



Personal Development, Health and Physical Education

General Instructions

- Reading time – 5 minutes
- Working time – 3 hours
- Write using blue or black pen
- Write your Centre Number and Student Number at the top of this page and pages 3, 11 and 16.

Total marks – 100

Section I Pages 3-19 **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 21-22
- Allow about 1 hour and 10 minutes for this part

Section II Pages 20-21 **40 marks**

- Attempt TWO questions from Questions 23-27
- Allow about 1 hour and 10 minutes for this part

Disclaimer

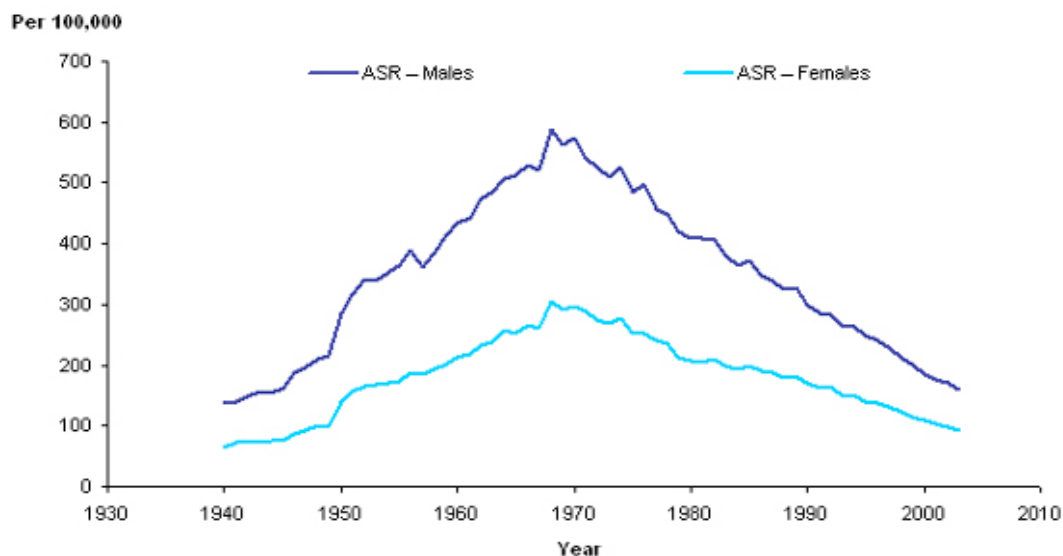
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- 1 Risk factors for cancer can be classified as modifiable or non-modifiable. Which of the following are modifiable?
- (A) Sexual activity, exposure to UV light, age
 - (B) Diet, gender, smoking
 - (C) Reproductive history, use of alcohol and tobacco, diet
 - (D) Exposure to chemicals, hereditary factors, age
- 2 What are the effects of atherosclerosis?
- (A) Build up of fatty deposits and paralysis
 - (B) Smoking and lack of physical activity
 - (C) Restricted blood flow and heart attack
 - (D) Memory loss and loss of muscle function
- 3 Which of the following statements best describes cancer rates over the last thirty years in Australia?
- (A) Cancer incidence rates are rising although death rates are falling
 - (B) Cancer death rates and incidence rates are rising
 - (C) Cancer incidence rates and death rates are falling
 - (D) Cancer incidence rates are falling but death rates are rising
- 4 Which of the following best exemplifies a local community health promotion initiative?
- (A) A fun run aimed at increasing levels of exercise
 - (B) A mobile screening program for breast cancer
 - (C) Increased taxes on cigarettes to reduce smoking
 - (D) Increased funding for random breath testing
- 5 Which of the following statements best reflects the *nature of health care in Australia*?
- (A) The Federal Government is mainly responsible for health care in Australia
 - (B) Health care takes on a purely curative role with the main aim of treating the sick and dying
 - (C) Health care requires the collaboration of many sectors focusing on the establishment of environments that promote positive health behaviours
 - (D) The health care system relies on communities to take responsibility for their own health issues

6 What is the Medicare system designed to do?

- (A) Protect all Australians from the huge costs of medical care
- (B) Provide low cost competition to private health insurers
- (C) Provide overseas visitors a means to access health care in Australia
- (D) Provide an easy system to collect statistics on the health of Australians

7 The graph shows trends in death rates for coronary heart disease in Australia, 1940 to 2003.



Note: Rates are age-standardised to the 2001 Australian population.
Source: AIHW National Mortality Database.

Which statement best represents the data in the graph?

