

5 Changes in Australia's health status

Unit	3	Australia's health in a globalised world
Area of Study	2	Promoting health and wellbeing
Topic	5	Changes in Australia's health status
Subtopic	5.2	Changes in Australia's health status over time

Summary

Changes in health status since 1900 include:

- Life expectancy has increased by approximately 27 years, largely due to a decrease in infant and child mortality rates.
- Infectious and parasitic diseases have decreased due to better sanitation and living conditions, the introduction of vaccines and improvements in medicines.
- Lung cancer death rates have decreased due to a decrease in smoking levels.
- Cardiovascular disease rates have decreased, however it is still a significant cause of mortality and morbidity today.
- Pneumonia and influenza death rates have decreased.
- Injury death rates have decreased due to better working conditions for employees and the introduction of seat belts.

My notes



To answer questions online and to receive **immediate feedback** and **sample responses** for every question, go to your learnON title at www.jacplus.com.au.

Exam practice questions

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 1

Which of the following is not a valid change in health status since 1900?

1 mark

- A. Life expectancy has increased by approximately 27 years.
- B. Pneumonia and influenza death rates have decreased.
- C. Infectious and parasitic diseases have increased, particularly diarrhoeal disease.
- D. Injury death rates have decreased.

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 2

In 1911, gastroenteritis, diphtheria, scarlet fever, whooping cough and measles were responsible for the death of one in every 30 live-born children.

Gastroenteritis, diphtheria, scarlet fever, whooping cough and measles are examples of

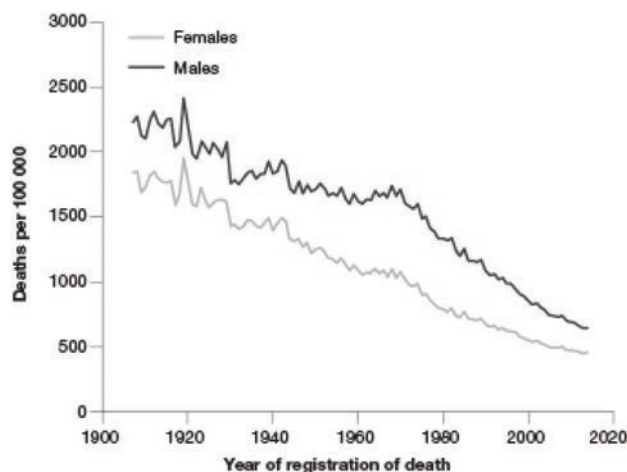
1 mark

- A. parasitic diseases.
- B. respiratory diseases.
- C. infectious diseases.
- D. None of the above

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 3

Age-standardised death rates for All causes combined (ICD-10 ALL), by sex and year, 1907–2013



Source: AIHW, Grim books.

Using data from the graph, identify a trend in mortality rates since 1900.

2 marks

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 4

Injury death rates have decreased in Australia since 1900.

Outline two reasons why injury death rates have decreased.

2 marks

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 5

Child mortality rates from infectious and parasitic disease death have decreased in Australia since 1900.

Outline two reasons why infectious and parasitic death rates in children have decreased. **2 marks**

My notes

Unit	3	Australia's health in a globalised world
Area of Study	2	Promoting health and wellbeing
Topic	5	Changes in Australia's health status
Subtopic	5.3	Policy and practice relating to the 'old public health' and Australia's health status

Summary



Immunisation programs were an important component of 'old' public health.

- Public health refers to the ways in which governments monitor, regulate and promote health and prevent illness.
- **'Old' public health** focused on:
 - the development of safe water and sewerage systems
 - nutrition
 - quarantine
 - immunisation programs
 - development of antenatal and infant welfare services
 - health promotion campaigns.

My notes



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Exam practice questions

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 1

Old public health focused on

1 mark

- A. nutrition.
- B. immunisation programs.
- C. quarantine.
- D. All of the above

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 2

Old public health saw the establishment of antenatal and infant welfare services. By 1937 there were over two hundred infant welfare centres operating in Victoria.

The establishment of infant welfare centres saw a significant decrease in

1 mark

- A. infant mortality rates.
- B. adult mortality rates.
- C. deaths due to injuries.
- D. All of the above

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 3

“The emergence of lifestyle diseases during the 1950s and 60s saw a shift towards the implementation of publicly funded health promotion campaigns.”

Identify two examples of lifestyle diseases.

2 marks

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 4

“The emergence of lifestyle diseases during the 1950s and 60s saw a shift towards the implementation of publicly funded health promotion campaigns.”

Using an example, outline how the introduction of health promotion campaigns led to improvements in health status.

3 marks

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

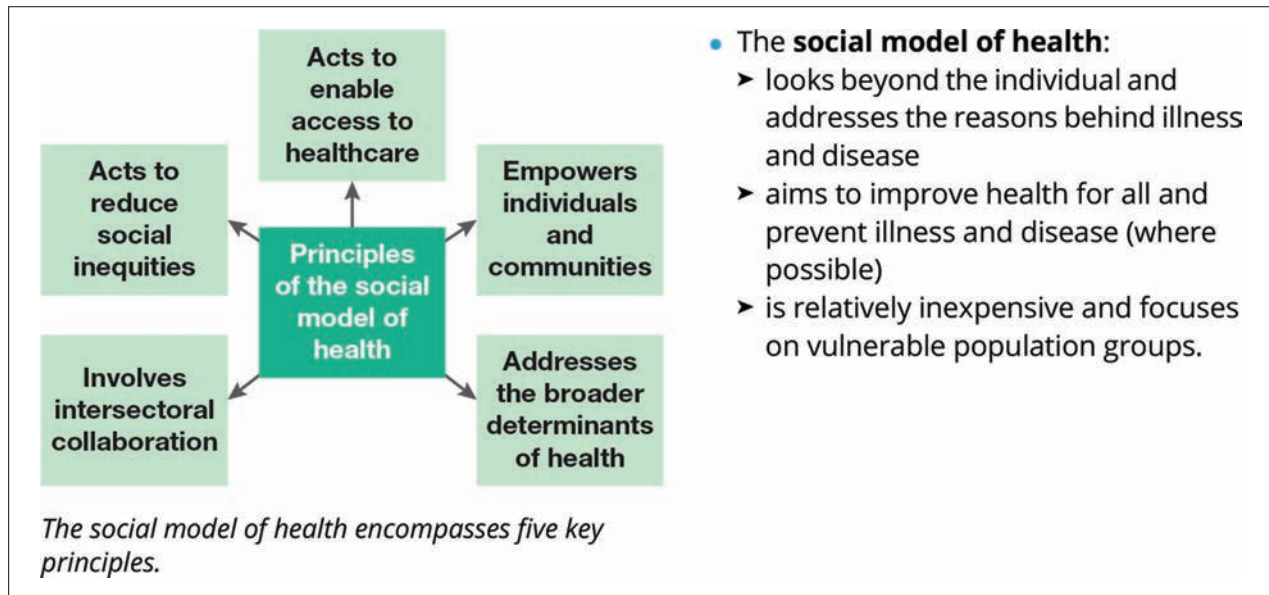
Question 5

Apart from the development of health promotion campaigns and the establishment of infant welfare services, identify another example of old public health.

