

## Unit 1DHEA: The health of groups and communities

The focus for Health Studies Course Unit 1DHEA is **the health of groups and communities**.

This unit assesses the significance to health of being a member of a specific community or group such as school, religious or sporting bodies. Students examine local efforts at health promotion and determine how these contribute to improvements in health. Current Australian health priorities are explored and strategies for improving the health of communities and groups are considered. Students explore the notion that both state and federal bodies have responsibilities for health.

**This road safety support material must be read in conjunction with the Health Studies Course documentation ([www.curriculumcouncil.wa.gov.au](http://www.curriculumcouncil.wa.gov.au)).**

The information and activities have been designed to be used within the Health Studies Unit 1DHEA. They are intended to be used in conjunction with other learning activities and contexts and as such, do not cover all content areas outlined for Unit 1DHEA.

### HEALTH STUDIES COURSE

Stage P		Stage 1				Stage 2		Stage 3	
Unit PAHEA	Unit PBHEA	Unit 1AHEA	Unit 1BHEA	Unit 1CHEA	Unit 1DHEA	Unit 2AHEA	Unit 2BHEA	Unit 3AHEA	Unit 3BHEA

### CURRICULUM FRAMEWORK - OVERARCHING LEARNING OUTCOMES

#### COURSE OUTCOMES

Outcome 1:	Outcome 2:	Outcome 3:	Outcome 4:
Knowledge and understandings	Beliefs, attitudes and values	Self-management and interpersonal skills	Health inquiry

### CONTENT AREAS

Health concepts	Attitudinal and environmental influences over health	Health skills and processes
<ul style="list-style-type: none"> <li>An holistic/social view of health</li> <li>Health principles, frameworks, models and theories</li> <li>Actions and strategies for health</li> <li>Healthcare systems</li> </ul>	<ul style="list-style-type: none"> <li>Personal beliefs, attitudes and values influence health behaviour</li> <li>Social and cultural norms and expectations influence health behaviour</li> </ul>	<ul style="list-style-type: none"> <li>Self-management skills</li> <li>Interpersonal skills</li> <li>Health inquiry skills and processes</li> </ul>

## Health Studies Course: Scope and sequence

Context: Road safety education

Content organiser	Stage 1 Units			
	1AHEA Introduction to health	1BHEA Personal health	1CHEA Personal, peer and family health	1DHEA The health of groups and communities
<b>An holistic/ social view of health</b>	<ul style="list-style-type: none"> <li>definitions of health and wellness dimensions of health (physical/biological, social, mental, emotional and spiritual) that promote an understanding of a holistic concept of health</li> <li>characteristics necessary for good health (for each dimension)</li> </ul>	<ul style="list-style-type: none"> <li>measurement of personal health status for each dimension of health</li> <li>personal health influences</li> <li>personal factors that enable and reinforce behaviours that determine health i.e. predisposing, enabling and reinforcing factors</li> </ul>	<ul style="list-style-type: none"> <li>determinants of health i.e. social, environmental and biological</li> <li>the influence of health determinants that support or detract from personal, peer and family health status</li> </ul>	<ul style="list-style-type: none"> <li>relationships between social, environmental and biological determinants of health</li> </ul>
<b>Health principles, frameworks, models and theories</b>	<ul style="list-style-type: none"> <li>health and wellness continuums/dynamic nature of health</li> </ul>	<ul style="list-style-type: none"> <li>introduction to health promotion</li> <li>individual approaches to improving health i.e. health education</li> <li>social responsibility of individuals for their own health</li> <li>models that enhance and promote personal health i.e. Stages of Change Model.</li> </ul>	<ul style="list-style-type: none"> <li>models that enhance and promote health i.e. Health Promoting Schools Model</li> </ul>	<ul style="list-style-type: none"> <li>public health with emphasis on prevention and health promotion</li> <li>characteristics of communities and groups e.g. common features, diversity</li> <li>health promotion in your community: agents and agencies and their role in promoting health e.g. local drug action groups, non-government organisations (NGOs), community action groups for special events - Leavers</li> <li>use of models to inform practical programs to promote health of groups and communities i.e. promoting health at school using Health Promoting Schools (HPS)</li> </ul>
<b>Actions and strategies for health</b>	<ul style="list-style-type: none"> <li>individual responsibility for health</li> <li>role of lifestyle factors</li> <li>actions to reduce the risk of lifestyle factors</li> </ul>	<ul style="list-style-type: none"> <li>personal health risk assessment i.e. recognising constructive and destructive risks to health: calculating risks to health</li> <li>readiness for change</li> <li>strategies for building motivation to change behaviour</li> <li>personal action plans to protect and promote and optimise personal health i.e. aims/goals, developing strategies, SMART goal setting, identifying and overcoming barriers</li> </ul>	<ul style="list-style-type: none"> <li>preventive actions to cope with influences on personal health behaviour and enhance health i.e. resilience, social competence, assertiveness</li> </ul>	<ul style="list-style-type: none"> <li>assessment of the health and wellbeing of young Australians</li> <li>measures of health status in Australia i.e. life expectancy, morbidity and mortality, incidence and prevalence of disease</li> <li>current Australian health priorities</li> <li>strategies for improving life expectancy with focus on prevention, importance of intervention, healthy environments</li> <li>group techniques for health promotion e.g. developing personal skills, workshops, seminars, self-help groups</li> </ul>