- (A) Male CHD death rates in Australia have consistently been nearly twice those of females
- (B) Male CHD death rates are higher due to their lower life expectancy
- (C) CHD mortality rates are declining due to increased activity levels of children and adolescents
- (D) The trends indicate that death rates between males and females have been similar over time

8 Why is the 'prevention vs cure' debate still an issue in the health promotion debate in Australia?

- (A) Governments can expect reduction in bed vacancies in hospitals if they concentrate on curing those who are ill
- (B) There are no short term cost benefits from diverting funds to preventive programs
- (C) It is often too politically sensitive to establish more curative programs for those who need a cure for illness
- (D) There is no evidence that suggests that the use of health promotion actually reduces morbidity and mortality rates

9 Which of the following statements best describes the National Health Priority Areas?

- (A) Combined, cancers are the leading cause of mortality in Australia
- (B) The mortality rates for each disease are similar for each age group and each sex
- (C) The incidence and mortality for all diseases are increasing
- (D) Diseases of the heart and vascular system are the leading cause of mortality

10 What is the aim of the biannual report, Australia's Health, produced by the Australian Institute for Health and Welfare?

- (A) To provide accurate information on patterns of health and illness, the use of health services and the current health expenditure
- (B) To provide a list of harmful lifestyle influences on the Australian population and suggest improvements
- (C) To evaluate the use of health services, list new diseases affecting the Australian population and examine alternative health approaches
- (D) To determine social justice issues, provide accurate statistics on health patterns and recommend increased health expenditure

11 What is the recommended percentage of carbohydrates, protein and fats in the diet?

	Carbohydrates	Proteins	Fats
(A)	55	30	15
(B)	25	50	25
(C)	55	15	30
(D)	45	20	35

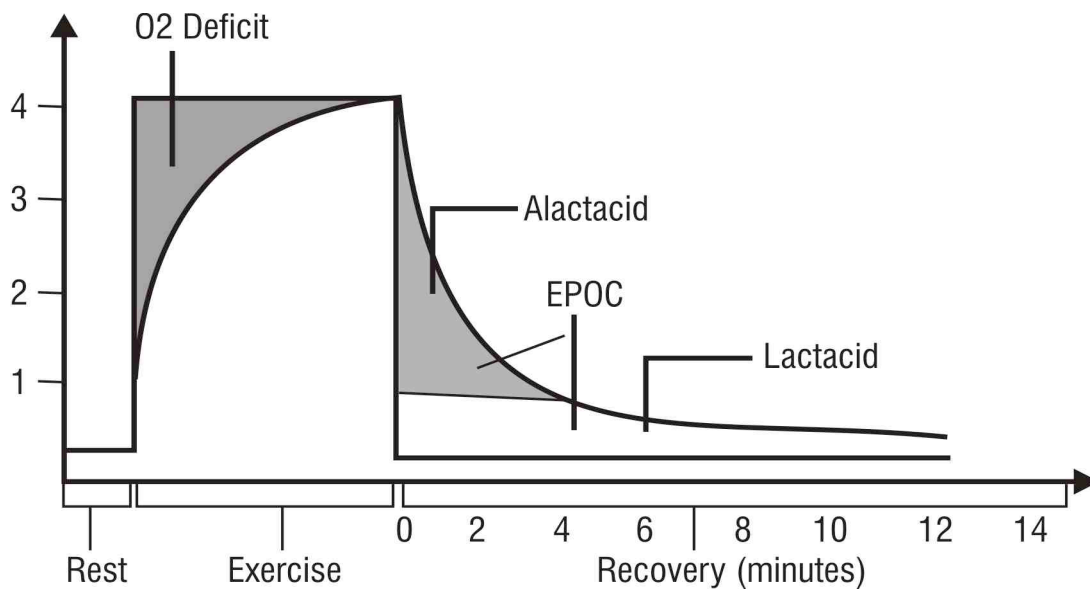
12 Below are three training sessions:

	Speed Endurance	Special Endurance 1	Special Endurance 2
Intensity	95 to 100%	90 to 100%	90 to 100%
Distance	80 to 150 metres	150 to 300 metres	300 to 600 metres
No. of Repetitions/Set	2 to 5	1 to 5	1 to 4
No. of Sets	2 to 3	1	1
Total distance/session	300 to 1200 metres	300 to 1200 metres	300 to 1200 metres
Example	3 × (60, 80, 100)	2 × 150 metres + 2 × 200 metres	3 × 500 metres

What would be the specific purpose of these training sessions?

