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HEALTH AND HUMAN DEVELOPMENT

Written examination – Trial 1

2019

Reading time: 15 minutes Writing time: 2 hours

QUESTION AND ANSWER BOOK

Structure of book

Number of questions	Number of questions to be	Number of marks
	answered	
9	9	100

• Students are permitted to bring into the assessment room: pens, pencils, highlighters, erasers, sharpeners and rulers.

• Students are NOT permitted to bring into the examination room: blank sheets of paper and/or white out liquid/tape.

• No calculator is allowed in this examination.

Materials supplied

- Question and answer booklet.
- Additional space is available at the end of the book if you need extra paper to complete an answer.

Instructions

- Write your **student number** in the space provided above on this page.
- All written responses must be in English.

Students are NOT permitted to bring mobile phones and/or any other unauthorised electronic devices into the assessment room.

Question 1 (20 marks)

Diabetes is a health condition where the body cannot maintain healthy levels of glucose in the blood. There are two main forms of diabetes: type 1 and type 2. Type 2 diabetes accounts for 85% of all diabetes in Australia and is increasing in prevalence. Type 2 diabetes is one of the major consequences of the obesity epidemic.

Diabetes can be managed, but the potential complications are the same for type 1 and type 2 diabetes; heart attack, stroke, kidney disease, limb amputation, blindness, depression, and anxiety.

We know that diabetes:

- Is the leading cause of blindness in working age adults
- Is a leading cause of kidney failure and dialysis
- Increases the risk of heart attacks and stroke by up to four times
- Is a major cause of limb amputations
- Affects mental health as well as physical health; depression, anxiety and distress occur in more than 30% of all people with diabetes.

In 2018, the Australian Institute of Health and Welfare (AIHW) reported:

- People living in remote areas of Australia had a higher prevalence of diabetes-related risk factors when compared with people living in cities
- Type 2 diabetes disproportionately impacts Indigenous Australians compared with non-Indigenous Australians
- Death rates due to diabetes were over four times as high in Indigenous Australians as in non-Indigenous Australians
- Socioeconomic disadvantage was associated with higher hospitalisation and death rates from diabetes.
 Source: Adapted from https://www.aihw.gov.au/reports/diabetes/diabetes-indicators-strategy-2016-2020/contents/summary
- **a.** Describe the sociocultural factors that influence health and wellbeing.

2 marks

Source: Adapted from https://www.diabetesaustralia.com.au/what-is-diabetes

b. Name two sociocultural factors and outline how each may contribute to people experiencing 4 marks socioeconomic disadvantage having higher death rates from diabetes.

c.	Give examples of how nutritional intake may contribute to Australia's burden of disease for diabetes.	4 marks
		_
		_
		_
		_
d.	Describe how diabetes may negatively impact on the spiritual and mental health and wellbeing of an individual.	2 marks
		_
e.	Describe two impacts on Australians as a national resource that may occur as a result of increasing numbers of Australians being diagnosed with diabetes.	2 marks
		_
		_
		_

f. Name two action areas of the Ottawa Charter and explain how each could contribute to reducing the death rates from diabetes in Indigenous populations.

6 marks

reducing the death rates noin diabetes in mulgenous populations.

Question 2 (10 marks)

The National Disability Insurance Scheme (NDIS) and Medicare are essential aspects of the Australian health system.

Outline two differences between the NDIS and Medicare. 2 marks a. **b.** Give an example of how the NDIS and Medicare each promote Australia's health status in 4 marks different ways. Outline how the NDIS and Medicare each promote equity in different ways in the Australian C. 4 marks healthcare system and state the implications of this for health and wellbeing.

Question 3 (12 marks)

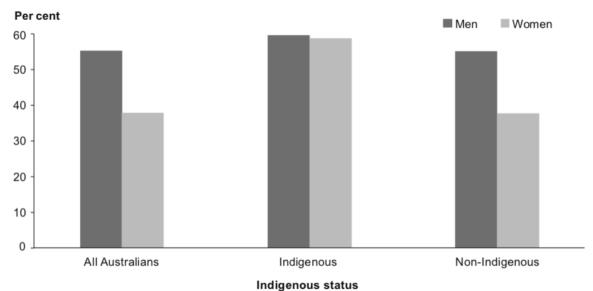


Figure 1: Prevalence of overweight or obesity, by sex and Indigenous status, aged 19-30, 2011-13.

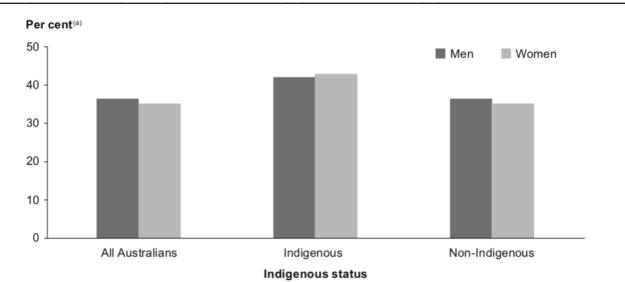


Figure 2: Proportion of energy intake from discretionary food, by sex and Indigenous status, aged 19-30, 2011-13.