Health concepts

Content areas covered in the *Licensed* support materials are in **bold** and **lime green**.

# Health Studies Course: Scope and sequence

Context: Road safety education

		Stage 1 Units			
		1AHEA	1BHEA	1CHEA	1DHEA
		Introduction to health	Personal health	Personal, peer and family health	The health of groups and communities
Health concepts	Healthcare systems	<ul style="list-style-type: none"> <li>range and types of health facilities and services</li> <li>selection of health products and services that meet personal needs and priorities</li> <li>criteria for selecting personal health products and services</li> </ul>	<ul style="list-style-type: none"> <li>structure of current healthcare system i.e. two tiered system of state/federal private health insurance and how it fits into the system</li> <li>rights and responsibilities as a healthcare consumer</li> <li>criteria for choosing a healthcare professional</li> </ul>	<ul style="list-style-type: none"> <li>importance of health care as prevention versus health care as treatment</li> <li>range and types of preventative health care</li> <li>options and access to alternative health care</li> </ul>	<ul style="list-style-type: none"> <li>local, state and federal government responsibilities for health issues around responsibilities for health care in Australia e.g. workforce shortages, waiting lists, funding for health</li> </ul>
	Attitudinal and environmental influences over health	<ul style="list-style-type: none"> <li>defining personal beliefs, attitudes and values and their relationship to health behaviour</li> <li>differences in personal values and attitudes</li> <li>formation of personal beliefs, attitudes and values about health</li> <li>relationship between knowledge, beliefs, attitudes and health behaviour</li> </ul>	<ul style="list-style-type: none"> <li>influence of personality, individual and situational factors on the formation of personal beliefs, attitudes and values</li> <li>influence of physical and structural factors on personal beliefs, attitudes and values towards health behaviour</li> <li>impact of personal beliefs about health on health behaviour</li> </ul>	<ul style="list-style-type: none"> <li>peer and family influence on the formation of personal beliefs, attitudes and values towards health behaviour</li> <li>differences between adolescents' perceptions of physical and structural factors influencing behaviour and motivation of self and others</li> <li>relationship between beliefs, attitudes, values and health behaviour</li> <li>cognitive conflict/dissonance</li> </ul>	<ul style="list-style-type: none"> <li>influence of groups and community upon personal beliefs and attitudes and ability to pursue values</li> <li>impact of multiple beliefs and attitudes of self and others on health behaviour</li> </ul>
Health skills and processes	Social and cultural norms and expectations influence on health behaviours	<ul style="list-style-type: none"> <li>definitions of social and cultural norms and expectations</li> <li>formation of social and cultural norms</li> <li>influence of general social and cultural norms on personal behaviour</li> </ul>	<ul style="list-style-type: none"> <li>influence of peer-group and cultural norms and expectations on personal health behaviours</li> </ul>	<ul style="list-style-type: none"> <li>influence of peer group, personal, cultural, school, parental and religious norms and expectations on health behaviour of self and others</li> </ul>	<ul style="list-style-type: none"> <li>role of wider community in construction, transmission and promotion of beliefs, attitudes and values</li> </ul>
	Self management skills	<ul style="list-style-type: none"> <li>self-assessment of strengths and challenges in health</li> <li>styles of decision-making in determining personal health priorities and goals e.g. impulsive, intuitive, rational</li> <li>factors affecting choice of decision-making style</li> <li>decision-making models</li> </ul>	<ul style="list-style-type: none"> <li>skills for building self-confidence and personal motivation i.e. goal setting for short and longer term, resilience and coping with change</li> <li>impact of decisions and behaviours of the peer group on personal decision-making</li> <li>impact of values and cultural awareness on personal decision making.</li> </ul>	<ul style="list-style-type: none"> <li>skills for seeking social support among peers and family for behaviour change i.e. self-confidence</li> <li>skills for monitoring and modifying health behaviour i.e. time management, decision-making, planning</li> </ul>	<ul style="list-style-type: none"> <li>solution-focused approaches to decision-making</li> <li>prediction of barriers and enablers to healthy decision-making</li> <li>practical decision-making tools and strategies i.e. PMI, cost-benefit analysis, Six Thinking Hats</li> </ul>