- (A) To develop the ATP-PC energy pathway
- (B) To develop the anaerobic glycolysis energy pathway
- (C) To develop the aerobic energy pathway
- (D) To develop the contribution of fat as an energy source

13 The graph below shows the recovery of an 800m runner after they have finished their race.



What is occurring during the component of the oxygen debt indicated as 'lactacid'?

- (A) Excess post-exercise oxygen consumption is required to assist in with post-exercise carbohydrate loading
 - (B) Excess post-exercise oxygen consumption is required to synthesise and restore muscle phosphagen stores
 - (C) Excess post-exercise oxygen consumption is required as the athlete will experience constriction of the blood vessels
 - (D) Excess post-exercise oxygen consumption is required to remove lactic acid from the muscle cells and blood
- 14** What does BMR refer to?
- (A) The minimal amount of exercise required each day
 - (B) The amount of heat produced by the body each day
 - (C) The additional amount of energy required by an athlete
 - (D) The minimal amount of energy required for normal daily body functioning
- 15** An athlete has lined up for the final of the Australian Championships. They are normally very calm before a race but they feel quite nervous as they have not been to an Australian final before.
Which of the following best describes this anxiety?
- (A) They normally suffer from trait anxiety and will have strategies to deal with this
 - (B) They are suffering from state anxiety but it should not affect performance
 - (C) They are over aroused and will perform poorly in the final
 - (D) Their nervous state will ensure they are optimally aroused and will perform to the best of their ability due to adrenalin levels

- 16** Which of the following are characteristics of the learner at the cognitive stage of learning?
- (A) Requires varied practice situations, skill is performed without thought, focuses on various cues
 - (B) Feedback is not relevant, requires short but frequent blocks of practice, uses mental imagery to focus
 - (C) Frequent large errors, difficulty distinguishing relevant cues, requires clear demonstrations
 - (D) Feedback is very important, movements are poorly timed, practice should simulate performance conditions
- 17** A coach of a basketball team calls out instructions to one of his players who has the ball. What type of feedback is he providing?
- (A) Terminal, extrinsic feedback
 - (B) Intrinsic, concurrent feedback
 - (C) Concurrent, extrinsic feedback
 - (D) Extrinsic, delayed feedback
- 18** An athlete is really focused on beating their personal best as they prepare for a race. What type of motivation are they using?
- (A) Material motivation
 - (B) Intrinsic motivation
 - (C) Extrinsic motivation
 - (D) Social motivation
- 19** A soccer player takes a deep breath before a penalty, blocks out all crowd noise and concentrates on the task at hand. What is this known as?
- (A) Mental rehearsal
 - (B) Visualisation
 - (C) Anxiety management
 - (D) Attentional Focus

- 20** Which of the following is an example of an athlete in the autonomous phase of the skill learning process?
- (A) The badminton player who disguises the nature of her serve from her opponent
 - (B) The tennis player who is concentrating on getting his serve lower and into different areas of the service box
 - (C) The golfer who visualizes the movement of putting to build up a picture of what needs to be done
 - (D) The footballer who is able to throw accurate passes to a teammate when little or no pressure is applied

Personal Development, Health and Physical Education

Section I (continued)

Part B - 40 marks

Attempt Questions 21-22

Allow about 1 hour and 10 minutes for this part

Answer the question in the spaces provided.

In your answer you will be assessed on how well you:

- demonstrate an understanding of health and physical activity concepts
 - apply the skills of critical thinking and analysis
 - illustrate your answer with relevant examples
 - present ideas in a clear and logical way
-

Marks

Question 21 – Health Priorities in Australia (20 marks)

- (a) Describe the role that alternative health care approaches play in the health of Australians. **3**

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(b) Explain how various risk factors contribute to morbidity and mortality in Australia.

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Marks

- (c) Analyse the impact that a doubling of health expenditure on health promotion would have on short and long term morbidity and mortality rates in Australia. **8**

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End of Question 21

Section I - Part B (continued)

Answer the question in the spaces provided.

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- In your answer you will be assessed on how well you:
- demonstrate an understanding of health and physical activity concepts
 - apply the skills of critical thinking and analysis
 - illustrate your answer with relevant examples
 - present ideas in a clear and logical way
-

Marks

Question 22 – Factors Affecting Performance (20 marks)

- (a) Compare the impact that the learning environment has on the acquisition of skill in both skilled and unskilled performers.

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Marks

- (b) Evaluate the role of psychological training on an athlete's optimal performance.