1 mark

Unit	3	Australia's health in a globalised world
Area of Study	2	Promoting health and wellbeing
Topic	5	Changes in Australia's health status
Subtopic	5.5	Development of new public health and the social model of health

Summary



Social model principles	Explanation
Addresses the broader determinants of health	Considers social, economic and environmental factors on health, e.g. unemployment, distance, cost
Acts to reduce social inequities	Reduction or removal of barriers, e.g. cost of health services, language barriers to increase fairness for all
Acts to enable access to health care	Health care should be accessible and affordable to all, regardless of race, gender and income.
Involves intersectoral collaboration	Health groups need to work with other groups in the community to achieve better health outcomes for all.
Empowers individuals and communities	People are more likely to control their own health if they have the skills and knowledge to do so.

My notes



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Past VCAA exam questions

Source: VCAA 2017, *Health and Human Development Exam, Q4c*

Question 1

Consider the following information regarding a VicHealth project.

Victorian workplace mental wellbeing collaboration
 VicHealth, SuperFriend and WorkSafe Victoria have formed a collaboration to help workplaces create positive and supportive cultures and environments that enable workers to be more engaged, positive and effective at work.
 Victorian workers spend around one-third of their time in the workplace and the work environment can provide a positive sense of community and connection with others, as well as build self-esteem and provide recognition and rewards for individual workers and teams.
 Approaches such as developing a positive leadership style, designing jobs for mental wellbeing, communicating effectively, recruitment and selection of employees, work-life demands, and supporting and developing employees are all important components of workplace mental wellbeing.

Source: © Victorian Health Promotion Foundation (VicHealth); source material available at <www.vichealth.vic.gov.au>

Identify one principle of the social model of health and explain how it is reflected in the project described above.

3 marks

Source: VCAA 2018, *Health and Human Development Exam, Q2*

Question 2 (5 marks)

a. What is meant by ‘new’ public health?

2 marks

b. Analyse **one** way in which ‘new’ public health may have contributed to improvements in Australia’s life expectancy over time.

3 marks

Source: Adapted from VCAA 2015, *Health and Human Development Exam, Q4c*

Question 3

State one principle of the social model of health and explain how it is reflected in ‘No Excuse Needed’ project.

3 marks

Source: VCAA 2016, *Health and Human Development Exam, Q6c*

Question 4

One of the principles of the social model of health is that it ‘addresses the broader determinants of health’. Explain this principle and provide an example of how it is evident in VicHealth’s ‘Changing the Game’ program.

3 marks

Source: VCAA 2011, *Health and Human Development Exam, Section B, Q3ci*

Question 5

VicHealth's Food for All program is designed to increase regular access to, and consumption of, a variety of foods (particularly fruit and vegetables) by people living in disadvantaged communities.

VicHealth believes that local governments are best placed to develop relevant, integrated and long-standing strategies to tackle food insecurity. Funding is provided to local governments with 20% or more of their population living in disadvantaged neighbourhoods.

Local governments are encouraged to work with local charities and community-based health workers to improve the planning of those things that influence access to foods: ease of shopping close to where people live; easy ability to transport food to housing areas; providing culturally relevant education to help newly arrived families on how to recognise 'healthy' foods and how to prepare foods unfamiliar to them; and provide help in budgeting finances.

Source: VicHealth

Identify two principles of the social model of health that are relevant to the Food for All program. **2 marks**

Source: Adapted from VCAA 2011, *Health and Human Development Exam, Section B, 3cii*

Question 6

VicHealth's Food for All program is designed to increase regular access to, and consumption of, a variety of foods (particularly fruit and vegetables) by people living in disadvantaged communities.

VicHealth believes that local governments are best placed to develop relevant, integrated and long-standing strategies to tackle food insecurity. Funding is provided to local governments with 20% or more of their population living in disadvantaged neighbourhoods.

Local governments are encouraged to work with local charities and community-based health workers to improve the planning of those things that influence access to foods: ease of shopping close to where people live; easy ability to transport food to housing areas; providing culturally relevant education to help newly arrived families on how to recognise 'healthy' foods and how to prepare foods unfamiliar to them; and provide help in budgeting finances.

Source: VicHealth

Use examples from the Food for All program to demonstrate how these two principles are reflected in the VicHealth funded program. **4 marks**

Exam practice questions

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 11

Identify three principles of the social model of health.

3 marks

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 12

The social model of health

1 mark

- A. focuses on the physical aspects of disease and illness.
- B. looks beyond the individual and addresses the reasons behind illness and disease.
- C. focuses on the individual.
- D. All of the above

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 13

The principles of the social model include

1 mark

- A. developing personal skills.
- B. empowering individuals and communities.
- C. strengthening community action.
- D. All of the above

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 14

According to the Better Health Channel, all Australian citizens have access to free health care in a public hospital.

Identify one principle of the social model of health that is reflected in the above statement and justify your choice. **2 marks**

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 15

‘Acts to reduce social inequities’ is one of the social model principles.

This principle is about

- A.** reducing barriers such as cost to increase fairness to all.
- B.** considering the social, economic and environmental factors that impact on health.
- C.** the health sector working together with groups outside the health sector.
- D.** developing skills and knowledge to gain control over health.

