Ascham School

2019
Higher School Certificate
Trial Examination

Student Number | | | | | | | | | |

Personal Development, Health and Physical Education

General Instructions

- Reading time – 5 minutes
- Working time – 3 hours
- Write using black or blue pen
- Write your student number at the top of every page
- Use a separate answer booklet for each part of each question in Section II eg. 29a in one booklet, 29b in a separate booklet

Total marks – 100

Section I – Pages 3- 18

60 marks

This section has two parts, Part A and Part B

Part A – 20 marks

- Attempt Questions 1–20
- Allow about 40 minutes for this part

Part B – 40 marks

- Attempt Questions 21–28
- Allow about 1 hour and 10 minutes for this part

Section II – Page 19

40 marks

- Attempt TWO questions from Questions 29–33
- Allow about 1 hour and 10 minutes for this section

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Section I

60 marks

Part A- 20 marks
Attempt Questions 1-20
Allow about 40 minutes for this part

Use the multiple choice answer sheet for Questions 1-20

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1. Which of the following conditions could be caused by atherosclerosis in the blood vessels of the brain?

    (A) Cardiac arrest

    (B) Peripheral vascular disease

    (C) Stroke

    (D) Angina

2. Which energy system has the by-products of lactic acid and pyruvic acid?

    (A) Lactic Acid

    (B) ATP-PC

    (C) Aerobic

    (D) Alactacid

3. Which principle of training prepares the athlete physically and psychologically for a training session?

    (A) Cool down

    (B) Specificity

    (C) Warm up

    (D) Variety

4. How are carers impacted by a growing and ageing population?
    (A) Less demand for homecare services
    (B) Increased health status of the carer
    (C) Increased vacancies at aged care facilities
    (D) Increased paid work opportunities for carers

5. When an athlete suffers tissue damage during a game, which recovery strategy would be most appropriate?
    (A) Physiological
    (B) Hydrotherapy
    (C) Cryotherapy
    (D) Psychological

6. The introduction of outdoor gyms in parks best illustrates which action area of the Ottawa Charter?
    (A) Creating supportive environments
    (B) Building healthy public policy
    (C) Strengthening community action
    (D) Reorienting health services

7. How does the government try to provide incentives for people to take up private health insurance?

   (A) Long-life incentive. 3% over the age of 30

   (B) Lifetime health-care incentive. 5% loading from the age of 45

   (C) Bulk billing patients

   (D) Lifetime health-care incentive. 2% each year over the age of 31

8. People living in rural and remote areas may suffer more adverse health outcomes than those living in urban areas.

   Which determinant does this represent?

   (A) Socioeconomic

   (B) Environmental

   (C) Sociocultural

   (D) Individual

9. Which factors are best used by governments to identify priority issues for Australia's health?

   (A) Mortality rates, cost to the individual

   (B) Social justice principles, life expectancy

   (C) Priority population groups, social justice principles

   (D) Priority population groups, incidence of the condition

10. What is an advantage of having the Pharmaceutical Benefits Scheme (PBS)?

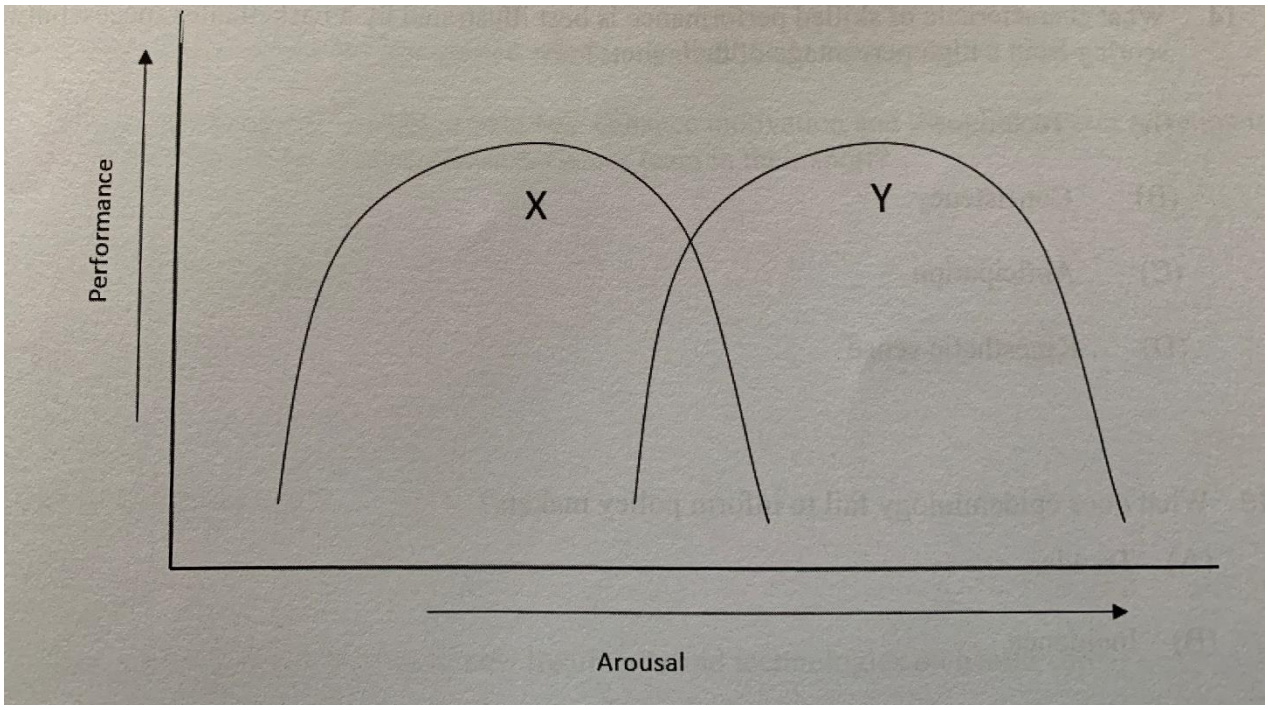
   (A) All medication is subsidised for all Australians

   (B) The cost of medication to individuals is subsidised by the government

   (C) Greater access to specialists and ancillary services

   (D) Overseas travellers are able to access the Australian health care system free of charge

11. Observe the following diagram.



What is the best explanation for the difference between X and Y?