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Personal Development, Health and Physical Education

Section II – Options

40 marks

Attempt two Questions from 23 - 27

Allow about 1 hour 10 minutes for this section.

Answer the question in a SEPARATE writing booklet. Extra writing booklets are available.

In your answer you will be assessed on how well you:

- demonstrate an understanding of health and physical activity concepts
 - apply the skills of critical thinking and analysis
 - illustrate your answer with relevant examples
 - present ideas in a clear and logical way
-

Question 23 – Health of Young People (20 marks)

Marks

- | | |
|---|-----------|
| (a) Explain the impact diversity has on the health of young people. | 8 |
| (b) Assess the importance of social factors on the health issues related to risk taking and road accidents in young people. | 12 |

Question 24 – Meanings of Physical Activity and Sport (20 marks)

- | | |
|---|-----------|
| (a) Explain the link between sport and community identity. | 8 |
| (b) Assess the impact the media portrayal of female athletes has on the professionalism and the professional status of women's sport. | 12 |

Question 25 – Sports Medicine (20 marks)

Marks

- | | |
|--|-----------|
| (a) Explain the physical preparation and thermoregulation considerations of an athlete in the lead up to a triathlon. | 8 |
| (b) Assess the procedures to be undertaken to ensure the safe participation in sport by children and young athletes and adult and aged athletes. | 12 |

Question 26 – Improving Performance (20 marks)

- | | |
|--|-----------|
| (a) Explain the impact that altitude training has on aerobic performance at altitude and at sea level. | 8 |
| (b) Assess how technology can be used to improve the performance of athletes. | 12 |

Question 27 – Equity and Health (20 marks)

- | | |
|--|-----------|
| (a) Explain how enabling, mediating and advocating can improve health levels for those suffering inequities in health. | 8 |
| (b) Assess the importance of credibility in delivering health programs to ATSI and remote communities, using examples from present health promotions to justify your answer. | 12 |

End of paper

PDHPE – MARKING GUIDELINES

Section I

Part A – Total marks (20)

Question	Marks	Syllabus/Course outcomes	Targeted performance band	Answer
1	1	H4	2-3	C
2	1	H1	3-4	C
3	1	H1	3-4	A
4	1	H5	3-4	A
5	1	H4, H14	4-5	C
6	1	H5	3-4	A
7	1	H5, H14	4-5	A
8	1	H4, H14	3-4	B
9	1	H1	3-4	D
10	1	H5, H15	5-6	A
11	1	H8, H10	2-3	C
12	1	H11	3-4	B
13	1	H9	3-4	D
14	1	H9	2-3	D
15	1	H7	4-5	B
16	1	H11	3-4	C
17	1	H8, H10	3-5	C
18	1	H11	3-4	B
19	1	H9	4-5	D
20	1	H7	5-6	A

Section I - Part B

Question 21(a) (3 marks)

Describe the role that alternative health care approaches play in the health of Australians.

Outcomes Assessed: H1, H2

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">• Explains the role of alternative health care and its place in the range of health care services• Uses relevant examples to illustrate arguments• Present ideas in a clear and logical way	3
<ul style="list-style-type: none">• Describes the role of alternative health care without reference to the whole health care system• Uses examples to demonstrate arguments without making the argument clear• Present ideas well but not clear on all points	2
<ul style="list-style-type: none">• Identifies and defines alternative health care• Uses some examples to demonstrate understanding of the definition	1

Answers may include:

Use of alternative health care in a holistic health care landscape, background to the development of alternative health care and the role of integration of different modes of health care with noted change to Federal health coverage a possibility.

Question 21(b) (7 marks)

Explain how various risk factors contribute to morbidity and mortality in Australia.

Outcomes Assessed: H4, H5, H15

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">Clearly describes the link between risk factors and illness and death in AustraliaUses a range of relevant and accurate examples to support description and provide examples from different priority areas to demonstrate understanding	6-7
<ul style="list-style-type: none">Presents ideas in a clear and logical way	4-5
<ul style="list-style-type: none">Defines risk factorsUses some examples to illustrate arguments in relation to main causes of illness and death	2-3
<ul style="list-style-type: none">Identifies either risk factors of main causes of morbidity and mortality ORDefines risk factors and lifestyle diseases	1

Answers may include:

A clear link between risk factors and lifestyle diseases, describe both modifiable and non modifiable and the impact that each have on a range of diseases, can use one or a number of priority areas as the examples for arguments (eg modifiable risk factor such as obesity for both cardio vascular disease and diabetes illness and death).

