



Rewarding Learning

ADVANCED SUBSIDIARY (AS)

General Certificate of Education

January 2011

Health and Social Care

Assessment Unit AS 3

assessing

Unit 3: Health and Well-being

[A3H31]

MONDAY 10 JANUARY, AFTERNOON

MARK SCHEME

- 1 (a) (i) Write down three targets of a health promotion campaign you have researched. (AO1)

[1] for each target identified up to a maximum of [3]

Accept any targets relevant to one health promotion issue.

Statistically precise targets are not necessary: award mark for descriptive targets, e.g. increase in, decrease in.

(1 × [3])

[3]

- (ii) Explain three different ways the campaign attempted to get its message across to individuals or groups. (AO1, AO2)

[1] for use of key phrase(s), [2] for full explanation or supporting example

Answers may address any three of the following points:

- information sessions, e.g. in schools
- TV advertisements, e.g. to frighten target group about the effects of alcohol
- leaflets, e.g. about negative health effects of a substance or type of food
- posters, e.g. showing effects of alcohol or drug abuse
- a website, e.g. showing statistics or research findings relevant to the campaign
- radio advertising, e.g. explaining dangers of behaviours
- stories/narratives that members of target group can relate to, e.g. young people abusing alcohol on a night out
- use a helpline to give the public information, e.g. about stopping smoking
- advertisements in newspapers, e.g. offering vaccines
- produce DVDs, e.g. on healthy eating
- advertising merchandise, e.g. mouse mats, bookmarks
- running special events, e.g. healthy eating week at work.

All other valid points will be given credit.

(2 × [3])

[6]

- (b) Other than health promotion, explain two functions of the Public Health Agency. (AO1)

[1] for use of key phrase(s), [2] for full explanation or supporting example

Answers may address any two of the following points:

- provide information, e.g. through news bulletins on up-to-date issues relevant to the health of people in Northern Ireland, e.g. recent reports on carbon monoxide poisoning
- conducts research, e.g. on attitudes to breastfeeding in Northern Ireland
- produces leaflets relevant to the health and social care workforce in Northern Ireland, e.g. “Don’t Infect. Protect” gives carers information on hand washing

- publish books giving health advice to the public, e.g. the “Pregnancy” book that is given out by midwives
 - provide literature for organisations which promote healthy living practices, e.g. leaflets for GP surgeries
 - inform the public about health and care services in Northern Ireland, e.g. gives the number for Lifeline on its website so people in mental distress can access someone to speak to immediately
- (2 × [2]) [4]

- (c) Name two other statutory organisations that contribute to health and well-being. (AO1)

Accept full or abbreviated version for [1]

Accept any two of the following:

- Department of Health and Social Services and Public Safety for Northern Ireland/DHSSPSNI
- National Health Service/NHS
- Department of Health/DOH
- Department of Social Services/DSS.

(2 × [1]) [2]

- (d) Describe the following two approaches to health promotion. (AO1, AO2)

The behaviour change approach

[1] for use of key phrase(s), [2] for adequate description, [3] for detailed description

This approach aims to encourage individuals to adopt healthier behaviours which are seen as the key to improved health. It views health as a property of individuals and assumes they can make real improvements by changes to lifestyle, e.g. the 5-a-day campaign to encourage greater consumption of fruit and vegetables.

The social approach

[1] for use of key phrase(s), [2] for adequate description, [3] for detailed description

Sometimes referred to as the social change approach, this approach acknowledges the influence of socio-economic conditions, e.g. housing, income. It is a top down approach with policy makers and health planners taking the lead – an example is the smoking ban enforced by government legislation.

(2 × [3]) [6]

- (e) Use the table below to evaluate the medical and educational approaches to health promotion. (AO1, AO2, AO3, AO4)

The medical approach

Answers may address some of the following points:

Strengths

- often campaigns are based on medically sound evidence so are convincing
- it is expert led – features doctors and other medical workers – someone people feel they can trust
- material used can have a shock factor that engages people, e.g. statistics on deaths from influenza to encourage vulnerable groups to be vaccinated
- some history of success, e.g. successful smallpox vaccination programme
- cost effective – preventive rather than curative
- effective in targeting whole groups/good uptake in some groups, e.g. childhood vaccinations, HPV for teenage girls.

