

# INSIGHT Trial Exam Paper

# 2010

# HEALTH AND HUMAN DEVELOPMENT

# Written examination

STI		ENT	$\Gamma NA$	ME:
. ,	, ,			

### **QUESTION AND ANSWER BOOK**

Reading time: 15 minutes Writing time: 2 hours

#### Structure of book

Number of questions	Number of questions Number of questions to be answered	
7 7		90

- Students are permitted to bring the following items into the examination: pens, pencils, highlighters, erasers, sharpeners and rulers.
- Students are NOT permitted to bring sheets of paper or white out liquid/tape into the examination.
- Calculators are not permitted in this examination.

#### Materials provided

• The question and answer book of 13 pages.

#### Instructions

- Write your name in the box provided.
- You must answer the questions in English.

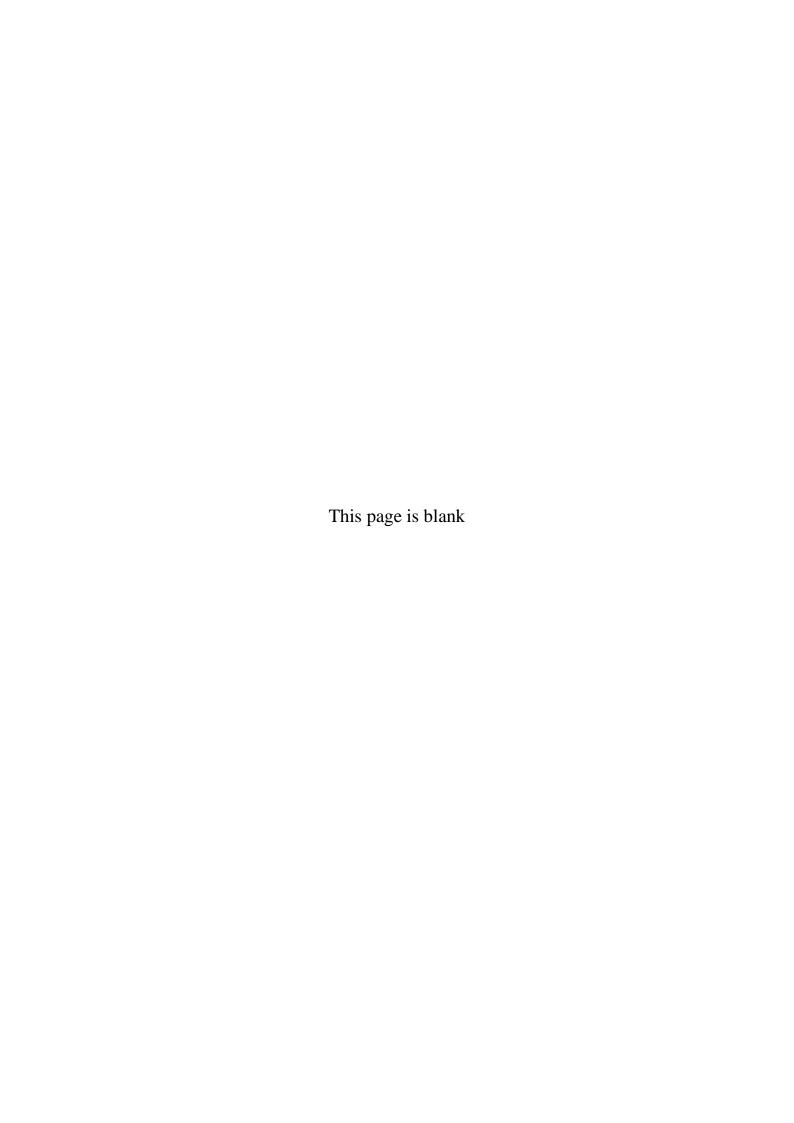
Students are NOT permitted to bring mobile phones or any other electronic devices into the examination.

This trial examination produced by Insight Publications is NOT an official VCAA paper for the 2010 Health and Human Development written examination.

This examination paper is licensed to be printed, photocopied or placed on the school intranet and used only within the confines of the purchasing school for examining their students. No trial examination or part thereof may be issued or passed on to any other party including other schools, practising or non-practising teachers, tutors, parents, websites or publishing agencies without the written consent of Insight Publications.

Every effort has been made to trace the original source of material used in this booklet. Where the attempt has been unsuccessful, the authors, editors and publishers would be pleased to hear from copyright owners in order to rectify any errors or omissions.