Question 21(c) (8 marks)

Analyse the impact that a doubling of health expenditure on health promotion would have on short and long term morbidity and mortality rates in Australia.

Outcomes Assessed: *H4, H5, H14, H15*

Targeted Performance Bands: *2-6*

Criteria	Marks
<ul style="list-style-type: none">Analyses impact through demonstration of a clear understanding of both promotion and cure in both the short and long term with clear correlation between all areasIntegrates arguments of health promotion versus health cures and predicts future outcomes from this related specifically to mortality and morbidity in both the short and long termUses relevant examples in relation to both short and long term impact to strengthen analysisPresent ideas in a clear and logical way	7-8
<ul style="list-style-type: none">Examines impact through demonstration of a clear understanding of both areas on both long and short term health careUses arguments of promotion versus cure but does not clearly integrate these into issues around morbidity and mortalityUses relevant examples but focuses on either short or long term impacts onlyPresent ideas in a clear and logical way	5-6
<ul style="list-style-type: none">Describes the impact of health promotion versus health curesUses examples to demonstrate analysis rather than to strengthen argumentsFocuses on only morbidity and mortality in either short or long term	3-4
<ul style="list-style-type: none">Outline impact of health promotion or cure on short or long term morbidity or mortality ORDescribes health promotion versus health cure with some examples of each relating to morbidity and mortality	1 - 2

Answers may include:

Development of ideas and arguments related to long term advantages on health promotion on both morbidity and mortality, issues related to the need for short term curative services, ideas around increases in health promotion impacting on short term morbidity plus students should be prepared to draw conclusions from their arguments, including the possible need for greater expenditure in the short term to decrease health expenditure in the long term.

Question 22(a) (8 Marks)

Compare the impact that the learning environment has on the acquisition of skill in both skilled and unskilled performers.

Outcomes Assessed: H8, H9, H10

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">• Compares skilled and unskilled performers with clear links to differences between learning environments and the acquisition of skills• Clearly links the impact of a variety of environments with the characteristics of the learners and its impact on skill acquisition, noting the influence of environment in allowing the acquisition of skills• Draws logical conclusions from arguments presented providing relevant examples to strengthen position• Presents ideas in a clear and logical way	6-8
<ul style="list-style-type: none">• Compares skilled and unskilled learners but does not draw clear conclusions on how learning environments impact on skill acquisition in general or develop ideas around the impact of learning environment on skill acquisition for either group• Draws conclusions from arguments but present these through use of examples rather than using examples to support statements• May provide some examples of each group of performers or focus on one group only	4-6
<ul style="list-style-type: none">• Identifies the differences between skilled and unskilled performers with some examples OR• Outlines different learning environments or influences of skill acquisition with some examples either• Does not link skill acquisition and learning environment	1-3

Answers may include:

Characteristics of both skilled and unskilled performers and the impact that the learning environment has on movement through stages of skill acquisition and rates of learning. Clear links should be made between these characteristics and the learning environment and variations in its stability when acquiring and developing characteristics of a skilled performer. Rates of and influences on skill acquisition should be noted, including aspiration, motivation, enjoyment, commitment, self-esteem, inherited characteristics, prior experience and personality traits.

Question 22(b) (8 Marks)

Evaluate the role of psychological training on an athlete's optimal performance.

Outcomes Assessed: H8, H10, H11, H17

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">• Evaluates a wide range of psychological strategies in relation to performance, indicating the impact that psychological preparation can have on performance, both positive and negative• Clearly demonstrates a strong link between use of strategies and optimising athletic performance in a coordinated fashion• Uses a wide range of examples applying different strategies to different athletic scenarios to support evaluation• Presents ideas in a clear and logical way	7-8
<ul style="list-style-type: none">• Evaluates a wide range of psychological strategies in relation to performance• Demonstrates the link between use of strategies and optimising athletic performance but may only refer to one or two strategies• Uses a wide range of examples but may only focus on one or two strategies rather than a range• Presents ideas in a clear and logical way	5-6
<ul style="list-style-type: none">• Provides examples of a wide range of psychological strategies• Uses examples to demonstrate how they improve performance but generally in isolation• Presents ideas but no clear demonstration of clear arguments relating the strategies to optimal performance, often using examples to make arguments	3-4
<ul style="list-style-type: none">• Defines or identifies psychological strategies• Gives examples but does not draw the connection between psychological performance with optimal performance	1 - 2

Answers may include:

Evaluation of the role the following have on performance; attentional focus, concentration, mental rehearsal, visualisation, relaxation, goal setting, especially in relation to motivation anxiety and arousal. Attention should be given to the use of a range of strategies in conjunction with each other in both a short and long-term time frame plus the use of these strategies in conjunction with appropriate physical training.