1 mark



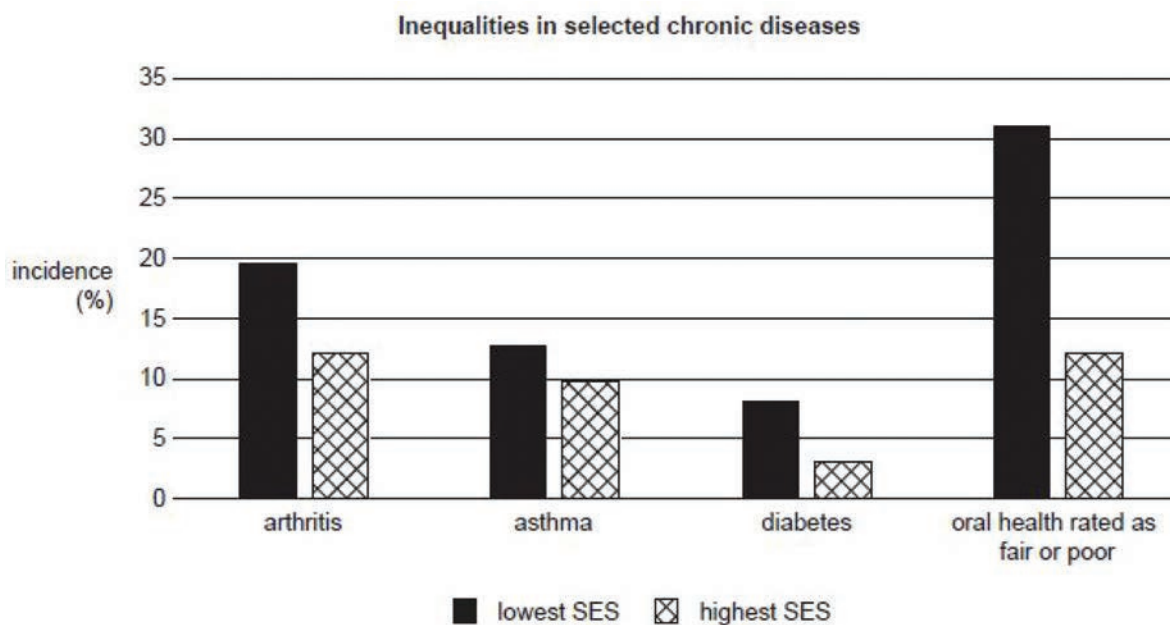
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Past VCAA exam questions

Source: VCAA 2017, *Health and Human Development Exam, Q7c*

Question 1

The following graph shows the incidence of selected chronic diseases by socio-economic status (SES) in Australia in 2014–2015



Data: Australian Institute of Health and Welfare (AIHW), *Australia's Health 2016*, 'Australia's Health' series no. 15, cat. no. AUS 199, AIHW, Canberra, 2016, p. 184

Select one chronic disease from the graph. Explain how two action areas of the Ottawa Charter for Health Promotion could be used to address this chronic disease. **4 marks**

Source: VCAA 2018, *Health and Human Development Exam*, Q11a

Question 2

The AMA [Australian Medical Association] wants the Government to use tax policy to force up the prices of sugar-sweetened drinks to change behaviour ...
For the AMA, taxing them is far from the single solution to the obesity or diabetes epidemics ...

Source: Emily Clark, ‘The AMA wants sugar-sweetened drinks taxed, but will it happen?’, ABC News, 7 January 2018, <www.abc.net.au>

Using your knowledge of effective health promotion, including the Ottawa Charter for Health Promotion, explain why taxing soft drinks is not the only solution to addressing the obesity epidemic. **6 marks**

Source: VCAA 2011, *Health and Human Development Exam*, Section B, Q8a

Question 3

The Ottawa Charter for Health Promotion is an approach to health promotion that reflects the social model of health. It identifies three strategies as well as five priority areas that are important for promoting health. The three strategies are:

- enabling
- mediating
- advocacy.

Outline how health promotion is defined in the Ottawa Charter.

2 marks

Source: VCAA 2011, *Health and Human Development Exam, Section B, Q8b*

Question 4

The Ottawa Charter for Health Promotion is an approach to health promotion that reflects the social model of health. It identifies three strategies as well as five priority areas that are important for promoting health. The three strategies are:

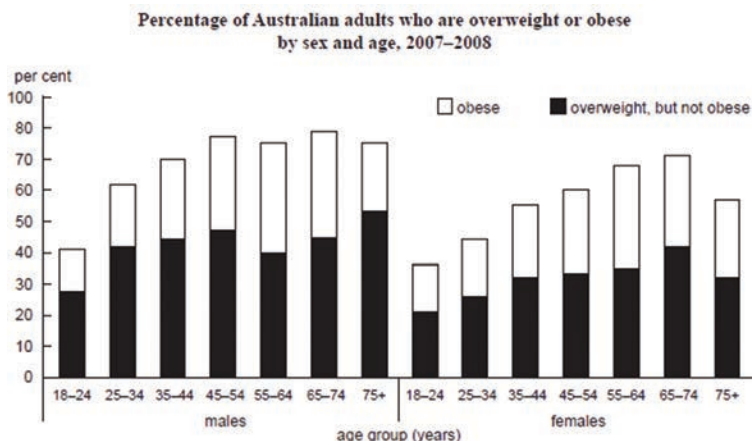
- enabling
- mediating
- advocacy.

Select two of the three strategies listed above and explain how each of these is important for health promotion.

4 marks

Source: VCAA 2012, *Health and Human Development Exam, Section B, Q2c*

Question 5



Source: Australian Institute of Health and Welfare, *Cardiovascular disease: Australian facts 2011, Cardiovascular disease series, cat. no. CVD 53, Canberra, p. 32*

Use two priority areas identified in the Ottawa Charter for Health Promotion to describe how the levels of obesity in Australia could be reduced.

4 marks

Source: VCAA 2014 Health & Human Development Exam, Q10

Question 7

5 marks

Local primary schools will receive support to participate in ‘walk to school’ opportunities ... Monash Council has received \$10,000 from VicHealth to implement the Walk to School program ... The program is designed to raise awareness of the physical, environmental and social benefits of active transport, and to encourage school children to walk to and from school more often. Aside from supporting schools, Council will use the funding to develop a Monash walking map and online portal.

Source: *Active Monash*, issue 69, October 2013

- a. i.** Identify two priority action areas of the Ottawa Charter for Health Promotion.

2 marks

- ii.** Select one of the above priority action areas and briefly outline how it is reflected in the Walk to School program.

Priority action area

Outline

1 mark

Exam practice questions

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 8

List three action areas of the Ottawa Charter for Health Promotion.

3 marks

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 9

Describe how building healthy public policy may reduce the burden of disease in Australia.

2 marks

Unit	3	Australia's health in a globalised world
Area of Study	2	Promoting health and wellbeing
Topic	5	Changes in Australia's health status
Subtopic	5.7	Improving health status using the social and biomedical approaches to health

Summary

- The **relationship between the models of health** in bringing about improvements in health and wellbeing.