(A) Motivation to reach Y requires more extrinsic reinforcement.

(B) X is likely to be a beginner and Y an elite athlete in the same event.

(C) X requires gross motor skills where Y requires fine motor skills.

(D) Y requires gross motor skills where X requires fine motor skills.

12. Which of the following contains both a risk factor and protective behaviour for breast cancer?

(A) A diet high in fat, not breast feeding your child

(B) A balanced diet, regular breast self-examination

(C) Having a family history of breast cancer, regular mammograms

(D) Having a family history of breast cancer, a sedentary lifestyle

13. What characteristic of skilled performance is most essential when returning a serve in tennis?

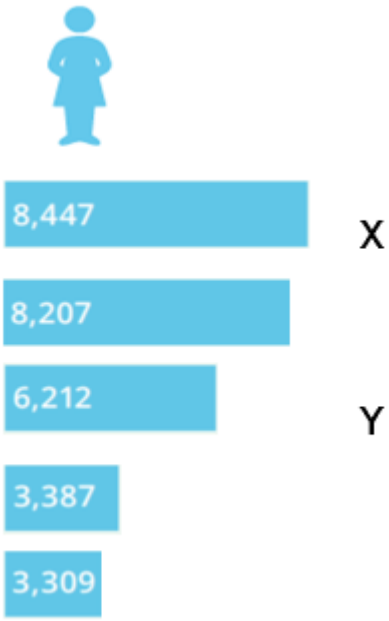
(A) Consistency

(B) Anticipation

(C) Speed

(D) Technique

14. The below graph shows the leading causes of death for females in 2016



Adapted from Source: AIHW National Mortality Database (Table S3.1).

What are the causes labelled X and Y?

	X	Y
(A)	Coronary Heart disease	Lung Cancer
(B)	Dementia and Alzheimer disease	Cerebrovascular disease
(C)	Coronary Heart disease	Cerebrovascular disease
(D)	Dementia and Alzheimer disease	Lung Cancer

15. During which stage of skill acquisition are errors detected and corrected by the athlete?

(A) Cognitive

(B) Automatic

(C) Associative

(D) Autonomous

16. The table shows scores achieved by an athlete undertaking a series of tests to assess the same performance outcome. Each test was administered five times under varying conditions.

	Test 1	*Test 2*	*Test 3*	*Test 4*
Scores	8, 9, 10, 9, 8	10, 10, 10, 10, 9	6, 4, 6, 8,10	11, 10, 11, 0, 8
Total	44	48	34	40

Test 2 is:

(A) Reliable but not valid

(B) Valid but not reliable

(C) Valid and reliable

(D) Neither valid nor reliable

17. Which of the following vitamins are fat soluble?

(A) Vitamin A, Vitamin D, Vitamin E and Vitamin K

(B) B – Complex, Vitamin C

(C) B – Complex

(D) Vitamin B, Vitamin C, Vitamin E and Vitamin K

18. A wheelchair athlete has just gained selection in their State representative team.

Which psychological strategy would best enhance motivation and direction to gain selection in the 2022 Paralympic Commonwealth Games team in their sport?