Section II – Options

Question 23(a) (8 Marks)

Explain the impact diversity has on the health of young people.

Outcomes Assessed: H2, H15

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">• Explains the impact diversity has on the health of young people• Presents ideas in a clear and logical way• Uses a range of relevant and accurate examples to support the answer	6-8
<ul style="list-style-type: none">• Describes the impact diversity has on the health of young people• Uses relevant examples to support the answer	4-5
<ul style="list-style-type: none">• Identifies aspects of diversity and the health of young people	1-3

Answers may include:

The types of diversity in young people – their developmental stage, motivations, values, geographic location, socio-cultural background, family influences.

The attitudes/perceptions of older people towards young people.

How these factors contribute to positive and negative health outcomes.

Question 23(b) (12 Marks)

Assess the importance of social factors on the health issues related to risk taking and road accidents in young people.

Outcomes Assessed: H2, H14, H15

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">• Makes detailed judgements about the importance of social factors on the health issues related to risk taking and road accidents in young people• Provides examples to highlight response• Presents ideas in a clear and logical way	10 - 12
<ul style="list-style-type: none">• Makes judgements about the importance of social factors on the health issues related to risk taking and road accidents in young people• Uses relevant examples to illustrate answer• Presents ideas in a clear and logical way	7 - 9
<ul style="list-style-type: none">• Discusses how social factors influence health issues related to risk taking and road accidents in young people• Supports discussion by using relevant examples	5 - 6
<ul style="list-style-type: none">• Describes the influence of social factors on health issues related to risk taking and road accidents in young people OR <ul style="list-style-type: none">• Discusses risk taking and road accidents in young people	3 - 4
<ul style="list-style-type: none">• Identifies risk taking behaviours with respect to road accidents in young people	1-2

Answers may include:

The types of social factors that influence risk taking related to use of motor vehicles in young people, such as, socio-economic status and employment; education; gender; peer influence; geographical location and how these impact through aspects such as type of car owned, safety features, use of/need for car, understanding of road rules, self-esteem, confidence.

Question 24(a) (8 Marks)

Explain the link between sport and community identity.

Outcomes Assessed: H12

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">• Explains the link between sport and community identity• Presents ideas in a clear and logical way• Uses a range of relevant and accurate examples to support the answer	6-8
<ul style="list-style-type: none">• Describes the link between sport and community identity• Uses examples to support the answer	3-5
<ul style="list-style-type: none">• Identifies aspects of sport and community identity	1-2

Answers may include:

The recognition of local identities as national/international heroes; the tribalism associated with regional sporting teams – local players, local supporters; achievement of teams creating sense of self-esteem, opportunity, hope.

Question 24(b) (12 Marks)

Assess the impact the media portrayal of female athletes has on the professionalism and the professional status of women's sport.

Outcomes Assessed: H12

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">• Makes detailed judgements about the impact the media portrayal of female athletes has on the professionalism and the professional status of women's sport• Provides examples to highlight response• Presents ideas in a clear and logical way	10 - 12
<ul style="list-style-type: none">• Makes judgements about the impact the media portrayal of female athletes has on the professionalism and the professional status of women's sport• Uses relevant examples to illustrate answer• Presents ideas in a clear and logical way	7 - 9
<ul style="list-style-type: none">• Discusses the impact the media portrayal of female athletes has on the professionalism and the professional status of women's sport• Supports discussion by using relevant examples	5 - 6
<ul style="list-style-type: none">• Describes the media portrayal of female athletes and affects on the professional status of women's sport OR <ul style="list-style-type: none">• Discusses the media portrayal of female athletes	3 - 4
<ul style="list-style-type: none">• Identifies some aspects of the media portrayal of female athletes	1-2

Answers may include:

The portrayal of female athletes through selective images (relating to femininity and beauty), language (relating to perceptions of femininity, entertainment, skill) and amount of coverage provided.

Implications of these on participation rates and grants for development and resources and flow on to achievement levels and sponsorship, prize money and increased coverage.

Question 25(a) (8 Marks)

Explain the physical preparation and thermoregulation considerations of an athlete in the lead up to a triathlon.