The **social model of health**, in addressing health issues such as road trauma, can look at making roads safer (broader determinants of health) and use health promotion campaigns to increase awareness of road safety (empower communities and individuals).



The **biomedical model of health** can work alongside the social model by using improvements in medical technology to diagnose and treat individuals who become injured through road trauma.



My notes



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Past VCAA exam questions

Source: VCAA 2016, *Health and Human Development Exam*, Q8d

Question 1

Explain how both the biomedical and social models of health could be used to reduce the burden of disease associated with cardiovascular disease. **4 marks**

Source: VCAA 2013, *Health and Human Development*, Section A, Q6

Question 2

Explain **one** difference between the biomedical model of health and the social model of health. **2 marks**

Source: VCAA 2014 *Health & Human Development Exam*, Q13

Question 3

Complete the following table by outlining one advantage and one disadvantage of the biomedical model of health and the social model of health. **4 marks**

	Biomedical model of health	Social model of health
Advantage		
Disadvantage		

Exam practice questions

Source: *Jacaranda (John Wiley & Sons Australia, Ltd), Practice VCE Question*

Question 4

Which of the following examples illustrates a relationship between the social and biomedical models of health?

1 mark

- A. GPs providing medication to lower blood pressure
- B. GPs providing medication to assist with weight loss
- C. the government subsidising the price of sunscreen and medical professionals removing minor skin cancers
- D. All of the above

Source: *Jacaranda (John Wiley & Sons Australia, Ltd) 2017, Practice VCE Question*

Question 5

A GP who runs a bulk billing clinic would be an example of

1 mark

- A. the biomedical model of health.
- B. the social model of health.
- C. both the biomedical and social models of health.
- D. None of the above

Answers and marking guide

5.2 Changes in Australia's health status over time

Question 1

Correct Answer is C

Infectious and parasitic diseases, particularly diarrhoeal disease, have decreased since 1900.

Question 2

Correct Answer is C

Gastroenteritis, diphtheria, scarlet fever, whooping cough and measles are examples of infectious diseases.

Question 3

Suggested answers could include:

- Age-standardised death rates for males have decreased since 1900. In 1900 the age-standardised death rate for males was approximately 2300 deaths per 100 000 population, compared to approximately 700 deaths per 100 000 population in 2013.
- Age-standardised death rates for females have decreased since 1900. In 1900 the age-standardised death rate for females was approximately 2000 deaths per 100 000 population, compared to approximately 500 deaths per 100 000 population in 2013.

Award 1 mark for identifying an accurate trend.

Award 1 mark for using accurate data.

Question 4

Valid reasons could include:

- introduction of compulsory seatbelts in 1970
- improved working conditions for workers and the introduction of 'work safe' practices
- laws developed to ensure pools and spas are fenced to prevent drowning-related injuries.

Award 1 mark for each of two valid reasons.

Question 5

Valid reasons could include:

- improvements in water quality and sanitation
- introduction of immunisations for infectious diseases such as measles and whooping cough
- improved food supply
- introduction of maternal and child health services
- improved housing conditions.

Award 1 mark for each of two valid reasons.

5.3 Policy and practice relating to the 'old public health' and Australia's health status

Question 1

Correct Answer is D

Old public health focused on nutrition, immunisation programs and quarantine.

Question 2

Correct Answer is A

The establishment of infant welfare centres saw a significant decrease in infant mortality rates.

Question 3

Lifestyle diseases include:

- cardiovascular disease
- type 2 diabetes

- obesity
- lung cancer.

Award 1 mark for each of two examples of a lifestyle disease.

Question 4

'Life: be in it' was a health promotion campaign designed to encourage people to become more active to prevent lifestyle diseases. Encouraging people to get off the couch improves health status as people will be more active, which will help maintain a healthy weight. This can reduce morbidity and mortality from lifestyle diseases linked to being overweight and obese, such as cardiovascular disease and type 2 diabetes.

Award 1 mark for an example of a health promotion campaign.

Award 1 mark for how this example led to improvements in health status.

Award 1 mark for a link to health status measures such as morbidity, mortality, burden of disease.

Question 5

Examples of old public health could include:

- development of quarantine practices
- development of immunisation programs
- development of safe water and sewerage systems.

Award 1 mark for example of old public health.

5.4 The biomedical approach to health

Question 1

Examples may include:

- the use of x-rays for diagnosis and treatment
- antibiotics and other medications
- blood tests
- surgery
- transplants.

Award one mark each of two valid examples.

Question 2

Major characteristics may include:

- It is a medical model of care practised by doctors and/or health professionals.
- It is associated with the diagnosis, cure and treatment of disease.
- It focuses on an individual's health rather than the health of the population.
- It focuses on the physical or biological aspects of disease and illness.

Award 1 mark for each of two valid characteristics.

5.5 Development of new public health and the social model of health

Question 1

Involves inter-sectorial collaboration — this principle is reflected in the Victorian workplace mental wellbeing collaboration project as 'VicHealth, SuperFriend and WorkSafe Victoria have formed a collaboration to help workplaces create positive and supportive cultures and environments'. This is an example of inter-sectorial collaboration as groups outside the health sector are working together to improve health outcomes.

Award 1 mark for identifying an accurate principle of the social model of health.

Award 1 mark for an example from the project.

Award 1 mark for how the example reflects the chosen social principle of health.

VCAA Examination Report note:

Students needed to identify one principle of the social model of health that was evident in the project and explain how it was reflected. Many students were unable to identify a principle. Students who did identify a principle tended to describe it rather than explain how it was reflected in the project. Students who chose 'acts to reduce social inequities' or 'acts to enable access to healthcare' had difficulty linking this to the project.

The following are possible examples.

- Empowers individuals and communities. The project is empowering individuals and communities by helping develop the knowledge and skills necessary to provide a positive and supportive workplace. This includes developing positive leadership style, designing jobs, work-life demands, communication skills and developing employees.
- Addresses the broader determinants of health. This project seeks to address the social environment in which people work to improve their health. This includes creating a positive and supportive culture and environment by providing recognition and reward for individual workers and teams, which helps build a positive sense of community and connection with others and builds self-esteem.

Question 2

- a. New public health is an approach to health that expands on the traditional focus of individual behavioural change to one that considers the ways in which the physical, sociocultural and political environments impact on health. [1 mark]

It is also known as the social model of health. [1 mark]

VCAA Examination Report note:

This question was answered reasonably well, with many students being able to explain the 'new' public health.