Content areas covered in the *Licensed* support materials are in **bold** and **lime green**.

## Health Studies Course: Scope and sequence

Context: Road safety education

Content organiser		Stage 1 Units			
		1AHEA Introduction to health	1BHEA Personal health	1CHEA Personal, peer and family health	1DHEA The health of groups and communities
Health inquiry skills and processes	Interpersonal skills	<ul style="list-style-type: none"> <li>importance of effective communication for better health and wellbeing</li> <li>non-verbal and verbal communication skills and strategies for effective relationships i.e. speaking, listening</li> </ul>	<ul style="list-style-type: none"> <li>assertive, passive and aggressive communication</li> <li>use of 'you' and 'I' statements</li> <li>skills for working in pairs and groups i.e. cooperation, negotiation</li> </ul>	<ul style="list-style-type: none"> <li>communication skills that build cooperation and collaboration in achieving group goals i.e. active listening, empathy, respect for others and compromise, managing conflict</li> <li>barriers to effective communication</li> <li>effective use of communication channels e.g. mobile phones, email, internet</li> </ul>	<ul style="list-style-type: none"> <li>skills for effective communication in groups i.e. mediation, negotiation, supporting others, managing group dynamics</li> <li>codes of behaviour in groups</li> </ul>
	Health inquiry skills and processes	<ul style="list-style-type: none"> <li>basic health terms/language</li> <li>identification of reliable sources of health information</li> <li>basic gathering and searching techniques i.e. defining and using keywords and effective use of internet search engines</li> <li>summarising information</li> <li>presentation of health information in simple report formats</li> </ul>	<ul style="list-style-type: none"> <li>common health terminology</li> <li>identification of health issues and concerns</li> <li>criteria for choosing reliable sources of health information</li> <li>effective data collection techniques i.e. keywords and phrases that define the issue</li> <li>combination and summary of information</li> <li>techniques for drawing of general conclusions</li> <li>reporting of findings to others in simple ways</li> </ul>	<ul style="list-style-type: none"> <li>identification of health concerns and issues</li> <li>effective searching techniques using a variety of reliable and accurate sources and perspectives</li> <li>combination of information and connecting similar ideas/information</li> <li>drawing of conclusions</li> <li>communication of findings in differing styles e.g. poster presentation, oral, PowerPoint</li> </ul>	<ul style="list-style-type: none"> <li>development of health focus questions</li> <li>inquiry plans i.e. type of information to be collected, timeline and audience for inquiry</li> <li>tools for organising information e.g. mind and concept maps, grouping like information</li> <li>techniques for referencing</li> <li>combination, summary and analysis of information including identification of trends and patterns</li> <li>techniques for developing substantiated conclusions</li> <li>communication of findings using common health discourse and styles to suit different audiences</li> </ul>

Content areas covered in the *Licensed* support materials are in **bold** and **lime green**.