Outcomes Assessed: H8, H17

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">Explains the physical preparation and thermoregulation considerations of an athlete in the lead up to a triathlonPresents ideas in a clear and logical wayUses a range of relevant and accurate examples to support the answer.	6-8
<ul style="list-style-type: none">Describes physical preparation and thermoregulation considerations of an athlete in the lead up to a triathlonORExplains one and outlines the other. (ie physical preparation or thermoregulation)	4-5
<ul style="list-style-type: none">Identifies aspects of physical preparation and/or thermoregulation	1-3

Answers may include:

Appropriate levels of endurance, strength and flexibility to avoid injury; individual needs; sport specific requirements; considerations with regard to appropriate clothing; appropriate levels of hydration; consideration of weather conditions.

Question 25(b) (12 Marks)

Assess the procedures to be undertaken to ensure the safe participation in sport by children and young athletes and adult and aged athletes.

Outcomes Assessed: *H7, H13, H16, H17*

Targeted Performance Bands: *2-6*

Criteria	Marks
<ul style="list-style-type: none">• Makes detailed judgements about the effectiveness of procedures to be undertaken to ensure the safe participation in sport by children and young athletes and adult and aged athletes• Provides examples to highlight response• Presents ideas in a clear and logical way	10 - 12
<ul style="list-style-type: none">• Makes judgements about the effectiveness of procedures to be undertaken to ensure the safe participation in sport by children and young athletes and adult and aged athletes OR• Makes detailed judgements about one and discusses the other in undertaking procedures to ensure the safe participation in sport by different athletes (ie children and young athletes or adult and aged athletes)• Uses relevant examples to illustrate answer• Presents ideas in a clear and logical way	7-9
<ul style="list-style-type: none">• Discusses procedures to ensure the safe participation in sport by children and young athletes and adult and aged athletes• Supports discussion by using relevant examples	5-6
<ul style="list-style-type: none">• Describes the sports medicine needs of children and young athletes and adult and aged athletes OR• Discusses procedures to ensure the safe participation in sport by one group and describes the other OR• Describes safety procedures which ensure safe sports participation	3 - 4
<ul style="list-style-type: none">• Identifies some safety procedures	1–2

Answers may include:

Procedures such as smaller playing areas, frequent interchange, appropriate use of medication, modified equipment, appropriate training procedures, appropriate competition which takes into account the specific physical capabilities of children and young athletes such as medical conditions (asthma, diabetes, epilepsy); overuse injuries; thermoregulation; matching of opponents and appropriateness of resistance training. Adult and aged athletes have considerations such as heart conditions; fractures and bone density; flexibility and joint mobility and procedures to address these include less strenuous activities, longer rest periods, non-weight bearing activity and development of flexibility.

Question 26(a) (8 Marks)

Explain the impact that altitude training has on aerobic performance at altitude and sea level.

Outcomes Assessed: H7, H8, H10

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">• Explains the impact that altitude training has on aerobic performance at altitude and sea level• Presents ideas in a clear and logical way• Uses a range of relevant and accurate examples to support the answer	6-8
<ul style="list-style-type: none">• Describes the impact that altitude training has on aerobic performance at altitude and sea level	4-5
<ul style="list-style-type: none">• Identifies aspects of altitude training	1-3

Answers may include:

The need for acclimatisation and the immediate responses to altitude. The detrimental effect on the athlete initially – nausea, headache, loss of appetite, loss of ability to train.

Adaptations from long term altitude training such as increased red blood cells and haemoglobin, changes to other tissues and cells, possible max VO₂ increase.

Benefits of these at sea level – debatable.

Question 26(b) (12 Marks)

Assess how technology can be used to improve the performance of athletes.

Outcomes Assessed: H16, H17

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">• Makes detailed judgements about the effectiveness of technology in improving the performance of athletes• Provides an extensive range of examples and uses of technology to highlight response• Presents ideas in a clear and logical way	10-12
<ul style="list-style-type: none">• Makes judgements about the effectiveness of technology in improving the performance of athletes• Uses relevant examples to illustrate answer• Presents ideas in a clear and logical way	7-9
<ul style="list-style-type: none">• Discusses some uses of technology in improving the performance of athletes• Supports discussion by using relevant examples	5-6
<ul style="list-style-type: none">• Describes the use of technology in improving the performance of athletes. OR <ul style="list-style-type: none">• Describes types of technology which may be used	3 -4
<ul style="list-style-type: none">• Identifies some types or uses of technology	1–2

Answers may include:

How technology is used in training, skill development and performance and examples of this such as: clothing; video analysis; software programs; equipment - bikes, skis, surfboards etc; engineering at venues – movable roofs, giant screens; testing equipment; drugs; therapies (hyperbaric chambers); training equipment and facilities.