The most common error was not providing sufficient detail in the explanation and this prevented many students from being awarded full marks.

- b. New public health involves health promotion that reflects the elements of the social model of health. Health promotion such as the various TAC campaigns empowers individuals and communities to become safer drivers on the roads through the development of skills and knowledge such as speed kills. The TAC road safe campaigns also involve inter-sectorial collaboration through different government and non-government agencies working together to ensure safer roads and cars. If roads are safer and people have the skills to be safer drivers there should be less road trauma causing death contributing to improvements in life expectancy over time.

Award 1 mark for an example of new public health.

Award 1 mark for explaining how the example chosen reflects new public health.

Award 1 mark for explaining how the example chosen has contributed to improvements in life expectancy overtime.

VCAA Examination Report note:

Many students found the application of an example of 'new' public health to improvements in health status difficult, with many selecting an example of a biomedical approach. Where students could identify one example of the 'new' public health, they were often able to explain it but not discuss how it could have contributed to improvements in life expectancy over time. Students who chose other health campaigns such as SunSmart, Road Safety or Quit were better able to answer this question.

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

New public health may have contributed to health status improvements in many ways, one being through health promotion campaigns. By promoting healthy behaviours and educating people on the effects of unhealthy behaviours such as smoking, people gain a greater level of health literacy, empowering them to take control of and improve their own health. By knowing the adverse effects of smoking, people are less likely to smoke, reducing prevalence of cardiovascular disease and improving life expectancy.

Question 3

Involves inter-sectorial collaboration [1 mark] – the ‘No Excuse Needed’ campaign is a joint project between VicHealth and the Victorian government. [1 mark]. This reflects the principle of inter-sectorial collaboration as it involves groups outside the health sector working together to improve health outcomes. [1 mark]

Award 1 mark for identifying a social model principle.

Award 1 mark for an example from the project.

Award 1 mark for linking an example from the project to the social model principle chosen.

VCAA Assessment Report note:

This question assessed students’ understanding of the social model of health and how it is reflected in a VicHealth project. Many students struggled with this question. Some were able to identify one principle but had difficulty applying it to the project. Students who chose the principles of ‘empowers individuals and communities’, ‘addresses the broader determinants of health’ or ‘involves inter-sectorial collaboration’ were better able to answer the question than those who selected ‘acts to reduce social inequities’ or ‘acts to enable access to healthcare’.

VCAA Assessment Report high-scoring response:

Empower individuals and communities

- The ‘No Excuse Needed’ campaign aims to empower individuals and communities by encouraging society to accept those who don’t want to drink. The program aims to encourage individuals to say no to alcoholic drinks and to not be peer-pressured through television commercials that challenge the social norm of drinking. This encourages individuals to take greater control over their health and make healthier decisions.

Question 4

‘Addresses the broader determinants of health’ considers both the social determinants such as socioeconomic status, discrimination and isolation and the physical environments such as distance. The Changing the game program reflects this principle as it “addresses some of the reasons why women aren’t able to get active such as time, cost, inflexible opportunities for exercise”. Addressing cost and opportunities is focusing on the social determinant of socio economic status and physical environment determinant of distance.

Award 1 mark for an explanation of ‘addresses the broader determinants of health’.

Award 1 mark for a relevant example from the ‘Changing the Game’ program.

Award 1 mark for showing how the example links to the social model principle – addresses the broader determinants of health.

VCAA Assessment Report note:

This question assessed students’ understanding of the social model of health, in particular the principle ‘addresses the broader determinants of health’. Many students found this question difficult. Some were able to explain the principle but had difficulty applying it to the VicHealth project.

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

The principle asserts that in order for health outcomes to improve, the social, economic and environmental factors that impact on the body and human behaviour must be addressed. Changing the game is doing exactly this, specifically developed to suit women’s needs, addressing reasons why women can’t get active such as time, cost and inflexible opportunities for exercise.

Question 5

Any two of the following could be chosen:

- address broad determinants of health beyond the individual
- involve intersectorial collaboration with other sectors
- aim to reduce social inequities
- empower individuals and communities.

Award 1 mark for each correctly chosen determinant.

VCAA Assessment Report note:

Many students wrote sectorial instead of intersectorial, and inequalities for inequities. The correct principles should be learned.

Question 6

Responses could include:

- **Intersectorial collaboration:** VicHealth provides funding to local governments who work with local charities and community based health workers to deliver this program. This reflects this principle as various groups outside the health sector are working together to improve health outcomes for all.
- **Empowers individuals and communities:** The Food for All program provides culturally relevant education to help newly arrived families on how to recognise ‘healthy’ foods and how to prepare foods unfamiliar to them. This is providing these families with the skills and knowledge needed to make healthier food choices, empowering them to gain control over their own health. Once they have gained this knowledge, they can pass it on to others, which also empowers the community.

Two social model principles should be chosen. For each principle:

Award 1 mark for an appropriate example from the Food for All program.

Award 1 mark for how this example demonstrates the social model of health principle.

VCAA Assessment Report note:

Many students were unable to give examples of the program in order to demonstrate the principles.

Question 7

Principles may include:

Intersectorial collaboration: this principle involves groups working together outside the health sector to improve health outcomes. An example from the program which reflects this principle is that the program is implemented by the Greater Shepparton City Council and funded by VicHealth.

Acts to reduce social inequalities: This principle seeks to address the social determinants, which include gender, culture, race, socioeconomic status, location and physical environment. An example from the program is the goal to identify ways to reduce discrimination and promote diversity at the local level. By recognising that different groups face discrimination and creating programs that promote diversity, social inequities should be reduced.

Award 1 mark for identifying each of two principles of the social model of health.

Award 1 mark for the description of each principle.

Award 1 mark for an example of how each principle is evident in the case study.

VCAA Assessment Report note:

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

Question 8

Award 1 mark for identifying each of two principles.

Award 1 mark for explaining each of the two principles.

Sample answer:

Empowers individual and communities [1 mark]

- The Men’s Shed teaches men new skills such as woodworking and the restoration of old furniture. This allows participants to feel good about themselves which is empowering and provides control over their own health. **[1 mark]**

Involves intersectorial collaboration [1 mark]

- The Men’s Shed is funded by the Federal Government and run by local communities, illustrating groups working together to improve men’s health. **[1 mark]**

VCAA Assessment Report note:

Many students found this question difficult because they didn't know the principles of the social model of health. In some cases, students who accurately identified the principles found it difficult to make explicit how they were evident in the Men's Shed initiative.

