Students are awarded one mark for explaining life expectancy:

- An indication of how long a person can expect to live, it is the number of years of life remaining to a person at a particular age if death rates do not change.
Students are awarded two marks for explaining the difference between prevalence and incidence. An example could be:

- Prevalence relates to the total number of people suffering from a condition at a given point in time, whereas incidence relates to the number of new cases of a condition in a given period of time.
QUESTION 3

One mark is awarded for an explanation of illness as a subjective concept and another mark for an appropriate example. An answer worth two marks include:

• Illness is subjective as it is influenced by a range of factors including age, past experiences and pain threshold. For example, a person who has had a relatively positive experience with a disease in the past, may experience a lower level of illness than a person who had a more negative experience with disease.
Students receive two marks for explaining the difference between spiritual and emotional health and wellbeing. For example:

- Spiritual health and wellbeing relates to a positive sense of belonging, meaning and purpose in life and includes values and beliefs that influence the way people, whereas emotional health and wellbeing relates to the ability to recognise, understand and effectively manage emotions and use this knowledge when thinking, feeling and acting.
Students receive one mark for explaining how social health and wellbeing can impact mental health and wellbeing and another mark for explaining how mental health and wellbeing can impact social health and wellbeing. Answer worth two marks could be:

- Those with strong social connections may feel good about themselves which promote self-esteem and mental health and wellbeing. Feeling confident can mean that people are more likely to make friends with new people which promotes social health and wellbeing.
Students receive two marks for explaining the benefit of optimal physical health and wellbeing for individuals and two marks for explaining how it is a benefit for the world for a total of four marks.

For example:

- Optimal physical health and wellbeing would mean that fewer people would need healthcare for disease and injury. Money would therefore be saved on medical appointments, hospital admissions and medication leaving more money for other personal resources such recreation. Optimal physical health and wellbeing would mean that infectious diseases such as measles are less likely to spread between countries. This means that fewer children would die globally.
Students receive one mark for explaining what is meant by equity and two marks for making two links between equity and health and wellbeing. An answer worth three marks is:

• Equity relates to fairness, providing every person with the resources they need to lead a good life and taking unfair circumstances into account, so that those who are disadvantaged receive the most support. If equity is achieved, all people would receive an income that allows them access adequate amounts of food which promotes optimal levels of energy (physical health and wellbeing). Equity means that people would have their needs for health care met which can reduce levels of stress, promoting mental health and wellbeing.
One mark is awarded for each prerequisite that is identified for a total of two marks. Answers are:

- Peace
- Shelter
- Education
- Food
- Income
- A stable eco-system
- Sustainable resources
- Social justice
QUESTION 9

One mark is awarded for explaining what is meant by biological factors and two marks for providing two examples:

• Factors relating to the body that impact on health and wellbeing. Examples include genetics and body weight.
QUESTION 10

a. Students receive one mark for identifying the cause of death that shows the greatest decrease between 1907 and 2015 which is ‘infectious diseases’.

b. Students receive six marks for discussing how the biomedical and social models of health could have contributed to a reduction in death rates from infectious diseases. For example:

The biomedical model includes the study of infectious disease which resulted in a greater understanding of the pathogens responsible for their transmission. This contributed to the development of vaccines and antibiotics which meant that many infectious diseases could be effectively prevented and treated. This assisted in reducing the proportions of deaths from these causes. The social model of health introduced preventative techniques such as educating people on steps they could take to reduce their risk. For example, the incidence of HIV was effectively controlled by running advertising campaigns educating people about how to reduce their risk which assisted in decreasing death rates from infectious diseases. The social model is also reflected by the funding of mass vaccination programs around the country which reduced the risk of transmission and death from infectious diseases.

3 marks for each model. 1 mark for explaining the model and 2 marks for linking it to deduction in death rates.
a. One mark is awarded for each difference in health status that is identified for a total of two marks.

Answers worth one mark include:

☐ Indigenous people suffer from higher rates of kidney disease that the rest of the population.

☐ The life expectancy of Indigenous Australians is about 11 years less than other Australians.

☐ Indigenous Australians experience a higher U5MR than the rest of the population.

☐ Indigenous Australians have higher rates of those assessing their health status as fair or poor than the rest of the population.
b. 2 marks are awarded for each explanation given. Explanations must match the stated category to be awarded marks. Must link back to health status (e.g. life expectancy, mortality, morbidity, burden of disease)

- **Biological** - Indigenous Australians are more likely to be overweight and have high blood glucose levels. This can predispose them to cardiovascular disease, diabetes and certain cancers. This has led to an increased death rate for indigenous people.