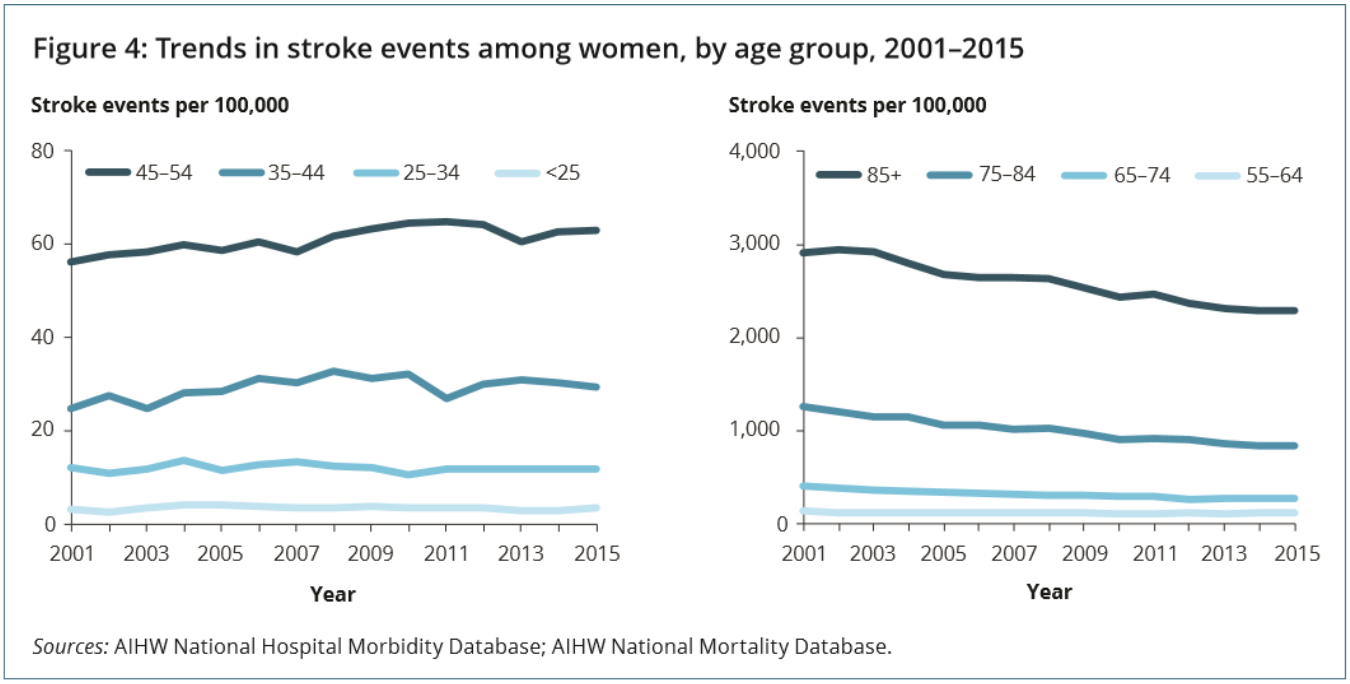
(A) Attention Skills

(B) Goal Setting

(C) Visualisation

(D) Concentration

19. The graph below shows the trends in stroke events among women by age group.



Which of the following statements is most accurately represented in the graph?

(A) rates rose among women aged 45-54

(B) rates rose among women aged 75+

(C) rates declined among women aged 35–44

(D) rates significantly declined among women aged 55-64

20. A Water Polo team targets (places specific pressure on) an opponent's best player as part of their overall plan to win a game. What performance element is demonstrated by this?

(A) Tactic
(B) Strategy
(C) Instruction
(D) Decision-making

Section I (continued)

Part B – 40 marks
Attempt Questions 21-28
Allow about 1 hour and 10 minutes for this part

Answer the questions in the spaces provided. These spaces provide guidance for the expected length of response.

Extra writing space is provided on page 18. If you use this space, clearly indicate which question you are answering.

Write your Student Number at the top of this page.

Question 21 (3 marks)

Outline a range of products and services available for alternative or complementary health care. **3**

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Question 22 (4 marks)

Describe the extent of a priority health issue other than CVD or cancer in Australia. **4**

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Question 23 (5 marks)

Explain how TWO action areas of the Ottawa Charter are addressed in one health promotion initiative you have studied. **5**

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Question 24 (8 marks)

Explain how the determinants of health impact on the health inequities experienced by one group other than Aboriginal and Torres Strait Islander Peoples. **8**

Question 25 (3 marks)

Identify types of feedback appropriate for the cognitive stage of skill acquisition. **3**

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Question 26 (4 marks)

What physiological adaptations occur in response to aerobic training? **4**

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Question 27 (5 marks)

Explain why post-performance nutrition is important for an endurance athlete? **5**

Question 28 (8 marks)

Compare the use of prescribed judging criteria versus personal criteria to appraise performance. **8**

Section I Part B extra writing space

If you use this space, clearly indicate which question you are answering.

Section II

40 marks

Attempt TWO questions from Questions 29–33
Allow about 1 hour and 10 minutes for this section

Answer each question in a separate Writing Booklet. Extra writing booklets are available. Ensure you put the question number and your student number on each booklet.

Your answers will be assessed on how well you:

- demonstrate knowledge and understanding of health and physical activity concepts relevant to the question
- apply the skills of critical thinking and analysis
- communicate ideas and information using relevant examples
- present a logical and cohesive response

Question 29 — The Health of Young People (20 marks)

(a) Explain the nature and extent of TWO major health issues that impact young people. (8 marks)

(b) Evaluate the effectiveness of non-government strategies in addressing health issues that impact young people. (12 marks)

Question 30 - Sport and Physical Activity in Australian Society (20 marks)

(a) Explain the relationship sport and physical activity has with cultural identity? (8 marks)

(b) Evaluate the impact that mass media has on sport. (12 marks)

Question 31 - Sports Medicine (20 marks)

(a) Explain the assessment procedures used to determine the nature and extent of an ankle injury. (8 marks)

(b) How are the demands of specific athletes addressed to enable their continued participation in sport? (12 marks)

Question 32 - Improving Performance (20 marks)

(a) Explain how periodisation can be effectively used to enhance an athlete's performance. (8 marks)

(b) When training to improve performance, to what extent should safe and potentially harmful training procedures be considered? (12 marks)

Question 33 - Equity and Health (20 marks)

(a) Explain the characteristics that contribute to the sustainability of health promotion strategies. (8 marks)

(b) Analyse areas of health inequity experienced by TWO population groups to determine the degree of which the gap is reducing or increasing. (12 marks)

End of Paper

Section I

Student Number | | | | | | | | | |

Part A – 20 marks
Attempt Questions 1–20
Allow about 40 minutes for this part

Select the alternative A, B, C or D that best answers the question and indicate your choice with a cross (X) in the appropriate space on the grid below.

	A	B	C	D
1			X	
2	X			
3			X	
4				X
5			X	
6	X			
7				X
8		X		
9			X	
10		X		
11				X
12			X	
13		X		
14		X		
15				X
16		X		
17	X			
18		X		
19	X			
20	X			

Section 1

Part B (40 marks)

Question 21 (3 marks)
Outcomes Assessed: ***H14***
Targeted Performance Bands: **2-3**

Criteria	Marks
• Sketches in general terms the main features of a range of both products and services for complementary or alternative health care approaches	3
• Provides some information about products and services for complementary or alternative health care approaches	2
• Provides some relevant points about complementary or alternative health care approaches	1

Syllabus Content:

- Complementary and alternative health care approaches
    - Range of products and services available

Answer could include:

There are a number of products and services that either complement traditional medicine or be used as an alternative. These include rehabilitation therapies, most commonly physiotherapy, which diagnoses, treats and prevents a wide range of health conditions and movement disorders through massage, heat treatment, and exercise rather than by drugs or surgery. Other services may include chiropractic services, hypnotherapist, osteopath, acupuncturist, naturopath, and homeopathy.

