	4	5	6	7	8	9	10	11	12	Average
%	17	10	12	12	11	10	9	7	5	4	3	1	1	3.9

6ci.

Possible answers included the following.

Type of aid: AusAID could provide multilateral aid to the United Nations who, through the UNAIDS program, could work with the government and local communities in Ethiopia to implement a range of strategies to improve access to a range of HIV/AIDS initiatives.

Description: This is important because Ethiopia has the highest rate of HIV/AIDS-infected population in the world, contributing to very high adult mortality. Children in Ethiopia are orphaned as a result of HIV/AIDS.

- The program should include HIV/AIDS testing so those who are affected can be provided with antiretroviral drug therapy to try and slow the progress from HIV to AIDS, thereby reducing death rates in adults and children.
- Pregnant women with HIV need access to drugs and skilled birth attendants to minimise mother-to-child transmission.
- The program should include education to increase awareness of the health risks associated with unprotected sex and multiple partners.
- Condoms need to be available at little or no cost, and men need to be educated on the importance of using condoms and how to use them correctly.

Implementation: Members of local communities need to be educated in order to implement the program to ensure it is culturally appropriate and meets their needs. Given the low levels of adult literacy, the program should be delivered through the use of demonstrations, diagrams, dance and music.

Many students answered with 'provide an education program' without describing what this program would consist of. Many did not answer this section and this meant that they could not answer the second part adequately. It is important to note that HIV/AIDS cannot be prevented by immunisation or mosquito nets as many students wrote.

The following is an example of a high-scoring response.

The program would aim to decrease the burden of disease associated with HIV/AIDS by promoting education about sex and the transmission of HIV, as well as increased access to retroviral drugs to decrease the likelihood of HIV turning into AIDS.

The aid involved would be multilateral, with developed countries providing aid to the UN which uses the aid to implement education programs and purchase drugs. Bilateral aid between governments could be used to build infrastructure like hospitals to care for people with aids.

People, in particular women, would be educated through community awareness programs about safe sex eg using condoms, to decrease the chance of contracting HV/AIDS.

6cii.

Possible answers included the following.

- By reducing the rates of HIV/AIDS infections the health status of men, women and children will improve. HIV/AIDS attacks the immune system, which means that sufferers usually die from a range of infections, in particular pneumonia and diarrhoea. A sufferer is usually very sick for a long period of time, meaning that they are unable to work and preventing other family members from working as they are required to be a carer.
- Preventing HIV/AIDS will enable adults to work and generate an income, care for their children and have an increased health status.
- This program will help to meet both the short- and long-term needs of the community and be sustainable over time through the training of local health workers, both male and female.
- Reducing HIV/AIDS transmission and reducing the progress of HIV to AIDS will lead to improved human development by assisting the community to develop to their full potential, increasing the quality of life and



wellbeing of all people living in Ethiopia and increasing the choices available to them. This will improve life expectancy, enabling the people of the community to lead healthy and productive lives.

Many students did not attempt this part of the question, especially those who did not give an appropriate answer to 6ci. When answering a question such as this, it may be useful for students to identify the key parts of the question; for example, health, human development and sustainability. The key instruction was to discuss the interrelationships between them. Many students read sustainability as sustainable human development; however, these are different concepts.

The following is an example of a high-scoring response.

Health - By providing education on HIV/AIDS, promoting safe sex and having people tested, the physical health of those within the community will improve. The empowerment that comes with knowledge improves mental health and boosts self esteem, while the coming together of the community promotes social health.

Human Development – If people have good health then they are able to work and have a stable income. They can provide for their families and have choices over their health and the health of their families. They are able to contribute positively to their community, and spend time with their family which leads to contentment. They are content and are able to lead productive lives, reaching their full potential.

Sustainability - Their education can be passed on, and they are using safe, preventable measures to stay healthy which is sustainable for the community, the country and future generations.