Question 27(a) (8 Marks)

Explain how enabling, mediating and advocating can improve health levels for those suffering inequities in health.

Outcomes Assessed: H4, H14

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">• Explains how enabling, mediating and advocating can improve health levels for those suffering inequities in health• Presents ideas in a clear and logical way and uses a range of relevant and accurate examples to support the answer	6-8
<ul style="list-style-type: none">• Describes how enabling, mediating and advocating can improve health levels for those suffering inequities in health OR• Explains one and outlines the others. (ie enabling or advocating or mediating)	4-5
<ul style="list-style-type: none">• Defines enabling, mediating and advocating	1-3

Answers may include:

Use of Ottawa Charter action areas to provide strategies to assist in explanation.

Question 27(b) (12 Marks)

Assess the importance of credibility in delivering health programs to ATSI and remote communities, using examples from present health promotions to justify your answer.

Outcomes Assessed: H2, H4, H5, H14, H15

Targeted Performance Bands: 2-6

Criteria	Marks
<ul style="list-style-type: none">• Makes detailed judgements about the importance of credibility in delivering health programs to ATSI and remote communities• Provides examples from present health promotions to justify the answer• Presents ideas in a clear and logical way	10-12
<ul style="list-style-type: none">• Makes judgements about the importance of credibility in delivering health programs to ATSI and remote communities• Uses relevant examples from present health promotions to illustrate answer.• Presents ideas in a clear and logical way	7-9
<ul style="list-style-type: none">• Discusses the importance of credibility in delivering health programs to ATSI and remote communities• Supports discussion by using relevant examples from present health promotions	5-6
<ul style="list-style-type: none">• Describes the importance of credibility in delivering health programs to ATSI and remote communities• May use examples to support answer	3-4
<ul style="list-style-type: none">• Identifies some health programs for ATSI and remote communities.	1-2

Answers may include:

The importance of: who is delivering the program – both qualified and culturally sensitive; skill based strategies; education which is culturally sensitive and needs based; prevention programs; producing equity; ongoing initiatives.

Mapping Grid PDHPE

Exam Section	Question	Marks	Syllabus/Course outcomes	Content	Targeted performance band	Answer
Section I	1	1	H4	9 1 2	2-3	C
Part A – Multiple Choice	2	1	H1	9 1 2	3-4	C
	3	1	H1	9 1 1	3-4	A
	4	1	H5	9 1 3	3-4	A
	5	1	H4, H14	9 1 4	4-5	C
	6	1	H5	9 1 4	3-4	A
	7	1	H5, H14	9 1 2	4-5	A
	8	1	H4, H14	9 1 4	3-4	B
	9	1	H1	9 1 1	3-4	D
	10	1	H5, H15	9 1 1	5-6	A
	11	1	H8, H10	9 2 4	2-3	C
	12	1	H11	9 2 1	3-4	B
	13	1	H9	9 2 2	3-4	D
	14	1	H9	9 2 2	2-3	D
	15	1	H7	9 2 3	4-5	B
	16	1	H11	9 2 5	3-4	C
	17	1	H8, H10	9 2 5	3-5	C
	18	1	H11	9 2 3	3-4	B
	19	1	H9	9 2 3	4-5	D
	20	1	H7	9 2 5	5-6	A
Part B- Free response	21 (a)	3	H1, H2	9 1 2	2-6	
	21 (b)	7	H4, H5, H15	9 1 4	2-6	
	21 (c)	10	H4, H5, H14, H15	9 1 3	2-6	
	22 (a)	8	H8, H9, H10	9 2 5	2-6	
	22 (b)	12	H8, H10, H11, H17	9 2 3	2-6	
Section II - Options	23 (a)	6	H2, H15	9 3 3	2-6	
	23 (b)	14	H2, H14, H15	9 3 1	2-6	
	24 (a)	6	H12	9 4 2	2-6	
	24 (b)	14	H12	9 4 3	2-6	
	25 (a)	6	H8, H17	9 5 2	2-6	
	25 (b)	14	H7, H13, H16, H17	9 5 3	2-6	
	26 (a)	6	H7, H8, H10	9 6 2	2-6	
	26 (b)	14	H16, H17	9 6 1	2-6	
	27 (a)	6	H4, H14	9 7 2	2-6	
	27 (b)	14	H2, H4, H5, H14, H15	9 7 3	2-6	