- **Environmental** – Given that a higher proportion of Indigenous people live in areas classified as rural and remote, they have less access to health services and hospitals. This could mean that diseases go untreated and check-ups may not occur at all, leading to diseases developing and becoming untreatable.

- **Sociocultural** – lower education rates can lead to higher rates of unemployment. This can lead to poverty which can increase the risk of mental health issues.
c. Students receive one mark for including one action area of the Ottawa Charter and another two marks for explaining how it could be used to promote healthy eating among Indigenous Australians for a total of three marks.

For example:

- The Australian Government could **develop personal skills** by producing a food selection model specifically for Indigenous people. Visual aids could be used to improve understanding among a range of people. The model could outline foods that are low in fat, high in fibre and nutrient dense.
a. Students are awarded one mark for identifying ‘mental and substance use disorders’.

b. Students receive one mark for identifying an appropriate sociocultural factor and another mark for explaining how it relates to an increased risk of mental and substance use disorders. An example could be:

- Social exclusion- social exclusion has a relationship with increased risk of mental illness such as depression and anxiety, as it can lead to feelings of worthlessness, poor self esteem and no confidence. People who are socially excluded are also more likely to be homeless and of low socioeconomic status which further increases the risk of mental illness and particularly substance use, which can be used as an outlet for the stress caused by exclusion.
c. i. Students are awarded two marks for briefly explaining the social model of health. An example could be:

- The social model of health aims to address the broader determinants of health including economic, social and environmental factors. The social model of health focuses on populations as opposed to individuals with illness. It focuses on preventing diseases and illnesses before they occur through health promotion strategies.
c) ii. Students receive one mark for identifying a principle of the social model of health and two marks for describing how the principle could be incorporated to reduce the burden of disease associated with mental disorders. If students did not identify mental disorders in part a, they cannot receive the two marks for the explanation.

An example of a correct answer could be:

- Principle: Empowers individuals and communities
- How it could reduce the burden of disease: Educating individuals on how to manage their condition could reduce the burden of disease associated with mental disorders. It may prevent suicide and therefore YLL. Individuals could learn coping strategies such as maintaining exercise and abstaining from alcohol and drug use.
Students receive two marks for each link they make between the under-consumption of vegetables and health status for a total of four marks. Answers worth two marks include:

• Vegetables are high in fibre which provides feelings of fullness. Not eating enough vegetables can therefore contribute to weight gain and higher incidence of obesity related conditions such as type 2 diabetes.

• Under-consumption of vegetables can mean that the intake of some vitamins is deficient which can increase the incidence of neural tube defects such as spina bifida.
Two marks are awarded for linking each model of health to reduced mortality rates in Australia for a total of four marks. For example:

• The biomedical model can treat many forms of disease such as cancer and cardiovascular disease with medication which can prevent the risk of death. The social model of health can address risk factors such as poor diet and lack of physical activity through education campaigns which can reduce the risk of premature death from conditions such as cardiovascular disease and type 2 diabetes.
a. Students receive one mark for identifying a principle of the social model of health and two marks for describing how the principle is reflected in the Avatar Project. The description must match the principle identified in order to receive full marks. An example of a correct answer could be:

- Empowers individuals and communities – aims to educate students with regards to different subjects such as maths and English. It also allows participants to express themselves in a nonthreatening environment which also empowers them. These skills give them greater opportunities in their daily lives.

b. Students are awarded two marks for discussing how the Avatar project could promote mental health and wellbeing. Students can receive two marks for describing one impact in detail or two impacts in less detail. Examples of one mark answers include:

- Allow students to express themselves which could promote self-esteem.
- Having fun at school could decrease stress levels.
a. Students are awarded one mark for each aspect of Medicare they identify up to a total of two marks. Examples worth one mark include:

- Medicare is Australia’s universal health care insurance scheme.
- Medicare provides free or subsidised treatment for all Australians and permanent residents.
- Medicare covers treatments that are deemed to be ‘clinically necessary’.

b. Students are awarded up to two marks for describing how the Pharmaceutical Benefits Scheme can promote health in Australia. For example:

- The PBS allows Australians to access a range of medications at a subsidised price. This means that more people can afford medicines which can treat illness and promote physical health and wellbeing.
Students are awarded one mark for identifying an incentive and another mark for briefly outlining the scheme. Examples include:

- **Lifetime cover:** Premiums are more expensive for those that don’t take out private health insurance before the age of 30.

- **Private Health Insurance Rebate:** the Federal Government refunds a percentage of the premiums paid for those that qualify.