Some of the products used in C&A health include Chinese medicines, aromatherapy products, herbal remedies, herbs/herbal material and nutrient supplements.

Question 22 (4 marks)
Outcomes Assessed: ***H1, H2***
Targeted Performance Bands: **3-4**

Criteria	Marks
• Provides characteristics and features of the extent of diabetes in Australia • Communicates ideas using relevant examples	4
• Sketches in general terms the extent of diabetes in Australia • Uses some examples	2-3
• Provides some relevant information in relation to diabetes	1

Syllabus Content:

- High levels of preventable chronic disease, injury and mental health problems
  - Diabetes
- Research and analyse CVD, cancer and ONE other condition listed by investigating:
  - Extent of the problem (trends).

Answer could include:

Diabetes is a condition affecting the body's ability to take glucose from the bloodstream to use it for energy. All types of diabetes are increasing in prevalence. In 2016 diabetes was the the 7th highest cause of death in Australia. The significant rise over the past 20 years is thought to be due to the prevalence of obesity in Australia. The prevalence increases with age and rates are higher for males than females in most age groups. People with diabetes are more likely to have health complications and it is a major contributing factor to blindness, CVD, kidney failure and limb amputation. ATSI peoples have one of the highest prevalence rates for Type 2 diabetes in the world.

Question 23 (5 marks)
Outcomes Assessed: ***H4, H15***
Targeted Performance Bands: **3-4**

Criteria	Marks
• Makes evident the relationship between TWO Action Areas of the Ottawa Charter and the impact on ONE Health Promotion Initiative • Communicates ideas and information using a variety of examples within the TWO Action Areas that address the Health Promotion Initiative • Presents a logical and cohesive response	5
• Provides characteristics and features of TWO Action Areas of the Ottawa Charter for ONE Health Promotion Initiative • Uses some relevant examples	3-4
• Sketches in general terms TWO Action Areas of the Ottawa Charter OR • A Health Promotion Initiative	2
• Provides some relevant information about the Ottawa Charter OR • A Health Promotion Initiative	1

Syllabus Content:

Students learn about:
- Health Promotion based on the five action areas of the Ottawa Charter
  - The Ottawa Charter in Action

Students learn to:
- Argue the benefits of health promotion based on:
  - The five action areas of the Ottawa Charter
- Critically analyse the importance of the five action areas of the Ottawa Charter through a study of TWO health promotion initiatives related to Australia's health priorities.

Students may select from a variety of Health Promotion Initiatives including but not limited to Close the Gap, Go for 2 & 5, Speeding No One Thinks Big of You, National Tobacco Campaign.

Suggested answers may include:

The Following Example Uses The Plan B Campaign:

The Ottawa Charter has five Action Areas: Developing Personal Skills, Creating Supportive Environments, Strengthening Community Action, Reorienting Health Services and Developing Healthy Public Policy. Each of these five Action Areas plays a significant role in ensuring the sustainability and success of Health Promotion Initiatives such as 'The Plan B' campaign, by advocating, enabling and mediating positive health behaviours and actions to avoid drink driving. The initiative uses slogans such as 'RBT means you need a plan B', to discourage drink driving and encourage people to plan ahead if they are going to be drinking on a night out.

The various TV commercials, signage on public transport, advertising on social media and radio commercials, reflecting the Action Area of Developing Personal Skills, have been highly effective in addressing drink driving, particularly amongst young male drivers aged 17-25 years. The RBT means you need a Plan B campaign shows various plausible ways to get home safely that do not involve driving after drinking. The aim is to educate all drivers on the risks associated with drink driving and show the safe alternative of having a Plan B, such as a Taxi, walking or getting a friend/family to pick you up. These commercials educate drivers, particularly young drivers and have been shown to positively impact upon personal skills such as decision-making and judgement. They demonstrate a variety of ways, sometimes humorous but mostly realistic plausible, to get home safely and positively educate drivers on how to plan ahead and make better health choices.

The Action Area of Developing Healthy Public Policy is centred around government legislation designed to discourage drink driving. Random Breath Testing is part of the government legislation designed to discourage drink driving. Random Breath Testing us part of the government legislation around drink driving. Any driver stopped by a police officer, whether at an RBT road side stop or a random pull over, is required by law to submit to a random breath test if requested. Penalties for being over the legal limit include, fines, demerit points and loss of licence. This strategy is positively addressing the issue of drink driving as these consequences discourage people from drink driving and encourage them to think of an alternative way to get home.