Copyright © Insight Publications 2010.



#### **Instructions**

Answer all the questions in the spaces provided.

#### **Question 1**

**Table 1:** Deaths of Indigenous Persons 2001–2005

	Indigenous death as a proportion of total death (%)		Indigenous Persons as a proportion of total population (%)	
Age group (years)	Males	Females	Males	Females
Less than 1	20.3	17.2	7.7	7.7
1–4	16.2	21.3	7.3	7.5
5–14	13.5	14.5	6.9	6.8
15–24	12.4	15.3	5.1	5.4
25–34	13.8	17.4	4.1	4.4
35–44	15.0	16.6	3.0	3.3
45–54	9.1	10.0	2.1	2.3
55–64	4.6	6.4	1.4	1.6
65 and over	1.2	1.2	0.8	0.9

(ABS• IHW • The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples• 4704 .0 • 2008 ABS data used with permission from the Australian Bureau of Statistics)

1a.	Identify the age group which has the highest percentage of Indigenous deaths as a proportion of total deaths in Australia for <b>males</b> .
	1 mark
1b.	There are many differences between the health status of Indigenous and non-Indigenous Australians. From the data provided in Table 1, compare the health status of Indigenous Australians to that of non-Indigenous Australians.
	4 marks

1c.	Suggest and explain <b>two</b> social determinants for health that account for the differences in health status between Indigenous and non-Indigenous populations in Australia.
Reas	son 1
Exp	lanation
Reas	son 2
	lanation
	6 marks Total 11 marks
_	stion 2
2a.	Briefly explain why the Commonwealth Government has included Diabetes Mellitus as a National Health Priority Area.
	2 marks
2b.	Outline how a low-GI diet can reduce the risk of developing Type 2 Diabetes Mellitus.
	4 marks

2c.	In the table below, list a direct, indirect and intangible cost for both the individual and
	the community associated with Type 2 Diabetes Mellitus.

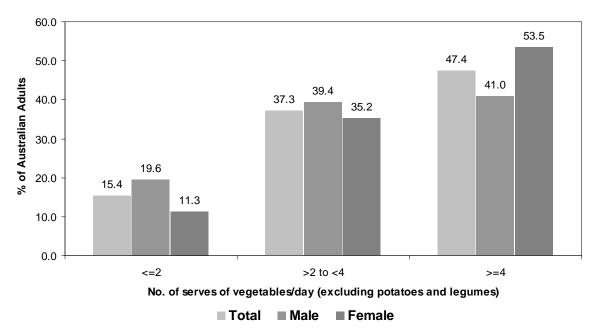
	Direct	Indirect	Intangible
Individual			
Community			

6 marks

2d.	Identify and describe <b>one</b> health promotion program which could be used to reduce the incidence of Type 2 Diabetes Mellitus.
Prog	ram
	ription

4 marks Total 16 marks

**Graph 1:** Distribution of reported vegetable consumption by categories for Australian adults, aged 19 years and over, National Nutrition Survey 1995 food frequency questionnaire.



Source: Australian Food and Nutrition Monitoring Unit (www.health.gov.au)

3a.	The Australian Guide to Healthy Eating recommends at least 5 serves of vegetables daily for adults. Using the data from Graph 1, discuss the vegetable intake of Australian adults in relation to the Australian Guide to Healthy Eating.		
	2 marks		
3b.	Identify <b>two</b> main nutrients which are found in vegetables.		
	1 mark		

3c.	Select <b>one</b> of the nutrients identified in part <b>b</b> . Discuss the role of this nutrient in reducing the burden of disease in Australia.
Nutr	ient:
Role	of nutrient:
	4 marks
3d.	Briefly discuss the effectiveness of nutrition surveys as a tool to measure the health status of a population.
	2 marks
	Total 9 marks

3c.