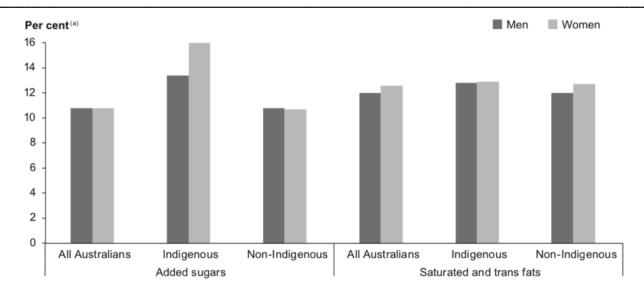


Figure 3: Proportion of energy intake from added sugars and saturated and trans fats, by sex and Indigenous status, aged 19-30, 2011-13. Source: Adapted from https://www.aihw.gov.au/reports-data/population-groups/indigenous-australians/overview

a.	Using data, compare the prevalence of female overweight and obesity for 19 to 30-year-old Indigenous and non-Indigenous people.	2 marks
b.	Describe the trend in female Indigenous status and proportion of energy intake from discretionary foods, added sugars and trans and saturated fat.	1 mark
C.	What are discretionary foods?	 1 mark
d.	Name two of Australia's Dietary Guidelines and explain how they could be used to reduce levels of overweight and obesity in 19 to 30-year-old Australians.	4 marks

e.	Provide two reasons why the Social Model of Health approach may not be achieving success in reducing the levels of overweight and obesity in 19 to 30-year-old Australians.	2 marks
		-
		-
f.	Two WHO prerequisites for health are income and a stable ecosystem. Explain how an adequate income and a stable ecosystem can promote a healthy bodyweight in Australians.	2 marks
		-
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Question 4 (8 marks)

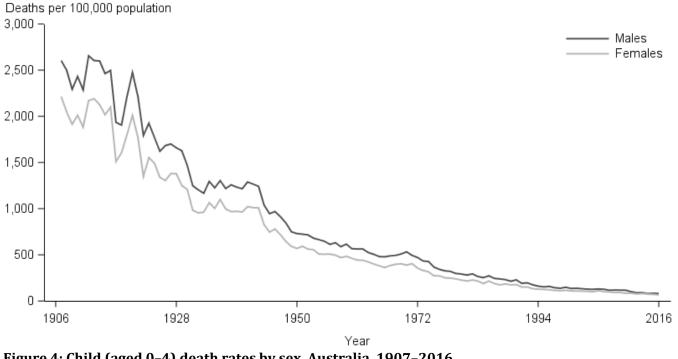


Figure 4: Child (aged 0-4) death rates by sex, Australia, 1907-2016

Source 2

1971 - 72: CT Scanner

The first commercial Computed Tomography (CT) scanner, developed by Dr. Godfrey Hounsfield, was used on a patient in London. CT scanners went on to be used to diagnose a range of internal bodily issues such as injuries and cancer.

1930 - 1950: New Antibiotics

A range of new antibiotics were discovered, such as penicillin, meaning many bacterial diseases could be effectively treated.

Source 3

The Heart Foundation

In 1959, approximately 22 percent of Australian deaths were caused by heart disease. In February of that year, a group of cardiologists, lawyers and business people founded the Heart Foundation. The organisation aimed to fund research and develop education programs to improve the prevention, diagnosis and treatment of heart disease in Australia. In 1983 The Heart Foundation launched the successful school skipping program 'Jump Rope for Heart'. This helped to promote the importance of physical activity for better heart health. Today Jump Rope for Heart still keeps school children active. Since 1983 more than 10 million kids have participated in Jump Rope for Heart. The Australian Institute of Health and Welfare (2018) has reported that since the 1960s the overall death rate for heart disease has fallen and continues to fall.

Source: Adapted from https://60years.heartfoundation.org.au/?_ga=2.98048540.2036897006.1556182722-535963883.1556182722

Source: https://www.aihw.gov.au/reports/life-expectancy-death/deaths-in-australia/contents/age-at-death

Using the information provided and your own knowledge, explain how the following have contributed to changes in Australia's health status over time:

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- 'Old' Public Health
- The Biomedical Model of health, including advances in medical technology
- Social Model of health
- The Social and Biomedical Models working together.

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Question 5 (14 marks)

The United Nations Sustainable Development Goals (SDGs) includes Goal 6: Clean Water and Sanitation. This goal includes the following targets:

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• By 2030, achieve universal and equitable access to safe and affordable drinking water for all

• By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations

• By 2030, improve water quality by reducing pollution, eliminating dumping and minimizing release of hazardous chemicals and materials, halving the proportion of untreated wastewater and substantially increasing recycling and safe reuse globally.

Source: https://www.undp.org/content/undp/en/home/sustainable-development-goals/goal-6-clean-water-and-sanitation.html # targets and the sanitation and the sanitat

a. What is the rationale for the United Nation's Sustainable Development Goals?