Weaknesses

- fear among public of side effects can put people off taking up immunisations
- lack of trust due to controversies, e.g. suggested links between MMR and autism
- this approach ignores the holistic person – social and environmental factors are not considered
- this approach reinforces medicalisation of life – going to the doctor seen as the answer
- may target only specific groups, e.g. breast screening only for women over 50
- encourages dependency on medical profession and treatment rather than taking responsibility for own health and well-being
- uptake – may be ignored: apathy, fear, long waiting lists, “it won’t happen to me”
- expensive to run, e.g. because of costs of screening equipment, vaccines, staffing.

The educational approach

Strengths

- allows individuals to make up their own mind after giving them the information they need
- can be delivered to a large group, e.g. in a classroom situation or in a workplace
- can be time constrained, e.g. a one-hour session to deliver an important health promotion message
- can give something to target group to take away with them and read again, e.g. literature including statistics – may encourage individuals to research the topic further
- works well with people who are used to this way of getting new information, e.g. people in educational settings or people who are well educated

- information given not imposed
- information is usually thoroughly researched by professionals – regarded as valid.

Weaknesses

- assumes target group can read and write which is not the case for everyone – content may be quite technical
- individuals who have had negative experiences at school may not respond well to this approach – may switch off and not listen to the message
- difficult to know if learning has taken place – people may appear to listen but not bother to change their behaviour or may take away literature and never read it
- information only – may not be enough to change behaviours – other factors influencing lifestyle choices – social, emotional
- won't work if target group do not want information or is bored by it.

All other valid points will be given credit.

[0] is awarded for a response not worthy of credit.

Level 1 ([1]–[4])

Overall impression: basic

- displays limited understanding of the strengths and weaknesses of the medical and/or educational approaches to health promotion
- identifies four appropriate strengths and/or weaknesses anywhere on the grid – [4] awarded
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([5]–[8])

Overall impression: adequate

- displays adequate understanding of the strengths and weaknesses of the medical and/or educational approaches to health promotion
- makes appropriate points on all sections of the grid or evaluates one approach well to achieve at this level
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([9]–[12])

Overall impression: competent

- displays competent understanding of the strengths and weaknesses of the medical and educational approaches to health promotion

- evaluates both the medical and educational approaches to achieve at this level with at least two appropriate points in each section of the grid
- at the top of this level all of these points will be clearly argued and fully developed
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear. [12]

33

2 (a) Define the following concepts. (AO1)

Health

[1] for use of key phrase(s), [2] for full explanation

Answers may address some of the following points:

- it is generally agreed that there is more than one dimension to health – physical, social, emotional, mental, spiritual, environmental (any three of these will gain [2])
- health means different things to different people
- health is a positive concept that suggests well-being as opposed to illness or disease
- health is the absence of disease/not just the absence of disease
- health can be influenced by lifestyle factors.

Ill-health

[1] for use of key phrase(s), [2]for full explanation

Answers may address some of the following points:

- a state in which an individual is unable to function normally and without pain
- can be physical or mental
- ill-health may be about the presence of something negative like a disease or the absence of something positive like adequate nutrition.

Mental health

[1] for use of key phrase(s), [2] for full explanation

Answers may address some of the following points:

- not just the absence of mental illness, but a form of subjective well-being
- an individual's sense of being able to cope, being in control of his/her life, being able to face challenges and take on responsibility
- a state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with adversity
- a person's ability to organise their thoughts in a coherent pattern and to act accordingly.

(3 × [2])

[6]

- (b) Explain two ways Mark's good health may have a positive impact on his psychological well-being. (AO1, AO2)

[1] for use of key phrase(s), [2] for full explanation

Answers may include some of the following points:

- Mark may have high self-esteem – as he looks and feels well he will have a positive self-concept
- Mark may have a sense of autonomy – he may feel that he is in control of his life because the lifestyle choices he is making are resulting in good health
- Mark may experience positive emotions, e.g. happiness, freedom from worry and anxiety, feelings of confidence
- Mark may be less likely to experience mental health problems like depression.

