

Through the study of VCE Health and Human Development, students investigate health and wellbeing, and human development in national and global contexts.

Unit 3: Australia’s health in a globalised world

This unit explores health and wellbeing and illness as global, dynamic and subjective concepts. Benefits of optimal health and wellbeing and its importance as an individual and a collective resource are examined. The fundamental conditions required for health improvement are used as the basis to analysis and evaluate the variations in health status of Australians. Health promotion and improvements in population health over time are used to look at various public health approaches and the relationship between different models of health.

Unit 4: Global Health and Human Development

This unit examines health and wellbeing, and human development around the world and the factors that contribute to health inequalities between and within countries over time are analysed. The concepts of sustainability and human development are a focus and the implications of increased globalisation and worldwide trends are examined. This unit also looks at global action to improve health and wellbeing and human development, focusing on the work of the United Nations’ (specifically the Sustainable Development Goals (SDGs)), the World Health Organization (WHO), non-government organisations and the Australian Government. The effectiveness of health initiatives and programs in a global context and individuals’ capacity to take action are considered.

Assessment

The primary assessment tasks are the School Assessed Coursework tasks (SACs) and the examination.

SAC weighting:

Unit 3	Outcome	Number of Tasks	Contribution	Unit 4	Outcome	Number of Tasks	Contribution
	1	2 x 25%	50%		1	2 x 25%	50%
	2	2 x 25%	50%		2	2 x 25%	50%
Total			100%	Total			100%

Contribution of SACs and Exam to Study Score:

Assessment Task	Contribution
Unit 3 SACs	25%
Unit 4 SACs	25%
Examination	50%
Total	100%

Holiday Homework (please have this ready to show on the **first day back** of 2018):

1. **ALL** sections of the transition Booklet completed
2. Read spreads 1.1 to 1.7 from your text book

How to Pass Unit 3 – Health and Human Development

In order to pass Health and Human Development (Unit 3), you must achieve the set outcomes:

Outcome 1 - Understanding health and wellbeing

While the major focus is on the health of Australians, this area of study also emphasises that Australia's health is not isolated from the rest of the world. Students inquire into the WHO's prerequisites for health and wellbeing and reflect on both the universality of public health goals and the increasing influence of global conditions on Australians. Students develop their understanding of the indicators used to measure and evaluate health status, and the factors that contribute to variations between population groups in Australia.

Outcome 2 - Promoting health and wellbeing

This area of study looks at different approaches to public health over time, with an emphasis on changes and strategies that have succeeded in improving health and wellbeing. Students examine the progression of public health in Australia since 1900, noting global changes and influences such as the Ottawa Charter for Health Promotion and the general transition of focus from the health and wellbeing of individuals to that of populations. Students investigate the Australian health system and its role in promoting health and wellbeing. They conduct a detailed study on a successful health promotion campaign or program, and inquire into priorities for health improvements in Australia.

You must show that you have achieved these outcomes by passing the following:

Primary indicators:

- SAC 1 Part A and B - 50 marks (minimum 30% grade)
- SAC 2 Part A and B - 50 marks (minimum 30% grade)

Secondary Indicators:

- Classroom participation and completion of class work
- Homework completion
- Maintenance of class notes/handouts

For students who have studied Units 1 and 2

Similarities

- The measurements of health status, e.g. life expectancy, health adjusted life expectancy (HALE), disability adjusted life years (DALY), prevalence and incidence are widely used throughout Units 3 and 4.
- Physical, social and mental health and wellbeing are still a focus.

Differences

- 'Health and wellbeing' replaces the concept of 'health'.
- There are two more dimensions of health and wellbeing in Unit 3 and 4 (emotional and spiritual).
- Infant and maternal mortality and self-assessed health status are added as health status indicators.
- 'Human development' takes on a different interpretation. In Units 1 and 2 'human development' related to 'individual human development', i.e. of a person and through the various stages of their lifespan. In Unit 4, human development is at a societal and global level and is never about individual human development.

How to Succeed In This Study

VCE Health and Human Development – beware of old material

Health and Human Development are dynamic concepts, meaning that they are constantly changing and evolving. As a result, aspects of the course material covered changes on a yearly basis. To ensure you are studying the correct concepts, use the new Jacaranda textbook (5th Ed) as well as books that are recommended by your teacher **only**. If in doubt, ask your teacher if a book or resource is relevant to the course before using it.

Resources

Textbook: Jacaranda, Key Concepts in Health and Human Development, 5th Edition.

General Tips

- Start out organised and stay organised – have a separate folder for each of the six SACs and use tabs.
- Complete separate revision notes for each SAC.
- Constantly compare your notes with the **Key Knowledge and Key Skills Checklist** (page 4-5) to make sure you have covered every dot point – they are all examinable.
- Keep up to date with your work.
- Separate and thorough Exam preparation is essential. Start this process early.