## Unit overview

The following table shows the links of the specific content areas to the content organisers, the suggested activities and strategies, and the assessment tasks covered in this unit.

	Content area	Suggested activities	Resources	Page
Health concepts	<b>Health principles, frameworks, models and theories</b> <ul style="list-style-type: none"> <li>public health with emphasis on prevention and health promotion</li> <li>health promotion in your community: agents and agencies and their role in promoting health e.g. local drug action groups, non-government organisations (NGOs), community action groups for special events – Leavers</li> </ul>	<b>Activity: Road safety promotion</b> Examines road safety strategies and local road safety initiatives.	<ul style="list-style-type: none"> <li>Teacher notes: <i>Health promotion</i></li> </ul>	150
			<ul style="list-style-type: none"> <li>Activity sheet: <i>Road safety promotion</i></li> <li>Road safety brochures and campaign materials</li> <li>Resource sheet: <i>Road safety promotion</i></li> <li>Internet access</li> </ul>	154 155
	<b>Healthcare systems</b> <ul style="list-style-type: none"> <li>local, state and federal government responsibilities for health</li> <li>issues around responsibilities for health care in Australia e.g. workforce shortages, waiting lists, funding for health</li> </ul>	<b>Activity: Road safety around schools</b> Uses the Western Australian Local Government RoadWise resource <i>Guidelines for road safety around schools</i> and School Drug Education and Road Aware's resource, <i>Getting it Together: A Whole-School Approach to Road Safety Education</i> , to identify road safety issues in the school environment and effective strategies to address the issues.	<ul style="list-style-type: none"> <li>Activity sheet: <i>Road safety around schools</i></li> <li><i>Getting it Together: A Whole-School Approach to Road Safety Education</i> resource</li> <li><i>Guidelines for road safety around schools</i> resource</li> </ul>	156
			<ul style="list-style-type: none"> <li>Teacher notes: <i>Road safety statistics</i></li> <li>Activity sheet: <i>Crash data</i></li> <li>Resource sheet: <i>Crash data 1</i></li> <li>Resource sheet: <i>Crash data 2</i></li> <li>Resource sheet: <i>Crash data 3</i></li> <li>Resource sheet: <i>Searching for answers</i></li> <li>Internet access</li> </ul>	157 158 159 160 161 162
<b>Actions and strategies for health</b> <ul style="list-style-type: none"> <li>assessment of the health and wellbeing of young Australians</li> <li>measures of health status in Australia i.e. life expectancy, morbidity and mortality, incidence and prevalence of disease</li> <li>current Australian health priorities</li> <li>strategies for improving life expectancy with focus on prevention, importance of intervention, healthy environments</li> </ul>	<b>Activity: Buckle up</b> Explores issues surrounding the use of restraints in motor vehicles and strategies to improve driver and passenger compliance with restraint laws.	<ul style="list-style-type: none"> <li>Activity sheet: <i>Buckle up</i></li> </ul>	163	
		<ul style="list-style-type: none"> <li>Resource sheet: <i>Buckle up – attitudes and facts</i></li> <li>Internet access</li> </ul>	164	
	<b>Assessment task: Community action plan (40 marks)</b> Investigate an alcohol-related road incident. Survey members of the local community, investigate local laws and policies and develop strategies to help reduce further incidents of this kind.		<ul style="list-style-type: none"> <li>Assessment task: <i>Response</i></li> <li>Resource sheet: <i>Research</i></li> <li>Resource sheet: <i>Alcohol-related scenario</i></li> <li>Resource sheet: <i>Action plan</i></li> <li>Part A Marking key: <i>Research</i></li> <li>Part B Marking key: <i>Community action plan</i></li> <li>Part C Marking key: <i>Implementing a strategy</i></li> </ul>	165 167 168 169 170 171 172
	<b>Part A:</b> Research			
	<b>Part B:</b> Community action plan			
	<b>Part C:</b> Implementing a strategy			