- **Medicare Levy Surcharge:** Those earning over a certain amount that do not have private health insurance must pay an extra % of their income to Medicare.
Students receive two marks for linking an aspect of the NDIS to equity and two marks for linking it to access for a total of four marks. For example:

• The NDIS is a health insurance scheme that assists people with permanent, serious disabilities to lead an ordinary life. This promotes equity as many eligible people may not be able to work otherwise. Being able to work can mean the individual has a sense of purpose in life which promotes spiritual health and wellbeing. The NDIS provides support for people with disabilities. Those who experience challenges in relation to their disability are the focus, which enables more people to access mainstream services such as health care which can reduce morbidity rates as people can receive treatment for common conditions.
Students receive two marks for linking each area of Nutrition Australia’s work to healthy eating among children for a total of four marks. For example:

- Nutrition Australia promotes National Nutrition Week by sending resources to primary schools. These resources assist schools in educating students about the value of healthy eating, by consuming plenty of vegetables, for example. The Healthy Eating Advisory Service works to assist organisations such as childcare centres in providing healthier food items. It can provide menu assessments which can promote healthy eating among children.
• Students receive one mark for each conclusion that is drawn as to why dietary improvements are difficult to achieve in Australia. Answers worth one mark include:

• People often lack time to prepare healthier meals due to work demands and caring for family members.

• An individual’s personal preferences have a significant impact on what they eat and can make dietary change difficult.
One mark is awarded for each characteristic of high-income countries that is identified for a total of two marks. Examples include:

- High average incomes
- Developed health system
- Developed education system
- Developed infrastructure
- Low birth rate
- High rates of literacy
- A range of industries
- Trade on the global market
Students receive two marks for each aspect of old public health they explain in relation to reducing the U5MR in low- and middle-income countries for a total of four marks. Answers worth two marks include:

- Old public health includes measures put in place relating to the physical environment that have the aim of reducing the transmission of infectious diseases. Interventions such as underground sewerage systems could assist in reducing the under 5 mortality rate in low-and middle-income countries as many deaths are caused by inadequate sanitation.

- Improved housing regulations could assist in reducing the risk of respiratory diseases in low- and middle-income countries. Better ventilation for example, can reduce the amount of smoke in a house which can reduce the risk of lung damage and reduces the risk of premature death for those aged under 5.
Students are only awarded marks here if they choose ‘Areas for action’. If a student identifies ‘Goals’, no marks should be awarded. Examples of responses gaining full marks could be:

1 - Review school curriculum. Many low-income countries do not have a national curriculum that is accessible to all children. Many children in low-income countries do not get formal schooling and may be forced to work from a very young age.

2 - Promote recipes using fruit and vegetables. As many people (especially women) are illiterate in low-income countries, they may not be able to understand what the recipes are saying.
One mark is awarded for the conclusion and another mark for the correct use of data for a total of two marks. An answer worth two marks could be:

- As income group goes up (low to high) health status improves. For example, infant mortality rates are around 5 (per 1000) in high-income countries, 30 in middle-income countries and 50 in low income countries.
a. Students are awarded two marks for linking each factor to differences in HALE between Australia and Zambia for a total of six marks. The following would each receive two marks:

- **Sex discrimination:** Women in Zambia may not have the same access to nutritious foods as men. During pregnancy, this can lead to complications which could increase child mortality which reduces HALE. This is uncommon in Australia.

- **Poverty:** Lower incomes can mean that people in Zambia cannot access health care for common conditions. This can contribute to higher rates of disease and premature death, contributing to a lower HALE than in Australia, where incomes are higher.

- **Sanitation:** Lower levels of sanitation in Zambia may mean that children are more likely to contract infectious diseases such as cholera. This can contribute to higher rates of premature death and a lower HALE than in Australia where sanitation levels are high.
Two marks are awarded for linking global marketing to health and wellbeing and another two marks for linking it to human development for a total of four marks. Examples could be:

- Tobacco companies are increasingly targeting middle-income countries as sales drop in high-income countries. This increases smoking rates and conditions such as lung cancer and cardiovascular disease in middle-income countries.