(2 × [2])

[4]

- (c) Discuss how eating a healthy diet may affect Mark's **physical** health and well-being. (AO1, AO2, AO3)

[1] for use of key phrase(s), [2] for adequate discussion, [3] for detailed discussion

Answers may include some of the following points:

- Mark may be at low risk of chronic diseases associated with poor diet, such as cardiovascular disease, cancers
- Mark is unlikely to become obese and so is at less risk of associated health problems like high blood pressure and Type II diabetes
- Mark is less likely to have painful joints than people who are overweight as a result of unhealthy diets
- Mark's healthy diet should strengthen his immune system so that he is at less risk of catching common illnesses such as colds and is well equipped to fight them if he does
- Mark's healthy diet is likely to give him energy to participate in physical activities, e.g. sports and to enhance his physical appearance, e.g. toned body and health skin.

(1 × [3])

[3]

- (d) Discuss how Mark's level of education may affected his **physical** and **psychological** well-being. (AO1, AO2)

Effect on physical health and well-being

[1] for use of key phrase(s), [2] for adequate discussion, [3] for detailed discussion

Answers may include the following points:

- as Mark is educated to degree level he is likely to have a well paid job and therefore enough money to spend on leisure activities, e.g. gym membership, which enhances physical well-being. Also he is likely to be able to afford good housing and food choices which are associated with good health

- people with higher levels of education are more likely to be confident in making demands of the health service, e.g. asking for referrals to specialists, so physical health problems may be dealt with effectively
- mortality and morbidity rates are lower than average for individuals with higher educational attainment like Mark
- well developed literacy and numeracy skills means individuals like Mark can understand, interpret and assess complex information about health and therefore make choices that impact positively on his physical health and well-being
- skills to research may lead to early diagnosis and treatment of worrying symptoms.

Effect on psychological health and well-being

[1] for use of key phrase(s), [2] for adequate discussion, [3] for detailed discussion

Answers may include the following points:

- people with higher levels of education like Mark are less likely to suffer from depression and other mental illnesses
- people with higher levels of education like Mark are often more aware of psychological illness and therefore they know how to prevent them and how to seek help if they are unwell
- as Mark is educated to degree level he is likely to be successful in his working life and may therefore have a positive self-concept/ high self-esteem.

(2 × [3])

[6]

- (e) Mark has been taking responsibility for his own health and well-being by making appropriate lifestyle choices. Use the following headings to discuss other ways individuals can take responsibility for their own health and well-being. (AO1, AO2, AO3)

Accessing services

[1] for use of key phrase(s), [2] for adequate discussion, [3] for detailed discussion

Answers may address some of the following points:

- attending regular check-ups as a preventative measure, e.g. dental check-ups every six months can help to prevent tooth decay and gum disease; “well women” and “well men” clinics can lead to early detection of health problems
- responding to invitations for screening, e.g. for breast cancer in women over fifty can lead to early detection and treatment
- making GP appointments before a health condition deteriorates too much, e.g. seeing GP about a chest infection can help to avoid a more serious condition developing
- taking up opportunities for health checks offered at work or through voluntary organisations, e.g. blood pressure checks conducted by occupational nurse or breast screening offered by a cancer charity can also lead to early detection and appropriate treatment

- using on-line services or helplines, e.g. NHS Direct, Lifeline
- using a range of other services relevant to health and well being, e.g. those provided by commercial and voluntary organisations.

Self advocacy

[1] for use of key phrase(s), [2] for adequate discussion, [3] for detailed discussion

Answers may address some of the following points:

- asking a GP for a referral to a specialist, e.g. a gynaecologist or neurologist can mean the individual can access expertise on their conditions
- asking a hospital doctor for a second opinion, e.g. referral to another specialist means a patient can feel all possible diagnoses and treatments have been considered
- researching one's own condition and possible treatments in libraries or the internet and requesting the most up-to-date treatment can inform individuals to allow them to request up-to-date treatments
- asking for information on choice of treatment.

(2 × [3])

[6]

- (f) Use an example to discuss how a commercial organisation could contribute to the health and well-being of people like Mark who are interested in maintaining good health. (AO1, AO2, AO3)

The example used may be a retailer like a pharmacy or supermarket, or a private practitioner like a homeopath, or a health related business like a private health club or spa, or a private health care company like BUPA.