## Teacher notes: Health promotion

The information and activities are designed to cover the following content from the Health Studies Unit 1DHEA:

### Health principles, frameworks, models and theories

- public health with emphasis on prevention and health promotion
- health promotion in your community: agents and agencies and their role in promoting health
- use of models to inform practical programs to promote health of groups and communities i.e. promoting health at school using Health Promoting Schools (HPS).

### Health promotion

Health promotion, as defined by the World Health Organisation, is the process of enabling people to increase control over, and to improve, their health.

The Ottawa Charter (1986) defines health promotion as:

'...the process of enabling people to increase control over, and to improve, their health. To reach a state of complete physical, mental and social wellbeing, an individual or group must be able to identify and to realise aspirations, to satisfy needs, and to change or cope with the environment. Health is, therefore, seen as a resource for everyday life, not the objective of living. Health is a positive concept emphasising social and personal resources, as well as physical capacities. Therefore, health promotion is not just the responsibility of the health sector, but goes beyond healthy lifestyles to wellbeing.'

### Health promotion in Australia

Australia has a strong history of action in health promotion and disease prevention over the past 25 years. This has been a major factor in improving the health of the Australian population over that period.

Today most Australians enjoy much better health than their parents or grandparents did. Australian males born in the last few years can expect to live for 77.5 years, more than seven years longer than their counterparts born 20 years earlier.

Australia has one of the lowest mortality rates in the OECD, and is ranked fourth on quality of life indicators published by the World Health Organisation.

### What is a health promoting school?

'A health-promoting school is a school that is constantly strengthening its capacity as a healthy setting for living, learning and working.' *National Framework for Health Promoting Schools 2000-2003*

The *Health Promoting Schools Framework* is based on the principles of the Ottawa Charter for Health Promotion (Ottawa, 1986) and was initiated by the World Health Organisation.

A health promoting school is one that is based on a social model of health. This model takes into account the physical, and social and emotional needs of all members of the school community. A Health Promoting School consciously sets about positively promoting and supporting healthy practices. It regards the health of its students and those in the school community as a high priority.