- Fast food companies are promoting their food in middle-income countries where western foods are often fashionable. These foods are often more expensive and less healthy than traditional diets. This may mean that less money is available for resources like health care and education which can impact the ability of people to lead long healthy lives, in accordance with their needs and interests.
Students receive one mark for explaining social sustainability and two marks for linking it to health and wellbeing in a global context. For example:

- Social sustainability can be defined as creating an equitable society that meets the needs of all citizens and can be maintained indefinitely. Social sustainability means that all people will be able to gain meaningful employment which promotes a sense of purpose and promotes spiritual health and wellbeing around the world.
a. Students must explain the Human Development Index for a total of two marks. An example could be:

- The Human Development Index (HDI) is a system that reflects the level of human development of countries by providing a single statistic that measures the level of social and economic development experienced. Each country is given a score between 0 and 1 that is calculated by taking into account life expectancy, education outcomes and average incomes.

b. Students are awarded one mark for identifying a possible reason for the difference and another mark for outlining the possible difference in the two countries with regards to the reason. Examples worth 2 marks could be:

- People in Qatar may have a lower life expectancy at birth compared to those in Australia.
- People in Australia may have a greater expected years of schooling than those in Qatar.
- People in Qatar may have a lower mean years of schooling compared to those in Australia.
c. Students receive one mark for each strength and limitation of the HDI they outline for a total of four marks. Answers worth one mark include:

- The HDI takes more than just average incomes into account, so gives a more accurate representation of how well people are living.
- It provides an indication of opportunities for education, which reflects access to knowledge.
- The HDI only reflects selected aspects of human development and therefore does not capture the richness and depth of human development that may be experienced.
- The HDI, although moving beyond economic indicators, is still based on averages and, therefore, does not provide an indication of the inequalities that exist within countries.
Students receive two marks for linking each aspect of climate change to an impact on health and wellbeing for a total of four marks. Answers worth two marks include:

- Climate change can contribute to more extreme weather events. This can prevent people from working productively to escape poverty which can contribute to stress.
- Climate change can impact the ability of people to access clean air, safe water and adequate food. This can mean that people die from preventable diseases.
a. Students are awarded one mark for identifying ‘Good health and wellbeing’.

b. Students are awarded up to 2 marks for explaining how the goal can promote human development.

An example could be:

• If children are in good health, they are more likely to attend school. This increases their access to knowledge. It also enhances their choices and capabilities later in life as they will have the skills required to gain meaningful employment.
QUESTION 30

a. Students receive two marks for identifying two leading causes of infant and under 5 mortality in low income countries. Examples include:
- Malaria
- Diarrhoeal disease
- Whooping cough
- Measles

b. Students receive two marks for identifying two leading causes of infant and under 5 mortality in Australia. Examples include:
- SIDS
- Perinatal conditions
- Injuries
- Accident
- Poisoning
- Drowning
- Cancer
c. Two marks are awarded for each factor that is outlined.

E.g:

☐ Lack of access to clean drinking water - This can lead to contracting water borne diseases or causing diarrhoea. Lack of access to water is more common in low- and middle-income countries compared to Australia.

☐ Undernutrition - Many children in low- and middle-income countries do not have access to good nutrition meaning that their immune systems may be weak making them vulnerable to a range of diseases. Australians generally have access to adequate nutrition.
QUESTION 30

d. Two marks are awarded for each priority of the WHO that is identified and a further mark for explaining how each could reduce U5MR in Kenya. For example:

- Universal Health Coverage – this means that even poor children could gain access to health care which can prevent and treat many conditions that cause death among children in Kenya such as malaria therefore decreasing the U5MR.
- International Health Regulations – can assist in controlling the outbreak of disease which can reduce infection rates among those aged under 5 which can reduce the U5MR.
- Increasing access to medical products – this includes essential medicines such as vaccines. If children in Kenya have access to these, many deaths could be prevented which reduces the U5MR.
- Social, economic and environmental determinants – if determinants such as lack of transport for those in rural areas, income and education can be addressed, then children will have greater access to life saving resources such as an adequate food supply, clean water and health care which can reduce premature death and the U5MR.
- Health-related Sustainable Development Goals – Goal number 6 is ‘Clean water and sanitation’. By working towards this goal, many preventable diseases will be controlled thus reducing the U5MR.
- Non-communicable disease – by addressing conditions such as cancer and respiratory diseases, adults will live longer which means they will be able to take better care of their children and provide them with resources such as food and clean water which reduces the risk of disease and decreases the U5MR.
 QUESTION 31

a. Students receive one mark for identifying ‘Department of Foreign Affairs and Trade (DFAT)’.

b. Students receive two marks for making a connection between infrastructure and a reducing in poverty and / or hunger. Statements worth two marks could include:

- Infrastructure such as piped water can assist in growing crops for sale and consumption. This can improve the nutrition status of those in the community.