[1] for use of key phrase(s), [2] for adequate discussion, [3] for detailed discussion

Answers may address some of the following points:

- conducting research on health issues, e.g. healthy diet
- providing health related products, e.g. vitamin supplements, sun lotion
- advising individuals on health issues, e.g. through having experts available
- measuring health indicators, e.g. BP, blood sugar, etc.
- providing treatments aimed at improving health, e.g. massages
- providing opportunities for exercise, e.g. gym equipment
- running health promotion activities, e.g. safety in the sun
- providing information, e.g. healthy recipes or information on health properties of foods/on illnesses and how they can be treated/ managed
- provides screening services, e.g. for STIs.

All other valid points will be given credit.

(1 × [3])

[3]

- (g) Analyse the effects of exercise on the health and well-being of individuals. (AO1, AO2, AO3, AO4)

Answers may address some of the following points:

Effects on **physical** health and well-being

- exercise makes the heart stronger so it can pump blood around the body efficiently and can sustain its maximum level with less strain. This lowers risk of heart problems and improves circulation
- exercise reduces the risk of obesity and helps to prevent diabetes
- exercise builds bone strength and prevents osteoporosis
- exercise can help protect individuals from developing cancers such as colon or breast cancer
- people who exercise are less likely to get colds, have heart problems, their chance of having a stroke is reduced, they are less likely to get chronic illnesses like diabetes or osteoporosis and their life expectancy is increased
- when someone is ill, if they exercise, it can actually sometimes speed up recovery from some physical illnesses
- exercise tones the body and builds muscle, improving fitness and strength
- may lead to injury
- improves sleep pattern, appetite
- more energy, less tired.

Effects on **social** health and well-being

- exercise in team sports encourages relationships and co-operation with others
- people who exercise often do so in a social context, e.g. at a dance or exercise class where they can develop friendships
- people who exercise tend to be confident and have a good social life. In some cases it could be argued that exercising could negatively affect social life, e.g. if someone gets too involved with exercise and goes to the gym all the time, neglecting relationships with others.

Effects on **psychological** health and well-being

- exercise can relieve stress, depression and anxiety
- for anyone who is overweight, exercise often has beneficial psychological effects, as improvement of body shape leads to a more positive self-image and higher self-esteem
- working in a team during exercise creates more social interaction, contributing to a feeling of well-being and acceptance
- by feeling fitter through exercise, and being able to do things that they couldn't do before, people can become more confident
- some people may get too involved with exercise and become psychologically dependent on it for well-being – this is sometimes regarded as an addiction to the endorphins released by the brain when exercising
- exercise can improve memory/concentration

All other valid points will be given credit.

[0] is awarded for a response not worthy of credit.

Level 1 ([1]–[4])

Overall impression: basic

- displays a limited knowledge of the potential effects of exercise on health and well-being
- answers may focus on only one aspect of health and well-being (physical, psychological or social)
- there is little or no evidence of analytical writing
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([5]–[8])

Overall impression: adequate

- displays an adequate knowledge of the effects of exercise on health and well-being
- there must be reference to at least two aspects of health and well-being (physical, psychological, social) to achieve at this level
- there is some evidence of analytical writing
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([9]–[12])

Overall impression: competent

- displays a competent knowledge of the potential impact of exercise on health and well-being
- there must be reference to all three aspects of health and well-being (physical, psychological, social) to achieve at this level
- there is clear evidence of analytical writing
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

[12]

40

- 3 (a) The research suggests that deaf people face discrimination in accessing healthcare. Explain three ways this could impact on their health and well-being. (AO1, AO2, AO3)

[1] for use of key phrase(s), [2] for explanation

Answers may address any three of the following points:

- they could feel disempowered, that they have no control over what is happening, and could experience low self-esteem as a result
- they may become withdrawn – not bothering to try to interact with staff or other patients, e.g. in a hospital ward
- they may not be compliant in taking medication because they may not have heard or understood
- they could experience a range of negative emotions, such as sadness or anger and frustration at because they experience inequality
- their recovery may be impaired or their condition could worsen, e.g. they may not receive the appropriate care to aid recovery or they may not want to continue to use a service, e.g. want to leave a hospital or not return to a GP
- they may become very distressed that they are not being properly supported by staff and may even exhibit the physiological effects of stress, e.g. loss of appetite, not being able to sleep in a hospital setting and even perhaps longer term psychological effects, e.g. depression
- they may feel neglected – that staff don't care about them
- they may feel like a burden – that their disability is inconveniencing the staff.