Key Knowledge and Key Skills Checklist - Unit 3

Unit 3 Outcome 1 – SAC 1

KEY KNOWLEDGE	✓	KEY SKILLS	✓
<ul style="list-style-type: none"> concepts of health and wellbeing (including physical, social, emotional, mental and spiritual dimensions) and illness, and the dynamic and subjective nature of these concepts 		<ul style="list-style-type: none"> explain the dynamic and subjective nature of the concepts of health and wellbeing and illness describe interrelationships between dimensions of health and wellbeing 	
<ul style="list-style-type: none"> benefits of optimal health and wellbeing and its importance as a resource individually, nationally and globally 		<ul style="list-style-type: none"> explain the individual and collective importance of health and wellbeing as a resource describe global benefits of the pursuit of optimal health and wellbeing 	
<ul style="list-style-type: none"> prerequisites for health as determined by the WHO including peace, shelter, education, food, income, a stable eco-system, sustainable resources, social justice and equity 		<ul style="list-style-type: none"> identify the WHO's prerequisites for health and explain their links to improved health outcomes 	
<ul style="list-style-type: none"> 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 		<ul style="list-style-type: none"> describe and apply indicators used to measure health status use data to describe and evaluate the health status of Australians analyse patterns in morbidity and mortality in Australia over time 	

Unit 3 Outcome 1 – SAC 2

KEY KNOWLEDGE	✓	KEY SKILLS	✓
<ul style="list-style-type: none"> health status of Australians and the biological, sociocultural and environmental factors that contribute to variations between population groups including: <ul style="list-style-type: none"> – males and females – Indigenous and non-Indigenous – high and low socioeconomic status – those living within and outside of Australia's major cities 		<ul style="list-style-type: none"> analyse health information to explain factors that contribute to variations in health status between population groups 	
<ul style="list-style-type: none"> the contribution to Australia's health status and burden of disease of smoking, alcohol, high body mass index, and dietary risks (under-consumption of vegetables, fruit and dairy foods; high intake of fat, salt and sugar; low intake of fibre and iron). 			

Unit 3 Outcome 2 – SAC 3

KEY KNOWLEDGE	✓	KEY SKILLS	✓
<ul style="list-style-type: none"> • improvements in Australia’s health status since 1900 and reasons for these improvements, focusing on policy and practice relating to: <ul style="list-style-type: none"> – ‘old’ public health – the biomedical approach to health and improvements in medical technology – development of ‘new’ public health including the social model of health and Ottawa Charter for Health Promotion – the relationship between biomedical and social models of health 		<ul style="list-style-type: none"> • analyse data that show improvements in health over time and draw conclusions about reasons for improvements • analyse the strengths and limitations of biomedical and social models of health in bringing about improvements in health status 	
<ul style="list-style-type: none"> • Australia’s health system, including Medicare, private health insurance, the Pharmaceutical Benefits Scheme and the National Disability Insurance Scheme, and its role in promoting health in relation to funding, sustainability, access and equity 		<ul style="list-style-type: none"> • analyse the role of Medicare, private health insurance, the Pharmaceutical Benefits Scheme and the National Disability Insurance Scheme in promoting Australia’s health 	
<ul style="list-style-type: none"> • the role of health promotion in improving population health, focusing on one of: smoking, road safety, or skin cancer, including: <ul style="list-style-type: none"> – why it was/is targeted – effectiveness of the health promotion in improving population health – how the health promotion reflects the action areas of the Ottawa Charter for Health Promotion 		<ul style="list-style-type: none"> • apply the action areas of the Ottawa Charter for Health Promotion to a range of data and case studies 	
<ul style="list-style-type: none"> • initiatives introduced to bring about improvements in Indigenous health and wellbeing in Australia and how they reflect the action areas of the Ottawa Charter for Health Promotion 		<ul style="list-style-type: none"> • evaluate initiatives in terms of their capacity to improve Indigenous health and wellbeing 	
<ul style="list-style-type: none"> • initiatives to promote healthy eating in Australia including Australian Dietary Guidelines and the work of Nutrition Australia, and the challenges in bringing about dietary change. 		<ul style="list-style-type: none"> • draw conclusions as to why dietary improvements are difficult to achieve in Australia. 	

1.2 The concepts of health and wellbeing and illness

1. Health and wellbeing relates to _____

2. What does it mean when health and wellbeing is said to be 'dynamic'? _____

3. What does it mean when health and wellbeing is said to be 'subjective'? _____

4. Are disease and illness the same thing? Explain. _____

5. Complete the case study (questions 1-3) relating to Indigenous perspectives of health and wellbeing on page 8.

1.3 The dimensions of health and wellbeing

6. Identify the five dimensions of health and wellbeing. Use the first letter of each one to come up with an acronym or silly sentence to assist in remembering these concepts.