Question 9

Answers may include:

- Collaboration with other groups outside the health sector
- Reducing social inequities
- Empowering individuals and communities
- Access to health care for all people.

Award 1 mark for each of two correctly identified principles not already stated in the question.

VCAA Assessment Report note:

Social and environmental determinants could not be used as they formed part of the question. It was disappointing that so many students were unable to provide an answer for this question given that a support paper was distributed to all schools by the VCAA about the Social Model of Health.

Question 10

Principles of the social model of health include:

- empowers individuals and communities
- addresses the broader determinant of health
- acts to enable access to health care
- acts to reduce social inequities
- involves intersectorial collaboration.

Responses may include:

- Addresses the social, environmental and economic determinants of health. This is reflected in our national health insurance system, Medicare, which provides access to essential healthcare services to all Australians regardless of their social, environmental or economic situation.
- Involves intersectorial collaboration (lots of government departments, not just the health department) Health promotion campaigns such as Arrive Alive are joint initiatives involving the department of transport and the department of health and ageing.
- Aims to reduce social inequities A range of healthcare services is targeted specifically to those groups who experience inequality in health outcomes. These include Aboriginal healthcare services, women's health centres, men's health clinics and adolescent health clinics.
- Empowers individuals and communities Many health promotion campaigns, such as Quit, SunSmart and Go For Your Life, are designed to educate and raise awareness of the risk factors associated with many diseases and illnesses. Education empowers individuals to take control over their health.
- Enables access to health care. Medicare is a low-cost service for all Australians. All Australians have in theory access to bulkbilling GPs and public hospitals regardless of income or where they live.

Award 1 mark each for each of two links to a relevant health service.

Award 1 mark each for each of two examples showing how the health service reflects the social model of health principle.

Award 1 mark each for each of two principles of the social model of health.

VCAA Assessment Report note:

If students used the elements of the Ottawa Charter they were not awarded any marks. This question was answered poorly; this was disappointing considering that the social model of health is a dot point in the study design. Many students did not answer this question, indicating that this area may not have been covered in all schools.

Question 11

Principles may include:

- addressing broad determinants of health beyond the individual, e.g. environment, economy and infrastructure
- collaborating with other sectors, e.g. the law (road rules, selling of alcohol), public infrastructure (quality of environment) and social support (for education)
- acting to reduce social inequalities
- empowering the individual and the community
- acting to increase access to health care for all people.

Award 1 mark for each of three valid principles.

Question 12

Correct Answer is B

The social model of health looks beyond the individual and addresses the reasons behind illness and disease.

Question 13

Correct Answer is B

The principles of the social model include ‘empowering individuals and communities’.

Developing personal skills and strengthening community action are action areas of the Ottawa Charter.

Question 14

Possible answers include:

Acts to enable access to health care — The provision of free health care in public hospitals enables all Australians to access health care, regardless of income, gender or race.

Addresses the broader determinants of health — The provision of free health care in a public hospital addresses the social determinant of socioeconomic status because all Australians can access free health care regardless of income, education or occupational status.

Acts to reduce social inequities — The provision of free health care in a public hospital reduces the barrier of cost, making it fair for all Australians.

Award 1 mark for identifying one of the following principles:

- addresses the broader determinants of health
- acts to reduce social inequities
- acts to enable access to health care.

Award 1 mark for a suitable justification.

Question 15

Correct Answer is A

‘Acts to reduce social inequities’ aims to reduce barriers such as cost to increase fairness to all.

Other responses could include:

- Considering the social, economic and environmental factors that impact on health reflects ‘addresses the broader determinants of health’.
- The health sector working together with groups outside the health sector reflects ‘intersectoral collaboration’.
- Developing skills and knowledge to gain control over health reflects ‘empowers individuals and communities’.

5.6 Ottawa Charter for Health Promotion

Question 1

Chronic condition — asthma

Create a supportive environment — schools could be encouraged to remove trees and other asthma triggers such as carpet from their buildings and grounds. This will help support asthma sufferers and may reduce the condition if asthma triggers are reduced in their environment.

Developing personal skills — if people have the skills and knowledge to change their behaviour, they are more likely to do so. If people are educated on how to reduce the risk of asthma attacks by reducing exposure to triggers such as pet hair, grasses and pollens, then the incidence of asthma may reduce.

For each action area of the Ottawa Charter chosen:

Award 1 mark for an example of the chosen action area.

Award 1 mark for how the example addresses the chronic disease selected.

VCAA Examination Report note:

Many students could accurately state two action areas of the Ottawa Charter but had difficulty applying them to the chronic disease they had selected. A common error was to describe the action areas that had been chosen without explaining how they would address the chronic disease. Some students were unable to accurately name the action areas.

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

Governments could develop laws and regulations on sugary and processed foods (Build healthy public policy) to reduce consumption of foods high in fat, salt and sugar which could reduce weight gain and obesity, as well as impaired glucose regulation, reducing incidence of diabetes (type 2).

Reorient health services-doctors and health professionals could take on an educating role rather than just treating diabetes, advising overweight or obese patients to lose weight to prevent development of diabetes.

Nurses could also go to schools and educate primary and secondary children about maintaining a healthy weight to prevent diabetes.

Question 2

For health promotion to be effective, all action areas of the Ottawa charter should be represented. Although building healthy public policy is evident in taxing soft drinks, this alone will not be sufficient to cause a decrease in obesity levels. Effective health promotion requires people to develop personal skills. That is, they need the knowledge to know how to reduce the causes of obesity and also the skills to do this. For example, people may reduce their consumption of soft drink if they are more aware of the dangers of sugary drinks to their health. Effective health promotion also requires a supportive environment. It is much easier to control weight if sugary foods are less available, such as limiting the availability of sugary drinks and foods at school canteens and work places. Obesity rates should decrease if community groups work together to reduce the consumption of sugary foods and promote the benefits of exercise. Through strengthening community action, schools, sports groups and local governments can promote the benefits of healthy eating and physical activity. Effective health promotion also requires medical professionals to promote the benefits of physical activity and healthy eating. By reorienting health services people are more likely to change their behaviour and adopt a healthier lifestyle to reduce obesity risks, if encouraged by a medical professional.

Award 1 mark for recognising that effective health promotion needs to involve all priority areas of the Ottawa charter to be successful.

Award 1 mark for recognising that taxing soft drink is an example of building healthy public policy.

Award 1 mark per area (up to 4 marks) for identifying another priority area of the Ottawa charter and suggesting how this priority area of the Ottawa charter can be used to address obesity.