*Health Promoting Schools Framework  
(World Health Organisation, 1986)*

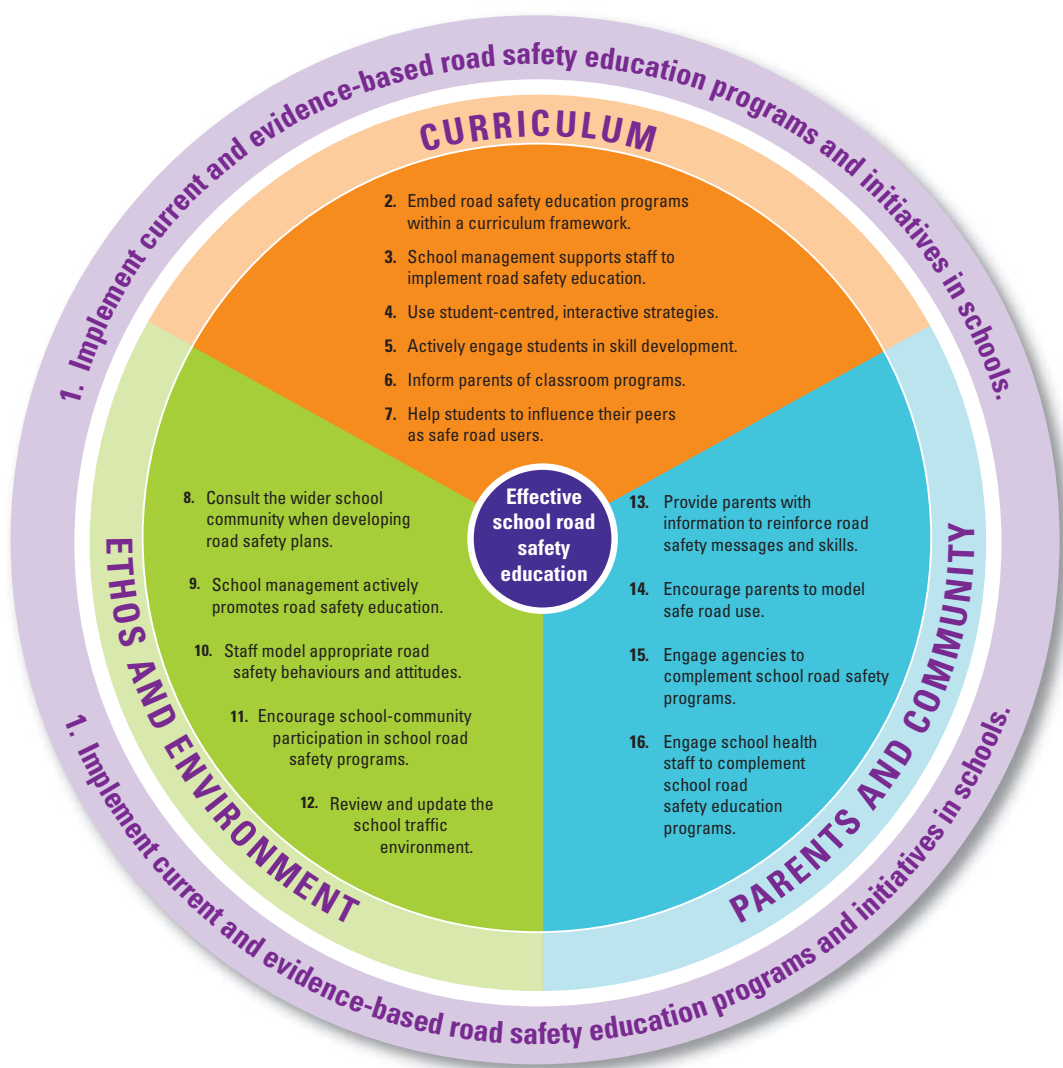
Health promoting school communities make a positive contribution to health and learning outcomes through the interrelationship of three important areas: curriculum, teaching and learning practices; school organisation, ethos and environment; and parents and community.

**Principles for School Road Safety Education**

The *Principles for School Road Safety Education* (SDERA, 2009) are 16 evidence-based principles, reflecting best practice in road safety education alongside the *Health Promoting Schools Framework*. The 16 evidence-based Principles when combined with the *Health Promoting Schools Framework* form the *Effective School Road Safety Education Model* (© SDERA, 2009).

This clear and practical model of effective school road safety education is described in the resource, *Getting it Together: A Whole-School Approach to Road Safety Education*. The resource also includes sample action plans and School Road Safety Guidelines.

This Model and the Principles should be considered when planning whole-school road safety education strategies.

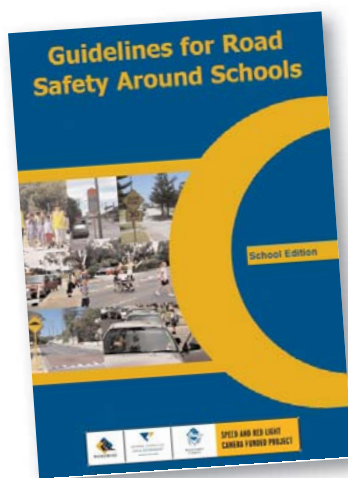
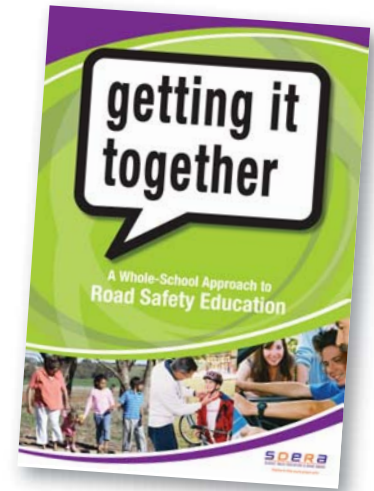


Note: Only the key aspects of each Principle are shown in the *Effective School Road Safety Education Model*.