Silly sentence / Acronym:

7. Briefly explain each of the dimensions of health and wellbeing.

Physical health and wellbeing: _____

Social health and wellbeing: _____

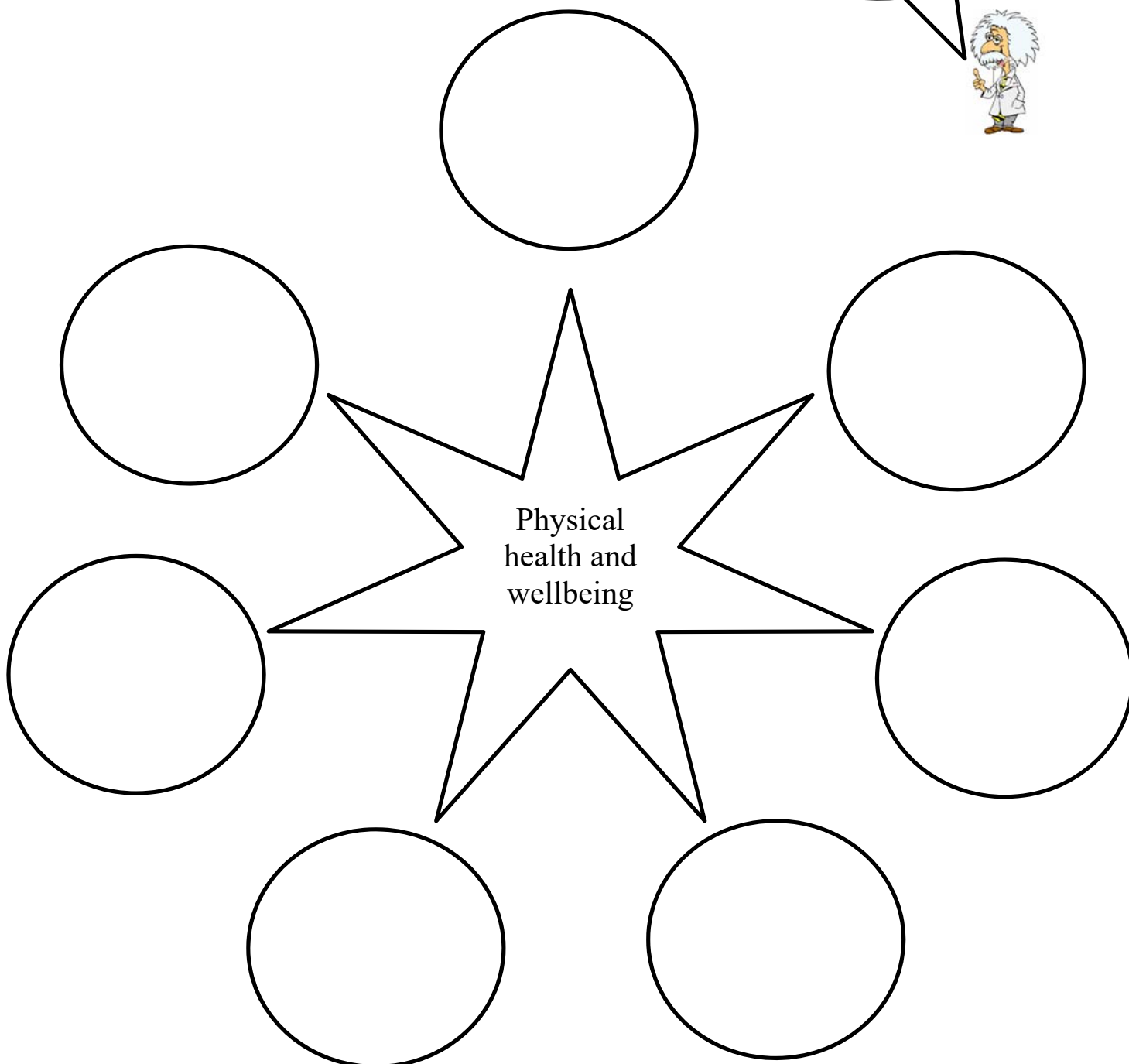