Table 2. Comparison of indicators between selected nations, 2007

	Under 5	Life	Estimated	Population	Infants with
	Mortality Rate	Expectancy at	HIV	using	low birth
	(per 1,000),	birth (years),	prevalence	improved	weight (%),
	2007	2007	rate (%),	drinking	2007
			2007	water (%),	
				2006	
Australia	9	81	0.2	100	7
Canada	8	81	0.4	100	6
Cambodia	91	59	0.8	65	14
Japan	4	83	-	100	8
Malaysia	11	74	0.5	99	9
Uganda	130	51	5.4	64	14
United Kingdom	6	79	0.2	100	8

4a.	List <b>two</b> ways of identifying a developing country from the table above.
i	
 ii	
	2 marks
4b.	Select <b>one</b> indicator from Table 2 and compare the data related to that indicator for a developed and developing country.
Indi	cator
Con	nparison
	3 marks
4c.	Describe <b>two</b> influences that would account for the differences in the health status for your chosen indicator.
Influ	uence 1
Influ	uence 2

4 marks

4d.	Select <b>one</b> influence listed in 4c. Describe the impact that the influence selected could have on the health of a person living in a developing country.
	2 marks Total 11 marks
Ques	tion 5
5a.	For each level of Government, list <b>one</b> example of a health-related responsibility.
Fede	ral
Loca	l
	3 marks
5b.	There are many values that underpin the Australian healthcare system. Select <b>two</b> of these values and give examples of how they are evident in the Australian healthcare system.
Valu	e 1:
Exan	pple:
	e 2:
Exan	nple:
	4 marks

TURN OVER

Total 7 marks

#### Kar Kulture - VicHealth Partnership Program

An innovative new project is helping young people learn about road safety and crossing cultural barriers while working together to restore a second-hand vehicle.

"This project will make it easier for young people to get on with others who seem very different to themselves, including police officers," says the CEO of the South Eastern Region Migrant Resource Centre, Jenny Semple. "At the same time, they will acquire a better understanding of road safety, and once the car is restored, there is the opportunity to gain valuable driving practice".

The project brings together Australian-born young people with newly-arrived Australian young people, who come from places as varied as African countries, such as Sudan, as well as Burma and Afghanistan. Many of them are refugees who were forced to flee persecution and find safety in Australia.

"After young people arrive in Australia, they often feel very isolated and it's difficult for them to make friends in the wider community – especially if they look or sound very different to us," says Ms Semple. "On the other hand, Australian young people may not fully understand young people from refugee backgrounds, or the reasons why they were forced to flee their home and come here".

As well as improving interactions between the different groups of young people, the project aims to help young people understand road safety, improve their driving skills and gain their L plates and P plates. Once the car is completely restored, it will be used to provide valuable driving practice to participants who are on their L plates. For those participants who do not yet have their L plates, workshops will be conducted to help them pass the exam, before the car is completed...

...The Kar Kulture project is managed by the South Eastern Region Migrant Resource Centre in partnership with Victoria Police and Mission Australia. Local organisations have supported the project, including Handbrake Turn Dandenong, Chisholm Institute of TAFE and RACV. Handbrake Turn and RACV generously donated a second-hand Holden Commodore and Chisholm has provided a secure garage space for the project".

6a.	What is VicHealth?		
			1 mark

(Source: www.vichealth.vic.gov.au)

6b.	The <i>Kar Kulture</i> project is run partly by VicHealth. Suggest <b>two</b> potential positive health outcomes from this project and explain how the outcomes could be achieved by the project.				
Health Outcome 1					
Heal	th Outcome 2				
	6 marks				
6c.	List the <b>five</b> action areas of the Ottawa Charter, and provide an example of how VicHealth reflects each of these.				
Area	1:				
Exar	nple:				
Area	2:				
Exar	nple:				
Area	3:				
Exar	nple:				
Area	4:				
Exar	nple:				
Area	5:				
Exar	nple:				

Total 17 marks

10 marks

7a.	List <b>three</b> functions of the UN in providing global health and sustainable human development.			
i				
III <b>.</b> _				
	3 marks			
7b.	Explain the importance of the UN's Millennium Development Goals.			
	3 marks			
7c.	Select <b>one</b> of the UN's Millennium Development goals and outline a program that could address this goal. Discuss the effectiveness of the initiative in achieving sustainable human development.			
مام؟	cted UN Millennium Goal			
Outl	ine of program			
Effe	ctiveness of program			

8 marks

7d.	List <b>one</b> example of each of the following types of aid: emergency aid, bilateral aid, multilateral aid.				
Em	Emergency aid				
Bila	teral aid				
Mu	tilateral aid				
	3 marks				
7e.	Outline <b>two</b> ways in which the World Health Organisation [WHO] improves global health and/or sustainable human development.				
	2				
	2 marks				

Total 19 Marks

END OF QUESTION AND ANSWER BOOK