Further example:

The five action areas of the Ottawa Charter (OC) heavily influence a range of health promotion initiatives in Australia. The Healthy Schools Canteen (HSC) initiative and the National Tobacco Strategy (NTS) have been shaped by this framework to effectively target the cancer and Cardiovascular Disease (CVD) national health priority issues (NHPIs).
'Developing personal skills' focuses on the promotion of health literacy which will enable individuals to make informed health decisions. This area guides the HSC by encouraging schools to use a simple 'traffic light' system of grading the nutritional value of food items. For example a sausage roll would be allocated a red sticker to inform any student, regardless of their age or background, about its high fat/poor food quality and to only eat it on rare occasions. The knowledge provided through this system, acts as a protective factor for young people against CVD and cancer which are leading causes of death in Australia. It is clear that this heavily influences and ensures the success and value of the health promotion initiative.
'Creating supportive environments' ensures that the places where people, live, work and play are conducive to making positive health decisions. This successfully influences the NTS initiative which creates smoke-free environments for people in employment, education and recreation. Smoking is no longer permitted near public and private eating areas and playgrounds. This ensures people are not exposed to excessive second-hand smoke and makes it difficult for addicted people to engage in the risk behaviour. This action area has also influenced the HSC initiative. The entire notion of adopting a healthy canteen transforms the only food choice for many young people from a high fat one to a healthy, low fat one. This makes the school environment more supportive of strong overall health outcomes for Australia's youth and reduces the risk of chronic diseases linked to poor diet. It is clear that 'creating supportive environments' successfully influences health promotion in Australia.

Question 24 (8 marks)
Outcomes Assessed: ***H2, H3, H5***
Targeted Performance Bands: **2-6**

Criteria	Marks
• Makes evident the relationship between the determinants and the health inequities in the context of one priority population other than Indigenous Australians. Demonstrates a comprehensive understanding of the determinants (sociocultural, socioeconomic and environmental) addressing the health inequities of people from a low SES background. • Communicates ideas and information using relevant examples • Presents a logical and cohesive response	8
• Provides characteristics and features of the determinants that create health inequities experienced by ONE priority population group other than Indigenous Australians • Describes the determinants (sociocultural, socioeconomic and environmental) addressing the health inequities of people from a low SES background • Provides a range of relevant examples	6-7
• Provides characteristics and features of a determinant that creates health inequities experienced by ONE priority population group other than Indigenous Australians OR • Sketches in general terms about determinant(s) (sociocultural, socioeconomic and environmental) that create health inequities of people from a low SES background • Provides relevant example(s)	4-5
• Sketches in general terms about determinant(s) (sociocultural, socioeconomic and environmental) that create health inequities of people from a low SES background	2-3
• Names a determinant of health inequities OR a priority population group other than Indigenous Australians	1

Syllabus Content:

Students learn about:
- Groups experiencing health inequities
  - Socioeconomically disadvantaged people

Students learn to:
- research and analyse Aboriginal and Torres Strait Islander peoples and ONE other group experiencing health inequities by investigating
  - the sociocultural, socioeconomic and environmental determinants

Sample answer

Individuals from low socioeconomic backgrounds suffer higher rates of chronic diseases including CVD, cancer and diabetes type II, as well as higher rates of injury and mental health issues. Socioeconomic determinants of education, income and employment can contribute to these inequities. Lower levels of education can lead to unhealthy lifestyle choices and increased consumption of high fat diets, contributing to increased prevalence of obesity, CVD and cancer. Lower levels of education can also lead to unemployment or reduced employment opportunities, which then reduces income, and can limit the affordability of choices such as getting a gym membership to engage in regular exercise. Environmental

determinants including geographical location can limit an individual's access to technology and health services. People of low socioeconomic status may live in rural areas with limited access to advanced diagnostic testing and technology eg CT scans and breast screening, which can then increase their chance of death from some cancers due to late diagnosis. Sociocultural factors including media, culture, religion, peers and family can have an impact on health inequities. People with low socioeconomic status are more likely to learn poor lifestyle decisions and risk behaviours through peers and family which can contribute to higher risk-taking behaviours eg, tobacco smoking which can lead to lung cancer or increased injuries resulting in hospitalisation. Furthermore, people from low socioeconomic backgrounds may lack access to media health promotion initiatives which can limit their protective factors, contributing to increased lifestyle diseases such as lung cancer.

Question 25 (3 marks)
Outcomes Assessed: ***H11***
Targeted Performance Bands: **2-3**

Criteria	Marks
• Indicates the types of feedback that are appropriate in the cognitive stage • Provides examples that support the use of feedback at this stage	3
• Indicates the types of feedback that are appropriate in the cognitive stage • May provide example(s) of feedback	2
• Provides some relevant information about feedback	1

Syllabus Content:

Students learn about:

- Feedback (internal, external, concurrent, delayed, knowledge of results, knowledge of performance)

Students learn to:

- How feedback will be used as learners progress through the stages of skill acquisition.

Suggested answers may include:

The type of feedback appropriate at the cognitive stage would include external and knowledge of performance eg a coach giving verbal feedback after a basketball lay-up to correct the technique for arm extension.

Question 26 (4 marks)
Outcomes Assessed: ***H7***
Targeted Performance Bands: **3-4**

Criteria	Marks
• Provides characteristics and features of physiological adaptations that occur in response to aerobic training • Communicates ideas using relevant examples	4
• Sketches in general terms physiological adaptations that occur in response to aerobic training	2-3
• Recognises and names physiological adaptations that occur in response to aerobic training	1

Syllabus Content:

Students learn about:

- physiological adaptations in response to training
  - resting heart rate
  - stroke volume and cardiac output
  - oxygen uptake and lung capacity
  - haemoglobin level
  - muscle hypertrophy
  - effect on fast/slow twitch muscle fibres

Students learn to:

• examine the relationship between the principles of training, physiological adaptations and improved performance

Sample answer:

A variety of physiological adaptations will occur in response to aerobic training. Aerobic training will involve an athlete utilising the aerobic energy system and the FITT principle (a frequency of 3-4 sessions/week, working in 60-80% of training heart rate zone, aerobic in nature and minimum of 20-30 minutes in duration).