Emotional health and wellbeing: _____

Mental health and wellbeing: _____

Spiritual health and wellbeing: _____

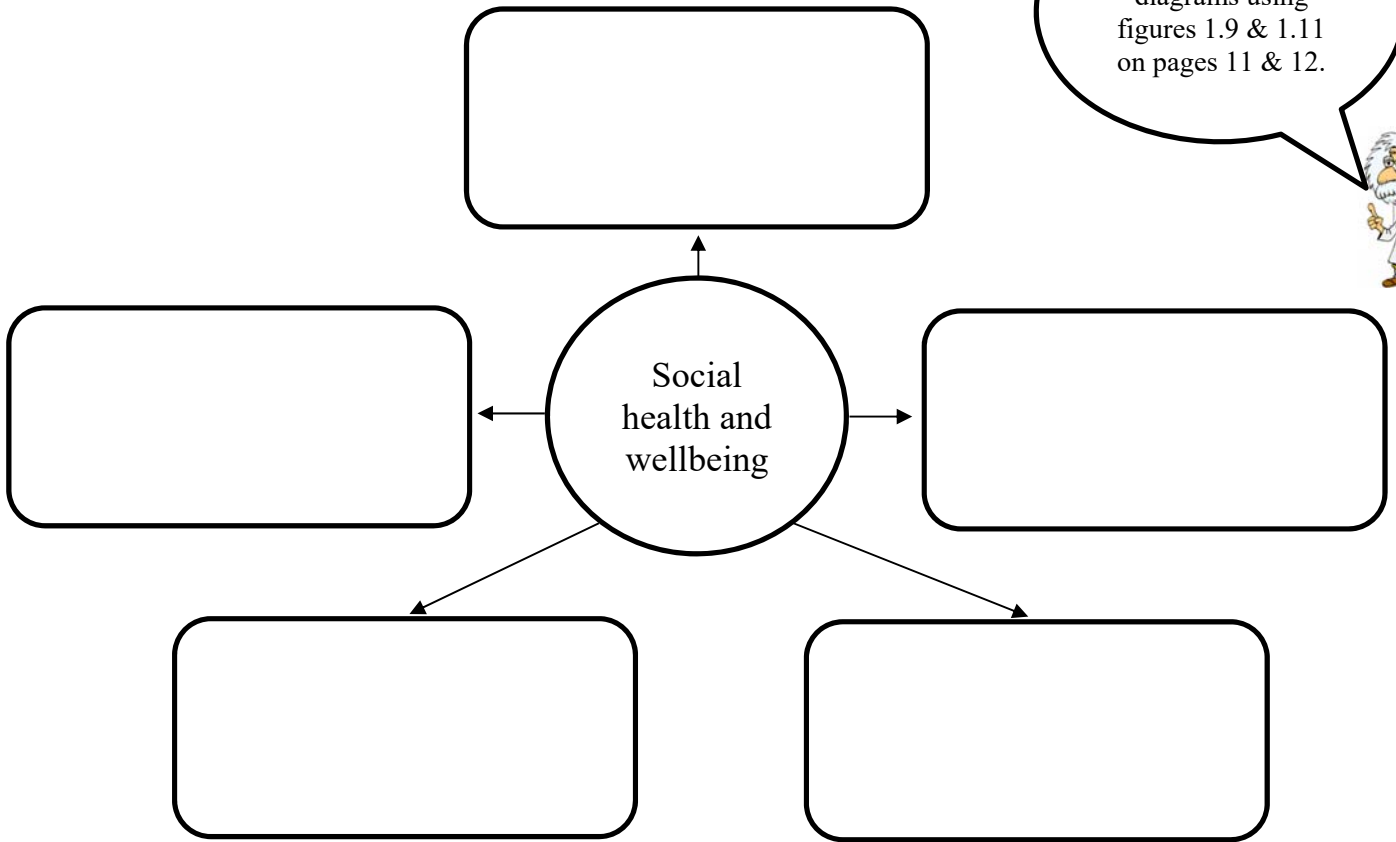
Examples relating to physical health and wellbeing include:

Complete this diagram using figure 1.8 on page 10

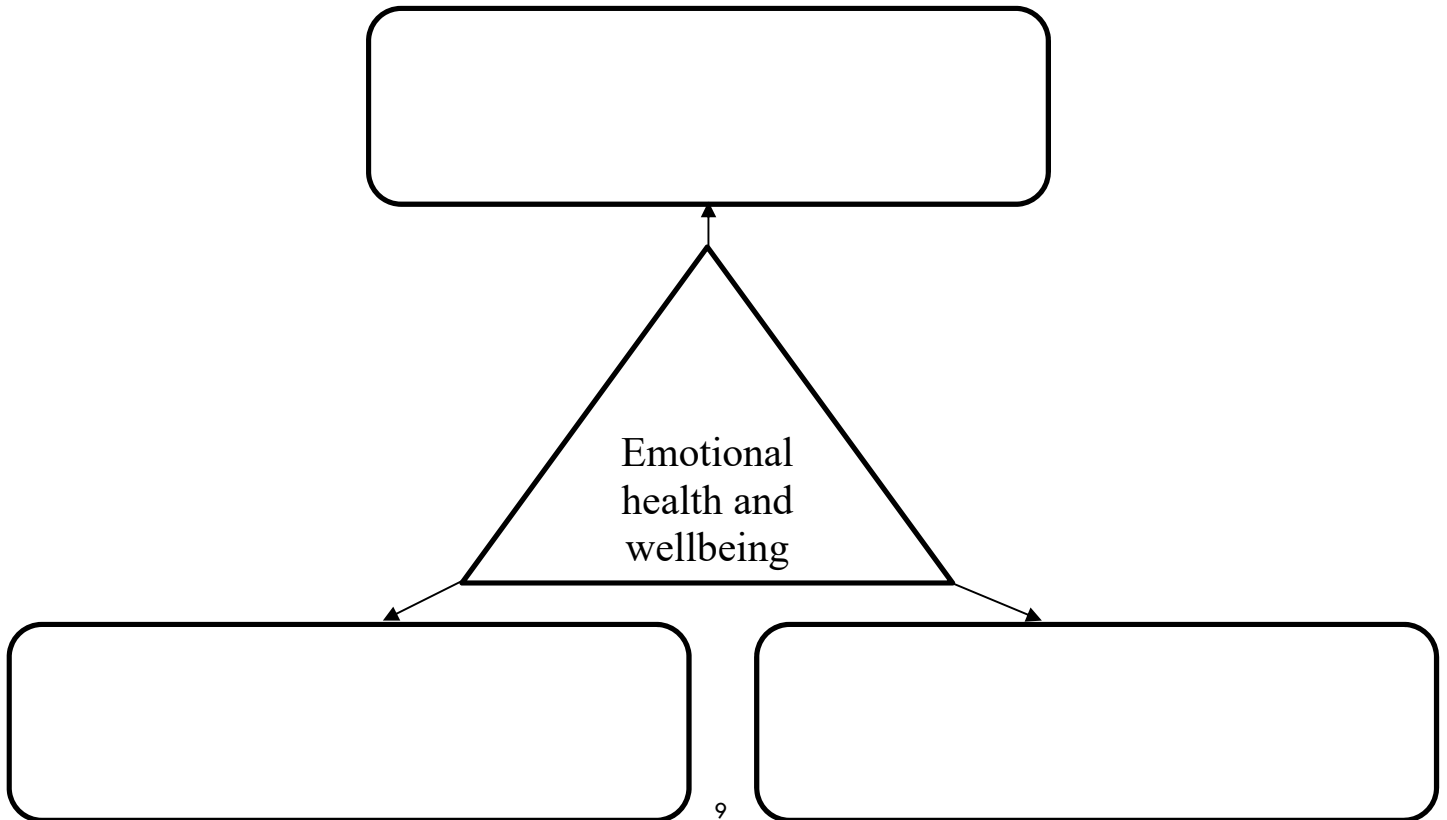


Examples relating to social health and wellbeing include:

Complete these diagrams using figures 1.9 & 1.11 on pages 11 & 12.



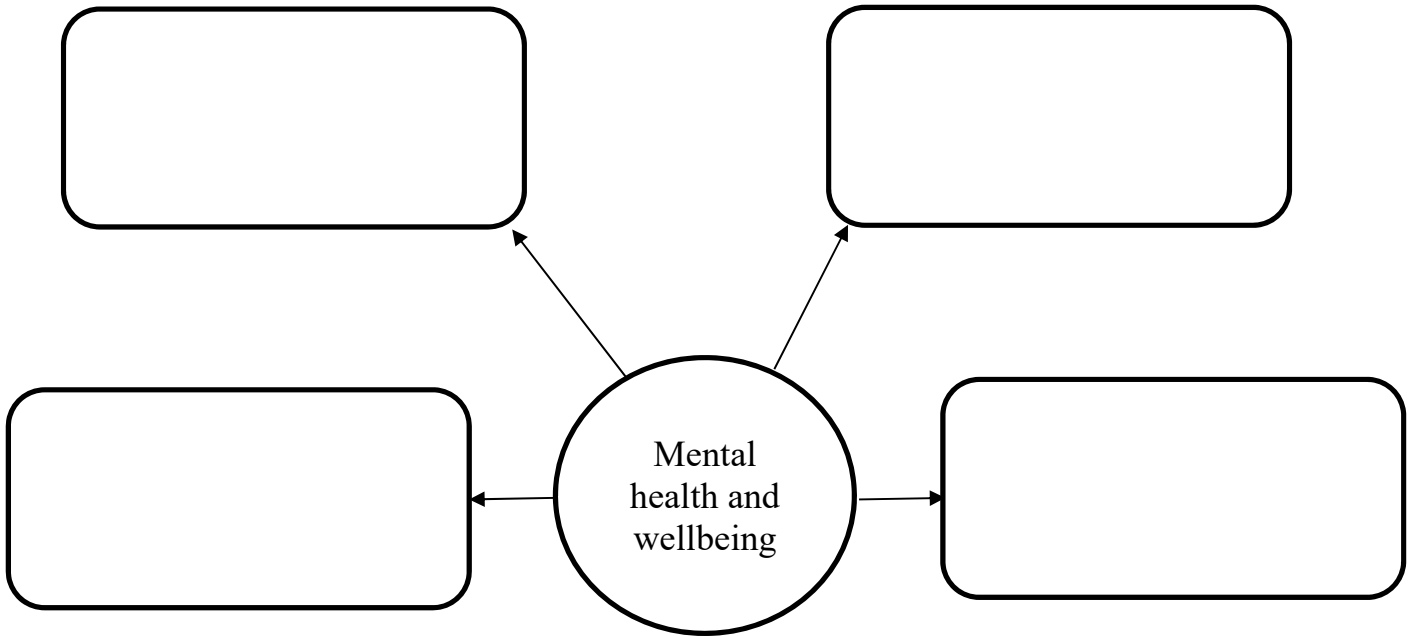
Examples relating to emotional health and wellbeing include:





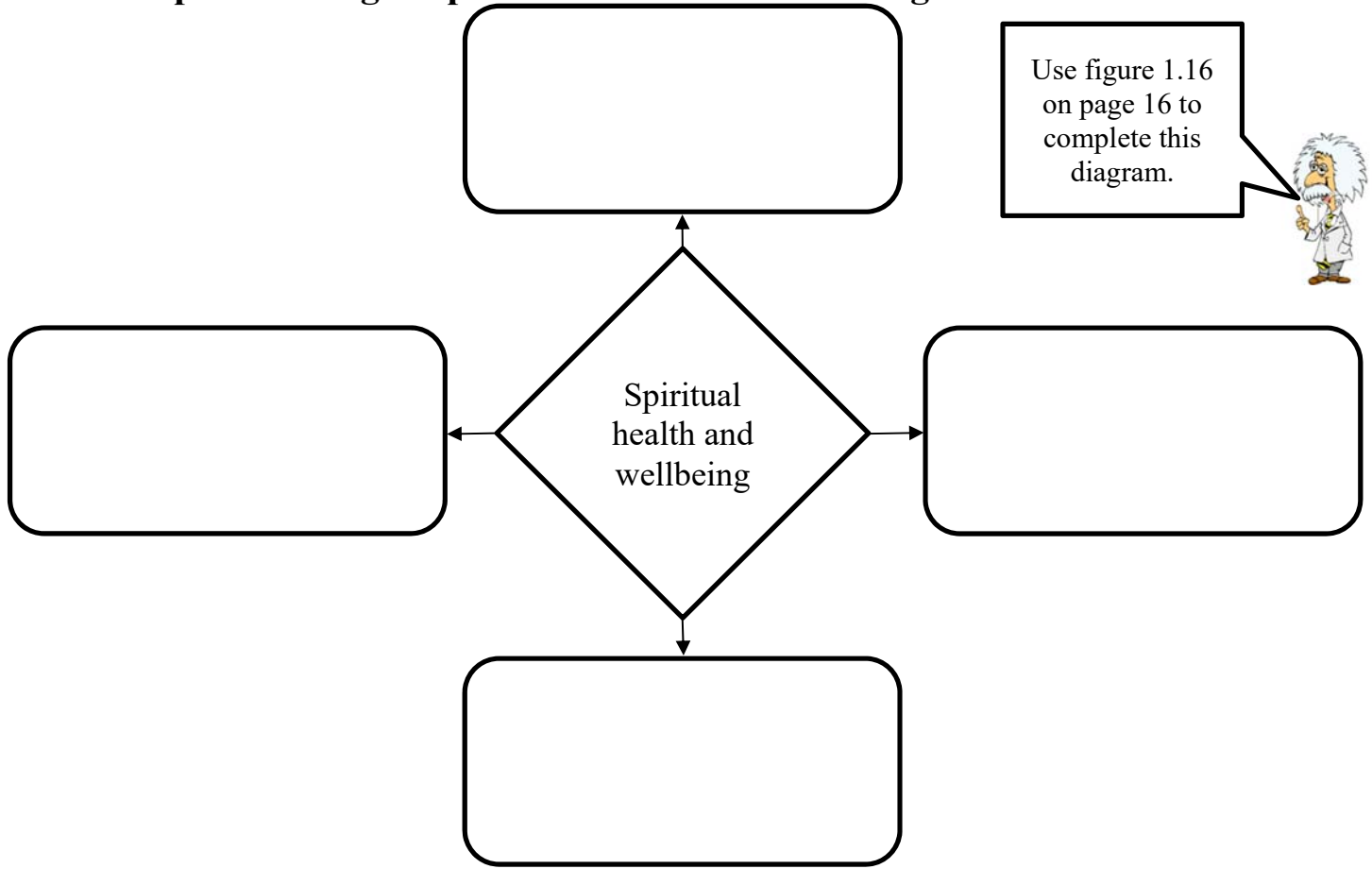
Use figure 1.14 on page 14 to complete this concept map

Examples relating to mental health and wellbeing include:



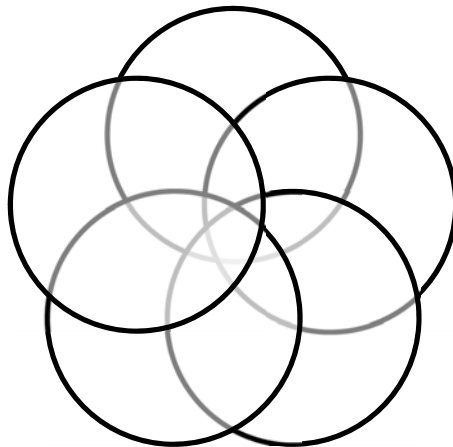
8. Briefly explain the difference between emotional and mental health and wellbeing.