- Infrastructure such as internet connections can increase the possibilities for education. This can increase the employment prospects for many people and increase their incomes thereby reducing levels of poverty.

c. Students receive three marks for explaining how the Australian Government’s aid program has worked towards the chosen sector. For example: Education – The Australian Government has provided scholarships in Pacific Island countries. These scholarships provide vulnerable populations with text books and tuition. They have allowed groups such as women, to access tertiary education.
One mark is awarded for each priority that is correctly stated and a further mark for outlining one way that the aid program has worked towards it. For example:

- **Effective governance: policies, institutions and functioning economies** – The government has provided technical assistance in Papua New Guinea by assisting in developing a federal budget.

- **Education and health: Australia has provided funds to the Global Fund to Fight AIDS, tuberculosis and malaria.**
a. Examples include:

- World Vision
- Red Cross
- CARE
- Oxfam

b. Students receive two marks for outlining two strengths of non-government organisations in promoting health and wellbeing in low-income countries. Answers worth one mark could be:

- Non-government organisations often work on smaller scale development projects in communities. They often have a specific focus and can reach people in low-income countries who are not reached by other types of aid.
- Non-government organisations often have specialised skills. This can contribute to effective programs and improved health and wellbeing in low-income countries.
c. Students receive three marks for explaining a program, two marks for linking to the promotion of health and wellbeing and two marks for linking to improved human development for a total of seven marks. For example:

- World Vision provided communities in Tanzania with resources to reduce the risk of malaria infection and therefore the under 5 mortality rate. Insecticides and treated mosquito nets were provided to those at risk. Young children were provided with anti-malarial drugs. Community members were educated in their local language about malaria prevention and how to recognise early symptoms of the disease. By reducing rates of malaria, parents may experience lower levels of stress as their children are less likely to die prematurely. As children are less likely to be sick, they are more able to attend school which gives them access to knowledge and promotes their choices and capabilities in relation to future employment.
Students must make reference to three features of effective programs for 3 marks. Each feature must then be applied to a HIV program for a further 3 marks. An example could be:

A HIV education program could be initiated that teaches people about prevention methods such as abstinence and condom use. The program could be translated into local languages which would make it culturally sensitive. Classes could be free of charge making it affordable for those on low incomes. The program could travel to rural and remote areas making it accessible for those who cannot travel to towns and cities.
a. One mark is awarded for identifying an appropriate Sustainable Development Goal. Each of the following is worth one mark:

- Zero hunger
- Good health and wellbeing
- Quality education
- Gender equality
- Clean water and sanitation

Examples of explanations could be:

- Zero hunger – promoting the consumption of iodine reduces the rates of malnutrition.
- Good health and wellbeing – more women are attending health clinics for the birth of their babies which can reduce maternal mortality rates.
- Quality education – Medical understanding and skills were improved through the basic training of 35 village doctors and by refresher and additional training of 94 village doctors.
- Gender equality – a majority of the village doctors that have been trained are female (5 male, 35 female).
- Clean water and sanitation – Fifty-four rural communities worked with water specialists to install water supply systems in villages.
b. Students must relate three aspects of the program to a relevant element of sustainability in order to achieve full marks. Note that students must refer to each element of sustainable programs (appropriateness, affordable and equity) in order to achieve full marks.

Examples include:

- The local people have been involved in the design, location and building of wells which gives them ownership and can increase participation.
- Having to initially pay for the treated salt impacted the use of the program as it was not affordable for those living in poverty. Making it free would increase use.
- Rural communities were targeted to receive wells as their health and wellbeing is often worse than those in cities. This is focusing on the most pressing need of the community.
QUESTION 36

Students receive one mark for outlining a way of taking social action and another mark for linking it to health and wellbeing for a total of two marks. Answers worth two marks include:

☐ Volunteer their time to assist in raising funds or become part of a volunteer program designed to help improve the lives of others and their communities. These funds could be used to provide clean water and sanitation on low-income countries which can decrease the risk of infectious diseases.

☐ Donate money to non-government organisations to help them continue the work they do in low- and middle-income countries. These programs provide resources such as housing and food which can decrease levels of anxiety and promote mental health and wellbeing.
a. Students receive four marks for justifying the use of multilateral aid to address the issue of immunisation. For example:
   • Multilateral aid often has large budgets and can reach more people than other types of aid. This means that the program can be rolled out across large regions. Multilateral aid agencies also have links to many low- and middle-income countries meaning they can access areas that other agencies may not be able to reach.

b. Students receive two marks for linking immunisation (or decreased rates of communicable diseases) to health and wellbeing and two marks for linking it to human development for a total of four marks. For example:
   • By increasing immunisation rates, children are less likely to contract disease which means they will not have to experience the symptoms which promotes physical health and wellbeing in low- and middle-income countries. By not being sick, children have a greater ability to lead a long, productive life in accordance with their needs and interests by becoming educated and being able to work in later life.