Training of an aerobic nature can be in the form of long distance cycling, swimming, running or team sports. Aerobic training will result in increased stroke volume, cardiac output and a lowered resting heart rate. This is the result of the heart becoming a stronger muscle thus being able to pump oxygen to working muscles with each beat more quickly and efficiently. Haemoglobin levels will also rise as a result of aerobic training allowing better oxygen carrying capacity and direct delivery to working muscles. Lung capacity will not change as a result of aerobic training but oxygen uptake will be enhanced.

Specificity of the aerobic training will enhance muscle fibre recruitment. For example, if a marathon runner is using continuous/aerobic training techniques they will experience an increase in slow twitch muscle fibre recruitment. This will benefit an aerobic athletes' performance.

Question 27 (5 marks)
Outcomes Assessed: ***H11***
Targeted Performance Bands: **3-4**

Criteria	Marks
• Clearly explains why post-performance nutrition is important for endurance athletes • Provides examples which clearly support the importance of post-performance nutrition for endurance athletes	5
• Provides characteristics of post-performance nutrition for endurance athlete preparation • Provides examples	3-4
• Sketches in general terms reasons post performance nutrition is important OR • Provides characteristics or features of nutrition	2
• Provides facts or information about nutrition	1

Syllabus Content:

- Nutritional Considerations
  - Post-performance

Sample answer:

Post-performance nutrition is important for an endurance athlete to return their body to its pre-event state as quickly as possible, enabling the athlete to resume training for their next event. Proactive recovery emphasises the immediate refuelling and rehydration which continues until a pre-event state is obtained. It begins immediately and continues for 8-12 hours post performance. This is extremely important for the athlete as it enables optimisation of body repair and regeneration. Research suggests 20-100 grams of carbohydrate in the first 2hrs is highly beneficial. Followed by 50-75grams every 2hrs until 500-600grams of carbohydrate has been consumed. An example would be a marathon runner could have ….. immediately after and then a bar of … every two hours until 600 grams of carbohydrate has been consumed. The runner would then be able to resume their training program.

Question 28 (8 marks)
Outcomes Assessed: ***H1, H16***
Targeted Performance Bands: **2-6**

Criteria	Marks
• Clearly identifies prescribed and personal judging criteria that could be used to appraise performance • Makes a sustained, clear judgement about the use of prescribed judging criteria versus personal criteria to appraise performance • Illustrates answer with clear and relevant examples • Presents ideas in a clear logical way	8
• Identifies prescribed and personal judging criteria that could be used to appraise performance • Provides reasons for the use of prescribed judging criteria versus personal criteria to appraise performance • Communicates ideas and information using relevant examples	6-7
• Provides characteristics and features of the prescribed and personal judging criteria that could be used to appraise performance • Provides an example	4-5
• Sketches in general terms the prescribed and/or personal judging criteria that could be used to appraise performance	2-3
• Provides some relevant information about the prescribed and/or personal judging criteria that could be used to appraise performance	1

Syllabus Content:

- Assessment of skill and performance
  - Personal versus prescribed judging criteria

Sample answer:

There are two ways that a judge can appraise performance; prescribed judging criteria and personal judging criteria. Personal judging criteria is primarily based around an individual's personal opinion on the performance of another individual. For example, when appraising a 10m platform dive a coach may focus on the fact that their athlete has performed well as they have completed a difficult part of the dive well. Another example would be a spectator watching a gymnastics floor routine and making a personal judgment how well they performed focusing on things such as whether they fell over or how well they landed. If a coach's appraisal of the dive or the spectator's appraisal of a gymnastics routine is purely based on personal judging criteria it could be argued that the appraisal is open to bias and is not necessarily valid or reliable. This is because another individual may have a different appraisal of the performance if it is solely based on a personal judging criterion, as there is no clear reference point to appraise the performance from. However, if the dive and the gymnastics floor routine are appraised using a prescribed judging criterion the validity and reliability of the appraisal dramatically increases. When appraising performance occurs at an elite level, judges are expected to have an in-depth understanding of the standards developed by the relevant governing body. This is known as a prescribed judging criterion. Whilst the judge still has a personal interpretation of the criteria there is a heavy emphasis placed on appraising the performance based on the prescribed judging criteria. For example,

in diving, a judge is expected to look at various elements such as starting position, take off, flight, degree of difficulty and entry before awarding a mark not just whether it looked good or they entered the water headfirst. Another example would be in ballroom dancing where elements of composition such as timing, dynamics, rhythm and relationships are all equally considered before awarding a point score. Consequently, if the prescribed judging criteria is accurately applied by all judges to appraise performance, bias should be heavily reduced and the validity and reliability of the performance appraisal increases. This is a result of all the judges appraising the performance based on clearly defined prescribed judging criteria, which should leave limited scope for personal judging criteria to be applied,.

Question 29a (8 marks)
Outcomes Assessed: ***H2, H6***
Targeted Performance Bands: **2-4**

Criteria	Marks
• Thorough understanding of nature and extent • Communicates ideas and information using relevant examples • Presents a logical and cohesive response	8
• Detailed understanding of nature and extent • Provides a range of examples	6-7
• Sound understanding of nature and extent	4-5
• Some understanding of nature and extent	2-3
• Some relevant information regarding two health issues	1

Syllabus Content:

- The major health issues that impact on young people
  - Mental Health problems and illnesses
  - Violence

Sample answer:

Violence

Nature

Bullying

- Can be physical, emotional or verbal.
- Males tend to use physical bullying eg punching and kicking.
- Females tend to use psychological bullying, such as name calling and exclusion.
- Bullying can be experienced in a variety of environments including schools, at home, at sport and in the workplace.