VCAA Examination Report note:

Students who understood the principles of effective health promotion or the challenges associated with bringing about dietary change were able to explain why the taxing of soft drinks is not the only solution to the obesity epidemic. Some students provided a description of the action areas of the Ottawa Charter without linking to obesity. Overall, this question was not answered well.

Question 3

Award 1 mark for recognising that health promotion enables people to increase control over their own health.

Award 1 mark for recognising that people can improve their own health.

Sample answer:

Health promotion is defined as the process of enabling people to increase control over, [1 mark] and improve, their health. [1 mark]

Question 4

Two strategies are required. For each strategy:

Award 1 mark for an explanation of the strategy.

Award 1 mark for how it is important for health promotion.

Sample answer:

- Advocacy — This strategy aims to be a voice to for health promotion. [1 mark]
Lobbying policy makers to improve health will lead to better health outcomes. [1 mark]
- Enabling — This strategy aims at reducing inequalities in health status through ensuring equal opportunities and resources to all people to achieve their fullest health potential. [1 mark]
This is important for health promotion as it creates supportive environments and enables people to gain the skills and knowledge to improve and maintain their health. [1 mark]
- Mediating — Health promotion cannot be achieved by the health sector alone; its success will depend on the collaboration of all sectors of government as well as independent organisations working together. [1 mark]
Health promotion will be more successful if the community works as a whole to improve and maintain health. [1 mark]

VCCA sample answers:

- Advocacy — lobbying governments and other organisations to improve access to and provision of health care services. Groups and/or individuals working to influence public policy in cancer services, for example, to improve health outcomes.
- Enabling — creating supportive environments and providing access to information and skills to enable people to achieve their health potential. For example, providing dietary guidelines to enable people to choose a balanced diet.
- Mediating — ensuring the coordination of health services across and within sectors. Working between clinicians and consumers to reorient health services to bring about a greater focus on health promotion rather than on diagnosis and treatment or ensuring that government and non-government organisations work together to improve health outcomes for people.

Question 5

For each priority area chosen:

1 mark for an appropriate priority area and example.

1 mark for how example will reduce obesity.

Suggested answer:

Building healthy public policy

The government could develop policies to ban TV advertising of fast foods. **[1 mark]** Fast foods are high in fat, simple carbohydrates and protein, all of which contribute additional kilojoules to the diet. By banning these foods, fewer people may consume them which will assist in weight control and reduce obesity levels. **[1 mark]**

Creating supportive environments

Sports clubs could offer low-cost memberships to children, which may encourage more children to play sport. **[1 mark]** Playing sport increases physical activity, which burns kilojoules and assists in controlling weight, helping reduce levels of obesity. **[1 mark]**

Strengthening community action

Community groups could work together to promote free physical activity facilities in their community. **[1 mark]**

Through doing this, more members of the community may become aware of ways to be physically active. Physical activity assists in weight control, reducing the risk of obesity. **[1 mark]**

Developing personal skills

Running low-fat cooking classes provides people with the skills to reduce total fats in their diet. **[1 mark]** By knowing how to change behaviour through increasing skills, more people will be able to control their weight and reduce risk of obesity. **[1 mark]**

Reorientating health services

GPs could offer dietary advice and physical activity tips when patients present for general consultations rather than treating with drugs. **[1 mark]** People are more likely to change behaviour if told to do so by a medical professional. Being more active and eating less kilojoule-dense foods will help reduce obesity. **[1 mark]**

Question 6

For each of two priority areas:

- Award 1 mark for the correct identification of the priority area.
- Award 1 mark for each of two accurate ways this priority area was reflected in the case study.

Sample answer

Creating Supportive Environments **[1 mark]**

The Indigenous participants of this group were made to feel comfortable, sharing understandings about diabetes and helping other group members **[1 mark]**.

They were provided with transport to and from the meetings and they also prepared a healthy meal together **[1 mark]**.

Developing Personal Skills **[1 mark]**

Education was used to give the Indigenous people knowledge and skills to empower them to manage their own health and diabetes. A visual poster was used to help families understand diabetes **[1 mark]** and the participants were encouraged to ask questions so as to gain greater knowledge. Learning to measure blood glucose levels is important for assisting them to manage their health **[1 mark]**.

VCAA Assessment Report note:

Healthy Public Policy is not evident in the health initiative. Many students did not use information in the passage provided and therefore were not awarded any marks for the description.

Question 7

i. Award 1 mark (up to 2) for each priority action area chosen from this list:

- create supportive environments
- develop personal skills
- reorient health services
- build healthy public policy
- strengthen community action.

VCAA Assessment Report note:

Most students were able to accurately identify two of the priority action areas of the Ottawa Charter.

- ii. Create supportive environments — this was done through encouraging children to walk to and from school and making it a school focus. It will be easier for children to walk to school if others from the school are also doing this.

Developing personal skills — the program was designed to raise awareness of the physical, environmental and social benefits of walking to school. If people are aware of the benefits of walking they are more likely to change their behaviour and put this knowledge into practice.

Award 1 mark for showing how the Walk to School program reflects the Ottawa Charter priority chosen.

VCAA Assessment Report note:

This question required students to link one of the action areas selected to the Walk to School program. Most students had little difficulty in doing this, provided they selected an action area that was evident in the program. Students who selected ‘Reorienting Health Services’ struggled to link this to the program. Students are reminded that they should select an option carefully to ensure it enables them to best show their understanding.

Question 8

Action areas may include:

- build healthy public policy
- create supportive environment centres
- strengthen community action
- develop personal skills
- reorient health services.

Award 1 mark for each of three valid action areas.

Question 9

Award 1 mark for a valid example of building healthy public policy and 1 mark for describing the impact on burden of disease.

Sample answer:

An example of building healthy public policy is the tobacco smoking regulations in Australia [**1 mark**]. Regulations such as a tax on cigarettes, no smoking in restaurants, hotels and clubs and not selling tobacco to people under 18, reduces the exposure to tobacco smoke, thereby decreasing the incidence of lung cancer in Australia and the burden of disease [**1 mark**].

5.7 Improving health status using the social and biomedical approaches to health

Question 1

The Biomedical model of health focuses on diagnosing and treating disease and illness using health professionals. Doctors could diagnose cardiovascular disease with blood pressure and blood cholesterol tests and treat with medications. These treatments should help control the disease and help reduce years of life lost due to premature death from cardiovascular disease.