Examples relating to spiritual health and wellbeing include:



1.4 Interrelationships between the five dimensions

9. As shown in the diagram below (which you need to fill in), the five dimensions of health and wellbeing are interrelated which means _____
- _____



10. Fill in the following table, illustrating how each dimension in the top row could impact each dimension in the first column:

	P_____	So_____	E_____	M_____	Sp_____
P_____					
So_____	Someone who is sick with the flu (physical) may not be able to attend social functions with their friends (social).				
E_____					
M_____					
Sp_____					

11. Optimal health and wellbeing refers to _____

12. Match the following examples of health characteristics with the correct dimension of health (by placing a tick in the correct column).

Example of health characteristic	Physical	Social	Emotional	Mental	Spiritual
Being free from disease					
Feeling stress					
A sense of belonging to a community group					
Getting enough sleep					
Communicating positively with others					
Recognising the difference between embarrassment and anxiety					
Feeling positive about succeeding in year 12					
Having an ideal body weight					
Having a good level of fitness					
Having productive relationships with family members					
Getting along with work colleagues					
Having a sense of purpose in life					
Grieving the death of a close friend					
Having positive self esteem					
Experiencing sadness at appropriate times					
Having a strong immune system					
Having a supportive family or network of friends					
Having adequate energy levels					

Complete the case study on page 20 (Qs 1 – 3)
and complete Apply Your Knowledge Question 4
(choose two of the available options)

1.5 Optimal health and wellbeing as a resource

13. Briefly outline four ways that optimal health and wellbeing acts as a resource for individuals.

- _____

- _____

- _____

- _____

14. Briefly outline four ways that optimal health and wellbeing acts as a resource nationally.

- _____

- _____

- _____

- _____

15. a. What is meant by 'communicable diseases'?

b. Explain why communicable diseases are of particular concern on a global scale.

16. Briefly outline four ways that optimal health and wellbeing acts as a resource globally.

- _____

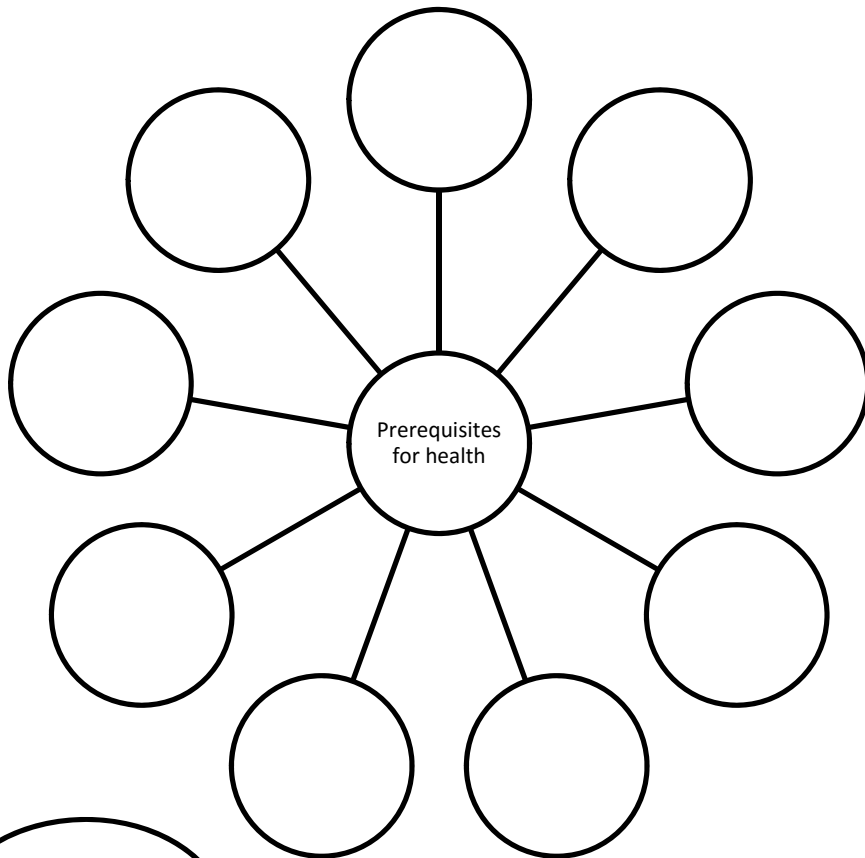
- _____

- _____

- _____

17. Complete questions 2 – 4 page 25.

1.6 & 1.7 Prerequisites for health – part 1 + 2



Use figure 1.25 on page 26 to complete this diagram

18. a. What is meant by 'peace'?

b. Explain how peace can promote health and wellbeing.