Sexual Assault

- This is defined as non-consensual intercourse, rape or gang rape.
- Often involves inflicting harm and asserting power over a person.
- Consequences include: sustain physical injuries, contract STI's, feelings of guilt, low self-esteem and pregnancy.
- People who are sexually assaulted have trouble maintaining normal sexual relationships, experience depression and undertake self-harm.

Sexual harassment

- Is also against the law.
- Often is the result of an imbalance of power.
- Examples of sexual harassment include: unwanted verbal comments, physical gestures that are of a sexual nature, name calling, displaying of sexually explicit images or text messages, obscene phone calls or emails.
- It can occur in a variety of environments including: work, places such as pubs, school and sport.

Homophobic vilification

- It is the result of irrational fear or lack of tolerance towards individuals who are same sex attracted.
- It often involves verbal and physical abuse.
- Victims experience a range of effects including: physical injuries, psychological damage, depression, insecurity and isolation.

- If no support is provided or no action is taken against the discrimination these feelings can lead to suicide and self-harm.

Domestic abuse

- Is violence that occurs within the family or home environment.
- A variety of factors are associated with domestic abuse. These include: sociological which relates to gender stereotypes, cultural which relates to conflict as result of a clash between new and old ways, environmental which relates to overcrowding of the household and physiological factors which relates to the different ages of siblings.
- Can also be perpetuated through different generations of families.

Extent

- Overall there has been an increase in violence against young people.
- 1 in 6 school students experience bullying every week.
- Most sexual assaults are committed by males against a known victim and go unreported.
- Most physical attacks on homosexuals are by male offenders aged between16 and 20.

Nature

Depression – a young person with depression may show feelings or behaviours such as: upset, anxious, crying, withdrawn, decline academic performance and lacks interest in activities. Eg reactive depression, major depression, bipolar mood disorder.

Conduct Disorder – recurrent and chronic pattern of behaviour which a person's shows a blatant disregard for social norms or rules.

Eating Disorders – Characterised by disturbed eating patterns eg bulimia, anorexia and obesity.

Psychosis – cluster of symptoms that occur due to a disturbance in brain function eg disturbed thinking, hallucinations and delusions.

Types of disorders

Anxiety Disorders

- Panic attack
- Agoraphobia (fear of panic attack in public)
- Panic disorder
- Phobia
- Obsessive Compulsive Disorder
- Generalised anxiety disorder
- Post-traumatic stress disorder

Depressive Illness

- Reactive depression
- Endogenous or major depression
- Depression with psychotic features
- Bipolar mood disorder

Eating Disorders

- Anorexia
- Bulimia
- Binge Eating Disorder

Extent

Depression

- 1-3% of young people will be affected by a major depressive disorder
- 15-40% will report having symptoms of a depressed mood disorder
- By the age of 18, 24% of young people will have suffered a major episode of depression

Experiences of Loss

- 40% of all marriages end in divorce
- Median length of a marriage is 12.5 years
- High rates of suicide

- Injuries and deaths associated with accidents (motor vehicle)
- Due to these factors many more young people are likely to have experienced loss directly or indirectly

Schizophrenia

- Most new cases of schizophrenia are diagnosed in adolescents or young people
- 1 in 3 schizophrenics will only have 1- 2 episodes in their lives

Self-harm

- 25% of 16 and 17 year old girls have attempted some form of self-harm
- 5% of young people engage in self-harm behaviours

Suicide

- 11.8% of deaths per 100,000 of 15-19 year old males
- 7.8% of deaths per 100,000 of 15 – 19 year old females
- Rates for 20-24 year olds are higher
  22.5% per 100,000 for male

Question 29b (12 marks)
Outcomes Assessed: ***H2, H15***
Targeted Performance Bands: **2-6**

Criteria	Marks
• Provides a judgement on the effectiveness of non-government strategies targeting young people in relation to addressing major health issues • Uses relevant examples to support the response • Provides a logical and clear response	11-12
• Shows the effect of non-government strategies targeting young people in relation to addressing major health issues • Uses relevant examples to support the response	8-10
• Provides characteristics and features of non-government strategies targeting young people in relation to addressing major health issues	5-7
• Sketches in general terms strategies that target health issue(s) of young people OR • Sketches in general terms a major health issue that affects the health of young people	3-4
• Recognises and names non-government strategies targeting young people OR • Provides an example of a major health issue affecting young people	1-2

Syllabus Content:

- Actions targeting health issues relevant to young people
  - social action
  - health promotion initiatives

Students learn to:

- Evaluate a range of strategies that have been implemented by government and non-government agencies that target TWO major health issues impacting on young people

  Sample Answer:

  There is a range of strategies developed to improve the health of young people. These include social action, legislation and public policy and health promotion initiatives to support and improve the health of young people. These can be applied to improve the impact of violence and mental health illnesses and problems as they both affect young people's health greatly causing a high percentage of harm, including injury and death.
  Social action is any activity that is aimed at enhancing the wellbeing of others, with collaborative strategies that bring about change. The process of undertaking social action is as important as the final outcome. That is because the people involved also develop skills and enhance values in the process of undertaking social action. This is most beneficial for those involved. The final outcome may not be assured, however with sustained social action continued future social change should eventuate. A social action strategy for dealing with violence…... These all create a supportive

environment, conducive to safer ….. This is very important as part of social action, as well as empowering the young people's voice for a ……..
Health promotion initiatives are designed to promote good health in the community and reduce the harm of poor health behaviours. A health promotion initiative is more successful if it embodies the action areas of the Ottawa Charter, as well as targeting the groups specifically, eg young people.
Health promotion targeting violence and mental health illnesses and problems …young people includes ……