The social model of health focus on improving health for all by using a preventative focus to stop the disease/ condition happening in the first place. The social model could use health promotion messages empowering different groups in Australia to stop smoking and make blood cholesterol and blood pressure testing more readily available in rural areas to reduce inequities in health access. Both these actions could improve cardiovascular health for all and reduce the burden of disease from cardiovascular disease.

Award 1 mark for a description of the biomedical model of health.

Award 1 mark for an example of the biomedical model and how it reduces the burden of disease for cardiovascular disease.

Award 1 mark for a description of the social model of health.

Award 1 mark for an example of the social model and how it reduces the burden of disease for cardiovascular disease.

VCAA Assessment Report note:

This question required students to apply their knowledge of the biomedical and social models of health to cardiovascular disease. This question was not well answered as many students did not provide the necessary depth in their responses. Other students were able to apply their knowledge of the biomedical model but had difficulty applying the social model of health.

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

The biomedical model assists in diagnosis of cardiovascular disease (CVD) and then treating the disease through medication such as blood pressure lowering medication, reducing the risk of hypertension and associated CVDs such as stroke or heart failure which could lead to death. The biomedical model can help reduce mortality rates from CVD therefore contributing to a reduction in the overall burden of disease associated with cardiovascular diseases.

The social model of health focuses on health promotion, for example educating people on the dangers of tobacco smoking as a risk factor for CVD or healthy eating as a protective factor for CVD all in an attempt to reduce risks of cardiovascular disease incidence and prevalence, reducing the overall burden of disease associated with cardiovascular disease.

Question 2

The biomedical model of health focuses on the diagnosis and treatment of disease by medical professionals whereas the social model of health addresses the broader determinants of health and looks beyond the physical causes of disease and poor health.

Award 1 mark for identifying a valid example of the biomedical model of health.

Award 1 mark for describing how this example differs from the social model of health.

Question 3

Biomedical model of health — advantages:

- Extends life expectancy because many diseases and illnesses can be diagnosed and treated, preventing death.
- Investing in research leads to improved knowledge of disease and can lead to better/improved treatments.
- Effective in controlling the spread of disease.
- Reduces pain and suffering through effective treatments for illness.
- Can use the latest technology to help decrease the risk of disease.
- The community has an expectation that medical help to cure illness will be available when required and the biomedical system meets this community expectation.

Social model of health — advantages:

- Focuses on health for everybody — not just a one-on-one approach.
- More cost effective as it targets populations not individuals.
- Endeavours to improve health for those groups with traditionally poor levels of health, such as Indigenous Australians.
- Looks at more than just physical health — the focus is on the whole person.
- Decreases pressure on the health care system; reduces waiting lists by preventing health conditions.
- Improving the health of population groups through population-based health-promotion initiatives.
- Increases quality of life and extends life expectancy by delaying or preventing the onset of illness or disease.
- Considers other reasons for why people have poorer health — doesn't just look at lifestyle and behavioural reasons.
- Endeavours to increase health access to all people, not just those who already have good health.

Biomedical model of health — disadvantages:

- Certain treatments and medications that are not covered by government funding can be costly to individuals.
- Expensive because it is delivered by highly trained professionals and uses the latest technology.
- Only focuses on the treatment of the disease, not the whole person.
- Does not address the broader determinants of health.

Social model of health — disadvantages:

- At times there is a lack of coordination of services to promote the broader determinants of health.
- Health promotion programs can be ignored or don't reach the intended targets.
- Regardless of preventative programs, people still become ill.

Award 1 mark for a suitable biomedical advantage.

Award 1 mark for a suitable social model of health advantage.

Award 1 mark for a suitable biomedical disadvantage.

Award 1 mark for a suitable social model of health disadvantage.

VCAA Assessment Report note:

This question drew on students' ability to analyse the different models of health and health promotion as required in Unit 3, Area of Study 2. Many students were able to provide an example of the advantages and disadvantages of the biomedical and social model of health, although students who provided a brief explanation rather than just listing the examples provided higher-quality answers. Students are also encouraged not to provide the same example stated differently or reversed as both an advantage and a disadvantage.

Question 4

Correct Answer is C

The government subsidising the price of sunscreen and medical professionals removing minor skin cancers shows a relationship between the social and biomedical models of health.

Cheaper sunscreen reduces social inequities such as the barrier of cost (social model of health), which should see more people using sunscreen and hopefully not getting skin cancer. However, for those people who still get skin cancer, the biomedical model is used to remove the skin cancer.

Question 5

Correct Answer is C

A GP who runs a bulk billing clinic would be an example of both the biomedical and social models of health.

A GP is a health professional who diagnoses and treats illness and disease (biomedical model of health), however a bulk billing clinic acts to increase access to health care and reduce social inequities (social model of health).

Question 6

The biomedical model of health uses health professionals to diagnose, treat and cure illness and disease. The social model of health looks beyond the individual and aims to address the reasons behind illness and disease and prevent disease from ever happening. Both models work together to promote health and wellbeing: the social model by looking at the community as a whole and aiming to prevent disease and illness, and the biomedical model by diagnosing and treating individuals where disease and illness could not be prevented. Both work to reduce pain and suffering, which improves both physical and emotional health and wellbeing.

Award 1 mark for a description of the biomedical model.

Award 1 mark for a description of the social model.

Award 1 mark for how they work together to promote health and wellbeing.

Question 7

Both the social and biomedical models of health are essential and need to work together to address breast cancer. Through mobile breast screen vans, the social model principle ‘addresses the broader determinants of health’ is evident as the physical environment determinant of distance is addressed by bringing the screening vans to rural and remote women free of charge. Screenings allow breast cancer to be detected earlier and the biomedical model can then be involved in treating and hopefully curing breast cancer.

Award 1 mark for stating that both models work together to address breast cancer.

Award 1 mark for showing how breast cancer is addressed by the social model of health.

Award 1 mark for showing how breast cancer is addressed by the biomedical model of health.

Question 8

The Youth Dental Program reflects the social model of health principle ‘acts to reduce social inequities’ through providing “free dental treatment for dependents of health concession card holders”. This reduces the barrier of cost for those who need it most, making it fairer for all to have improved dental health.

Dentists are providing “sealants to prevent decay and cleaning and fillings once every 12 to 24 months”. This indicates that the biomedical model is using health professionals to treat dental decay and improving dental health. Both models of health are working together and are essential to improve dental health of young people.

Award 1 mark for an example from the case study.

Award 1 mark for a description of how the example reflects the social model of health.

Award 1 mark for a different example from the case study.

Award 1 mark for a description of how the example reflects the biomedical model of health.