Health and Human Development- Unit 3 SAC 1a) Revision

Use in conjunction with powerpoint

* KK3.1.1. concepts of health and wellbeing (including physical, social, emotional, mental and spiritual dimensions) and illness, and the dynamic and subjective nature of these concepts

Define/have an understanding of the following terms
- Health and wellbeing refers to.................................
- Optimal health and wellbeing is the............................
- Disease/Illness
- Health Status- being dynamic and subjective
- Definition of the 5 dimensions of health and wellbeing examples

* KK3.1.2. benefits of optimal health and wellbeing and its importance as a resource individually, nationally and globally

- Provide examples of optimal health and wellbeing and the benefits to the individual, a nation and globally

* KK3.1.3. prerequisites for health as determined by the WHO including peace, shelter, education, food, income, a stable eco-system, sustainable resources, social justice and equity

- For each of the prerequisites, provide a definition/description and examples about how they can impact on health and wellbeing

* KK3.1.4. indicators used to measure and understand health status: incidence, prevalence, morbidity, burden of disease, disability-adjusted life year (DALY), life expectancy, health-adjusted life expectancy (HALE), mortality (including maternal, infant and under 5) and self-assessed health status

- Explain/define the above terms
- What is the difference between Life Expectancy and HALE (comment on quality and quantity)
- Why is infant and under 5 mortality rates a useful guide to health status for a nation?
- What is the difference between incidence and prevalence?
- When answering a trend question, what two things do you need to comment on?
PRACTICE QUESTIONS FOR THE SAC 1 – 33 marks

1. Describe the difference between Hale and Life Expectancy? – 2 marks
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2. How does a physical health and wellbeing concern, for example, breaking a bone, impact on the other dimensions of health? – 2 marks
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3. Health and wellbeing can be dynamic and subjective – explain this? – 2 marks
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4. Explain the difference between prevalence and incidence? – 2 marks
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5. Optimal health and wellbeing is important for us as a resource – Discuss? – 2 marks
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6. Discuss how the WHO prerequisite of health – education – impacts on two other dimensions of health? – 2 marks
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7. Discuss the ways optimal health and wellbeing can act as a resource globally? – 2 marks
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8. Spiritual health and wellbeing is a concept that is very new to the Health and Human Development study design – explain what spiritual health and wellbeing is all about? – 2 marks
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9. What is the difference between self-assessed health status and health status? – 2 marks

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10. Explain why the mortality rates for infants and children are key indicators of the general health and wellbeing of the population? – 2 marks

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11. Mortality rates from colorectal cancer have fallen by around 40% since the 1980’s – what could be the factors that may have contributed to this trend? - 2 marks

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12. Deaths from motor vehicles accidents have fallen by almost 80% since the 1970’s – what could be the factors that may have contributed to this trend? – 2 marks

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13. How could living with cancer affect mental health and wellbeing? – 2 marks

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14. What is one DALY equal to? And how are they calculated? – 2 marks

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15. What is the difference between disease and illness? – 2 marks

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16. Josie has just broken up with her boyfriend of six months and is feeling upset and anxious. During the course of the relationship, Josie had begun to associate with her boyfriend’s friends. She now feels that she has neglected her own friends and that it may be difficult to re-establish links with them. How might this break-up affect Josie’s health and wellbeing? – 3 marks

Sample-
Health and Human Development
Outcome 1 SAC a) – Structured Questions

Question 1 (4 marks)

Health and wellbeing is a subjective concept.

Explain health and wellbeing as a subjective concept.

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Question 2 (6 marks)

Jonah was recently diagnosed with depression.

a. Briefly describe mental health and wellbeing. 1 mark

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b. Use Jonah’s diagnoses to show the interrelationships between mental and physical health and wellbeing. 2 marks

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Sarah has contracted the flu (influenza).

a. Briefly describe spiritual health and wellbeing.  
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b. Use Sarah’s illness to show interrelationships between physical and spiritual health and wellbeing. 2 marks
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**Question 3** (9 marks)

a. Using two examples, explain what is meant by ‘sustainable resources’. 3 marks
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b. Besides peace and sustainable resources, identify two prerequisites for health as identified by the World Health Organization and explain how each can contribute to improved health and wellbeing. 6 marks
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Question 4 (6 marks)

a. Explain why health and wellbeing is important for individuals. 3 marks

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b. Explain why health and wellbeing is important from a national (or country) perspective. 3 marks

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b. Using data, briefly describe the difference in the proportion of Indigenous Australians assessing their health status as very good or excellent.  
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Extension questions

1. Describe the difference between the measures ‘life expectancy’ and ‘health-adjusted life expectancy’. In your answer, state which term is a more accurate measure of a population’s health status and explain why.

2. Explain why decreasing mortality rates and increasing life expectancy do not necessarily equate to the optimal health and wellbeing of a population.

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EXAMINATION PREPARATION QUESTIONS

Table 1.1 Australia’s performance against OECD average, selected health indicators

<table>
<thead>
<tr>
<th>Indicator</th>
<th>OECD average</th>
<th>Australia</th>
<th>Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Life expectancy at birth (males)</td>
<td>77.8</td>
<td>80.1</td>
<td></td>
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<tr>
<td>Life expectancy at birth (females)</td>
<td>83.1</td>
<td>84.3</td>
<td></td>
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<tr>
<td>Coronary heart disease mortality (per 100000)</td>
<td>117.4</td>
<td>98.2</td>
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<tr>
<td>Cancer mortality (per 100000)</td>
<td>205.6</td>
<td>197.7</td>
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<tr>
<td>Suicide rate (per 100000)</td>
<td>12.0</td>
<td>10.1</td>
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<tr>
<td>Infant mortality rate (per 1000 live births)</td>
<td>3.8</td>
<td>3.1</td>
<td></td>
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<tr>
<td>Low birthweight babies</td>
<td>6.6</td>
<td>6.2</td>
<td></td>
</tr>
<tr>
<td>Daily smoking in adults (% of people, aged 15 and over)</td>
<td>19.7</td>
<td>12.8</td>
<td></td>
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<tr>
<td>Alcohol consumption (litres per person, aged 15 and over)</td>
<td>8.8</td>
<td>9.9</td>
<td></td>
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<tr>
<td>Obesity (% aged 15 and over, combination of self-reported and measured data)</td>
<td>19.0</td>
<td>28.3</td>
<td></td>
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<tr>
<td>Overweight/obesity among children (boys)</td>
<td>24.3</td>
<td>22.0</td>
<td></td>
</tr>
<tr>
<td>Overweight/obesity among children (girls)</td>
<td>22.1</td>
<td>24.0</td>
<td></td>
</tr>
</tbody>
</table>

Source: Australia’s Health, 2016

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a. Identify a health status indicator evident in Table 1.1 and explain what it is measuring. (1 mark)

b. For which health indicators does Australia rate better than other OECD countries? (3 marks)

c. Identify and explain two prerequisites for health that could have contributed to Australia’s higher ratings for the health indicators suggested in part b. (4 marks)