Question 31a (8 marks)
Outcomes Assessed: ***H13***
Targeted Performance Bands: **2-4**

Criteria	Marks
• Clearly explains the assessment procedures used to determine the nature and extent of the ankle injury • Shows how the assessment procedures assist in determining the nature and extent of the injury • Provides relevant examples	8
• Explains the assessment procedures used to determine the nature and extent of the ankle injury • Identifies how the assessment procedures assist in determining the nature and extent of the injury • Provides relevant examples	6-7
• Provides characteristics and features of the assessment procedures used to assist in determining the nature and extent of the injury • Provides an example	4-5
• Sketches in general terms the assessment procedures used to assist in determining the nature and extent of the injury	2-3
• Provides some relevant information with regards to the assessment of injuries	1

Syllabus Content:

- Assessment of injuries
  - TOTAPS

Sample answer:

Student's responses should provide a clear explanation of each of the steps involved in the assessment of injuries. For each step involved in the assessment of injuries (TOTAPS) they should be able to provide a clear explanation of how and why this step is important with specific reference back to the ankle injury in the scenario.

The following procedures should be performed to assess the nature and extent of the injury sustained by the soccer player. The steps are not always seen in isolation, but do have a progressive nature so that the assessor is able to reach a decision as soon as possible.

Talk
On reaching the injured athlete questions should be asked to gain insight into what may have occurred. Such questions could be 'How did it happen? Did you hear any snap or crack? Are you in any pain? If yes, what is the level of pain on a scale of 1-10?' By asking these questions the assessor is able to gain a greater understanding of how the ankle injury occurred and how sever the injury is. If the player is in extreme pain or they heard a crack or snap medical assistance should be sought immediately and the player should not return to play.

Observe
The second step is to observe the injury site. The injured ankle should be compared with the other ankle clearly looking for things such as deformities, swelling or decolourisation. If the ankle has an obvious deformity, swelling or discolouration compared to their other ankle then at this point medical assistance should be sought. If you observe a possible fracture manage as a hard tissue injury.

Touch
If there are no obvious signs of a major ankle injury you should then ask the athlete if you can touch the injured area. Initially, you should start by touching the injured player around the foot or calf area and gradually move towards the ankle to identify the specific site of the ankle injury. During this process you should ask the player to rate their level of pain whilst attempting to determine the site of the injury and feeling for heat, abnormalities or tenderness. If you suspect either a hard or soft tissue injury stop the assessment and manage appropriately.

Active Movement

The purpose of this step is to determine the range of movement the soccer player has in their ankle when they are moving it themselves. You should ask them to move their ankle as far as they can without causing any pain and observe their range of movement. If the basketball player finds it painful to complete this process stop the assessments and treat as a soft tissue injury.

Passive Movement

If during the active movement step no pain was caused then you should slowly move the ankle through its normal ranges of movement. The purpose of this step is to determine whether you can move the soccer player's ankle through its full range of movement without any pain. If during the process the soccer player experiences any pain stop the assessment and treat as a soft tissue injury.

Skills Test

Once the passive movement step has been completed without any pain the final step would involve the soccer player undertaking a soccer related skills test. The skills test should include things such as short sprints with change of direction and dribbling the ball. If not pain is experienced by the soccer player they can return to play.

If at any time during the assessment the soccer player is experiencing any pain or abnormal movement they should not return to play. Only if the soccer player can successfully complete eth skills test should they be allowed to return to play.

Question 31b (12 marks)
Outcomes Assessed: ***H8, H13, H17***
Targeted Performance Bands: **2-6**

Criteria	Marks
• Makes clear the demands of specific athletes and shows the relationship to continued participation in sport. • Makes evident how the specific demands can be addresses to enable continued participation. • Provides relevant examples that support how the demands are addressed. • Provides a logical and cohesive response.	11-12
• Makes evident how the specific demands need to be addressed to enable continued participation • Provides relevant examples	8-10
• Provides characteristics and features of the specific demands that need to be addresses to enable continued participation • Provides relevant examples	5-7
• Sketches in general terms the needs of specific athletes • May provide examples	3-4
• Provides some relevant information on specific athletes	1-2

Syllabus Content:

How does sports medicine address the demands of specific athletes?

Students learn about:

- Children and young athletes
  - Medical conditions (asthma, diabetes, epilepsy)
  - Overuse injuries (stress fractures)
  - Thermoregulation
  - Appropriateness of resistance training

- Adult and aged athletes
  - Heart conditions
  - Fractures/bone density
  - Flexibility/joint mobility

- Female athletes
  - Eating disorders
  - Iron deficiency
  - Bone density
  - Pregnancy

Students learn to:

- Analyse the implications of each of these considerations for the ways young people engage in sport and how each is managed
- Explain the sports participation options available for aged people with medical conditions
- Assess the degree to which iron deficiency and bone density affect participation in sport.

Sample answer:

The demands of specific athletes including: children and young athletes; Adult and aged athletes and female athletes can be met to enable continued participation in sport in numerous ways.

If medical conditions for young athletes, such as asthma, diabetes and epilepsy are taken into consideration participation can continue and also help to support these conditions. For example swimming when you have Asthma, which causes the airways to constrict, can be less risky than other sports. Swimming is usually performed in warm environments and during breathing air is forced out which increase lung function. Therefore, swimming's a great example of how continued participation for young athletes can be continued.

(overuse, thermoregulation and appropriateness of resistance training)

For aged athletes

- Heart conditions
- Fractures/bone density
- Flexibility/joint mobility

Female

- Eating disorders
- Iron deficiency
- Bone density
- Pregnancy