19. What is meant by 'shelter'?

b. Explain three ways that shelter can promote health and wellbeing.

20. Explain how generating an income can assist governments in promoting health and wellbeing.

21. Explain how having an adequate income can promote the health and wellbeing of individuals.

22. Briefly explain the following terms:

a. ecosystem

b. sustainability

c. social justice

d. equity

23. Read the case study on page 34-35 and complete questions 1-3.

24. Explain how a stable ecosystem may promote three dimensions of health and wellbeing.

25. Read through and complete all Key Skills - pages 36-40, Questions 1-14.

26. Complete the Exam preparation question 1-4 page 42.

Practice SAC Questions

Question 1 (2 marks)

Health and wellbeing is a subjective concept.

Explain health and wellbeing as a subjective concept.

Question 2 (3 marks)

Sarah has contracted the flu (influenza).

a. Briefly describe spiritual health and wellbeing.

1 mark

b. Use Sarah's illness to show interrelationships between physical and spiritual health and wellbeing. 2 marks

Question 3 (9 marks)

a. Using two examples, explain what is meant by 'sustainable resources'.

3 marks

- b. Besides 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

Question 4 (6 marks)

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

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

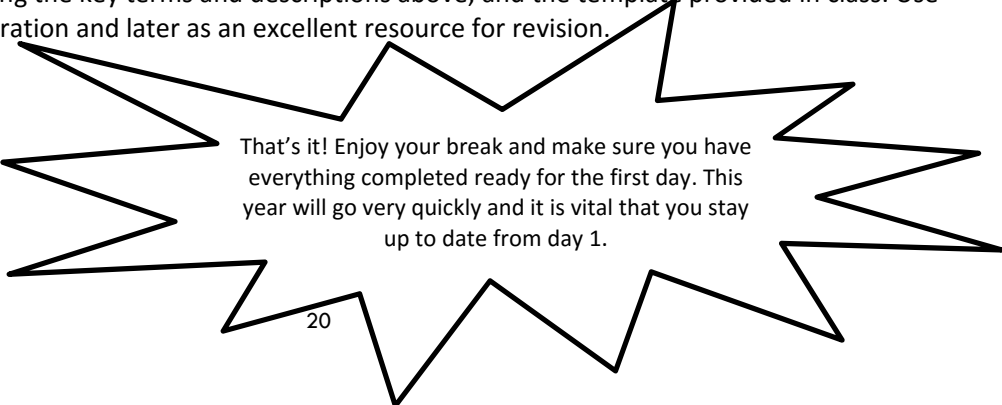
Measuring health status

The terms below are health status indicators. Health status indicators are standard statistics that are used to measure and compare health status.

You will need to be able to describe and apply these indicators, so having an understanding of what they mean is essential.

Key term	Description
Incidence	The number of new cases of a condition during a given period of time.
Prevalence	'The number or proportion of cases of a particular disease or condition present in a population at a given time.' (AIHW, 2008)
Morbidity	Refers to ill-health in an individual and the levels of ill-health in a population or group.
Burden of Disease	A measure of the impact of diseases and injuries, specifically it measures the gap between current health status and an ideal situation where everyone lives to an old age free of disease and disability. Burden of disease is measured in a unit called the DALY.
Disability Adjusted Life Years (DALYs)	A measure of burden of disease, one DALY equals one year of healthy life lost due to premature death and time lived with illness, disease or injury.
years of life lost (YLL)	a measure of how many years of expected life are lost due to premature death
years lost due to disability (YLD)	a measure of how many healthy years of life are lost due to illness, injury or disability
Life expectancy	'An indication of how long a person can expect live, it is the number of years of life remaining to a person at a particular age if death rates do not change.'
Health Adjusted Life Expectancy (HALE)	A measure of burden of disease based on life expectancy at birth, but including an adjustment for time spent in poor health. It is the number of years in full health that a person can expect to live, based on current rates of ill health and mortality.
Mortality	Refers to death, often at a population level.
Maternal mortality	death of a mother during pregnancy, childbirth or within six weeks of delivery.
Maternal mortality ratio	the number of mothers who die as a result of pregnancy or childbirth per 100 000 live births.
Infant mortality	the death of a child between birth and their first birthday.
Infant mortality rate	the rate of deaths of infants between birth and their first birthday, usually expressed per 1000 live births.
Under 5 mortality	The death of a child under 5 years of age.
Under 5 mortality rate	The rate of deaths occurring in children under 5 years of age per 1000 live births.
Self-assessed health status	a measure based on a person's own opinion about how they feel about their health and wellbeing, their state of mind and their life in general. It is commonly sourced from population surveys.

27. Create a set of cue cards using the key terms and descriptions above, and the template provided in class. Use these for a game of concentration and later as an excellent resource for revision.



That's it! Enjoy your break and make sure you have everything completed ready for the first day. This year will go very quickly and it is vital that you stay up to date from day 1.