(3 × [2])

[6]

- (b) Discuss three ways a ward manager could challenge discriminatory practice in a hospital setting. (AO1, AO2, AO3)

[1] for use of key phrase(s), [2] for adequate discussion, [3] for detailed discussion

Answers may address any three of the following points:

- engage in staff training in anti-discriminatory practice, e.g. to remind staff about the Patients' Charter of Rights, the care value base and equality legislation
- make sure some staff have specialist training relevant to equality issues, e.g. BSL, interpreters
- deal robustly with complaints by patients applying the complaints policy
- when staff use whistle blowing procedures to report others who engage in discriminatory practices, carry out a full investigation and take appropriate action
- have forums for discussion/staff meetings where concerns can be dealt with
- supervise inexperienced staff and point out areas of concern to them, leading by example
- directly challenge staff when incidents occur, use disciplinary procedures if it becomes necessary

- directly challenge patients, explaining why the behaviour is inappropriate
- respond to concerns expressed by family members by carrying out an investigation, e.g. through suggestion boxes
- inform patients and families about their rights and about policies and procedures, e.g. complaints, using patients' advocate

(3 × [3])

[9]

- (c) Using examples, discuss four ways voluntary organisations contribute to the health and well-being of their clients. (AO1, AO2, AO3, AO4)

Examples may include: Marie Curie, Age NI, Chest Heart Stroke, Red Cross, NSPCC, Mencap, Niamh, Alzheimer's Society.

Answers may address any four of the following points:

- provide care for clients, e.g. a day centre or home care worker
- provide other services, e.g. transport, meals on wheels, screening
- provide information and advice to clients, e.g. on rights to state benefits
- provide practical support, e.g. food vouchers, aids and equipment
- provide emotional support, e.g. help lines, counselling or access to support groups where they can meet other people with disabilities
- provide literature, e.g. information in a suitable format like Braille or leaflets to help clients understand and manage their disabilities
- carry out research, e.g. on causes of sensory disabilities
- advocate for clients, e.g. to help with access to housing or health care, interpreters if needed
- befriend clients, e.g. have a scheme where volunteers visit people with disabilities or accompany them on outings
- provide advice to families of clients, e.g. on how the client can be supported by family members
- lobby government to improve the lives of people with disabilities, e.g. try to persuade MPs to provide and finance better services or to improve legislation to prevent discriminatory practice

All other valid points will be given credit.

[0] is awarded for a response not worthy of credit.

Level 1 ([1]–[4])

Overall impression: basic

- displays a limited knowledge of the ways voluntary organizations could contribute to the health and well-being of their clients
- may list rather than discuss up to four ways
- there is limited discussion
- there may be no examples used
- quality of written communication is basic. The candidate makes only a limited attempt to select and use an appropriate form and style of writing. The organisation of material may lack clarity and coherence. There is little use of specialist vocabulary. Presentation, spelling, punctuation and grammar may be such that intended meaning is not clear.

Level 2 ([5]–[8])

Overall impression: adequate

- displays an adequate knowledge of the ways voluntary organizations could contribute to the health and well-being of their clients
- may discuss fewer than four ways or may discuss some ways in more detail than others
- limited use of examples
- there is adequate discussion
- to achieve at this level, examples of voluntary organisations must be included
- quality of written communication is adequate. The candidate makes a reasonable attempt to select and use an appropriate form and style of writing. Relevant material is organised with some clarity and coherence. There is some use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are sufficiently competent to make meaning evident.

Level 3 ([9]–[12])

Overall impression: competent

- displays a competent knowledge of the ways a voluntary organization could contribute to the health and well-being of their clients
- all four ways must be discussed in detail to achieve at the top of this level
- good use of examples
- there is competent discussion
- quality of written communication is competent. The candidate successfully selects and uses the most appropriate form and style of writing. Relevant material is organised with a high degree of clarity and coherence. There is extensive and accurate use of appropriate specialist vocabulary. Presentation, spelling, punctuation and grammar are of a high standard and ensure that the meaning is clear.

[12]

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Total

100

AVAILABLE
MARKS