2 marks

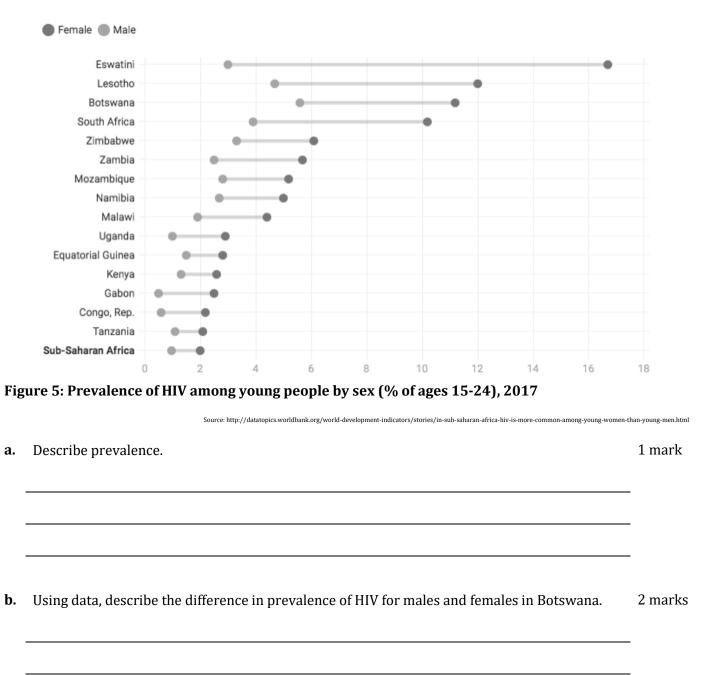
b. Explain how achieving any two of the three targets listed above for SDG 6 could promote 4 marks human development.

C.	Describe how the global trend of climate change may make efforts towards achieving SDG 6 more difficult.	3 marks
		-
		_
		_
		_
d.	Name SDG 3 and outline how achieving SDG 6 would help to achieve two key features of SDG 3.	5 marks
		-
		_
		_
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Question 6 (10 marks)

Human Immunodeficiency Virus (HIV) is a virus that can be transmitted via bodily fluids. If contracted, it can be treated using drugs called antiretrovirals. If these drugs are not taken, the virus can cause the condition Acquired Immune Deficiency Syndrome (AIDS) where the immune system can struggle to fight off infections and this can result in death.

The diagram below demonstrates the prevalence of HIV for young people aged 15-24 years in many African countries.



C.	Name a relevant WHO priority and outline how its work may help to reduce the difference outlined in Question 6b.	3 marks
d.	Give two examples of how individuals may engage with national or international organisations to take social action that may assist in reducing the prevalence of HIV in Botswana.	— 4 marks

Question 7 (7 marks)

World Vision Australia, a non-government organisation, implemented between January 2015 and December 2017 the Nugal Empowerment for Better Livelihood Project in Puntland State, Somalia. Somalia is a low-income country in Africa. It aimed to provide greater livelihood opportunities and to support social inclusion for vulnerable families.

The project targeted 9,720 individuals and their families, including displaced people and refugees. Key features of the project included:

• 82 percent of the 4,611 people who completed livelihoods trainings were women.

• Small business owners reported an increase in their average net profit: from US\$92 to US\$117 per month after they received business facilitation support. The increase was attributed to an increase in knowledge and abilities to manage business activities including marketing, finances, record keeping and building business networks.

• 65 percent of the unemployed youth who completed technical and vocational education and training had gained employment by the end of the project.

• 5,500 children from vulnerable families, including 3,122 girls and 2,378 boys, were registered and issued with birth certificates in close collaboration with the Ministry of Interior.

Source: Adapted from World Vision Australia Annual Report 2018

2 marks

a. List two environmental characteristics of low-income countries such as Somalia.

b. Outline how this project may be promoting social sustainability and economic sustainability. 2 marks

c. Use an example from the program to demonstrate interrelationships between social and 3 marks emotional health and wellbeing.

	ustralia provided approximately \$4.2 billion in aid across the 2018-19 period. Approximately 316 million of this was in bilateral aid to our neighbour, Indonesia.
^{if} 2 marks	Source: https://dfat.gov.au/about-us/corporate/portfolio-budget-statements/Documents/2018-19-australian-aid-budget-at-a-glance.pd
_	
_	
1 mark	•. What is bilateral aid?
_	
4 marks	List two advantages and two disadvantages of bilateral aid.
_	
_	
 4 marks	I. Two Australian aid priorities are Education and health, and Agriculture, fisheries and water.
	Give an example of what work may be done by the Australian aid program in each priority area and outline a different type of partnership that may be involved in each.
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Question 9 (8 marks)

Analyse how variations in poverty in low-income and high-income countries can impact on levels of human development. Make reference to the Human Development Index, including advantages and disadvantages of this measure, in your answer.



END OF QUESTION AND ANSWER BOOK

Extra space for responses

Clearly number all responses in this space.