### Road safety resources

*Getting it Together: A Whole-School Approach to Road Safety Education* (SDERA, 2009) was distributed to all schools. The resource includes action plans and sample School Road Safety Guidelines to help school communities identify and develop relevant and practical road safety strategies and initiatives. The content is based on the 16 evidence-based *Principles for School Road Safety Education*.



The WA Local Government Association's RoadWise Program has developed *Guidelines for road safety around schools*. These guidelines are a comprehensive package of information, tools and advice to assist Local Governments and school communities to identify and address traffic management and road safety issues around schools.

### Road safety activities and initiatives that support the Health Promoting Schools Framework

There are a range of activities that schools can undertake to improve road safety outcomes in and around the school community. All of these activities can and should be included in an action plan developed by a school road safety leadership group or student road safety committee.

#### School ethos and environment

- A School Road Safety Leadership Group or Student Road Safety Committee.
- Road safety issues in the school community are identified and an action plan is developed to address these.
- School Road Safety Guidelines are developed in consultation with staff, parents and students.
- Safer school road safety environmental strategies are implemented (e.g. Safe Routes to School; Walking Bus; Kiss and Drive parking bays).
- Safer road safety behaviours are promoted through newsletters tips, assembly items and library displays.
- Special school road safety events such as Bike to School or Walk to School days; Kiss and Drive bays; White Ribbons for Road Safety; or the Blessing of the Roads Easter campaign. These should be implemented in accordance with risk management and duty of care guidelines.
- Assembly items each term about some aspect of school road safety including reports for the committee, songs and skits by other students and/or guest speakers.
- Buddy road safety activities with lower primary students such as correct crossing of the road with a Traffic Warden.



### Parent and community involvement

- Implement the *Smart Steps* program for parents and carers of children from birth to four years of age (refer to SDERA's website).
- The at home activities in the SDERA *Challenges and Choices* resources for early and middle childhood, and early adolescence are distributed to parents through their children.
- Parents of teenagers attend the *Keys for Life* workshop as part of the pre-driver education program.
- Parents are represented on the School Road Safety Leadership Group.
- Local Government representatives (engineers, rangers etc), local police, Main Roads WA are consulted to address road safety issues in the school.
- Fortnightly road safety snippets in school newsletter.
- Lobbying support from local agencies for environmental strategies that may be needed in the school road environment or wider community.

### School health curriculum

- *Challenges and Choices* resources (SDERA) for early and middle childhood, and early adolescence are implemented in all year levels.
- *Keys for Life* pre-driver education program (SDERA) for students in Year 10, 11 and 12 implemented each year.
- Staff attend SDERA professional development that focuses on road safety issues.
- Students, parents and teachers have input into school road safety issues addressed through the curriculum.
- Student evaluation of classroom and whole school road safety strategies that have been implemented.

## Activity: Road safety promotion

This activity will help students to:

- become familiar with a range of road safety promotional strategies
- identify road safety initiatives in the local area.

### Resources

- Internet access
- Resource sheet: *Road safety promotion* – one per student
- Road safety brochures/advertising material for the class

### How is it implemented?

1. In groups, students examine an initiative that is aimed at reducing road trauma on WA roads. Examples are provided on the Resource sheet: *Road safety promotion*.
2. Suggest students use the internet or any other source of reliable information (e.g. local police, road safety personnel) to find more information about the aims, objectives, funding and implementation of the initiative. Reliable websites include:
  - [www.ors.wa.gov.au](http://www.ors.wa.gov.au) (Office of Road Safety)
  - [www.mainroads.wa.gov.au](http://www.mainroads.wa.gov.au) (Main Roads)
  - [www.dpi.wa.gov.au](http://www.dpi.wa.gov.au) (Department of Transport)
  - [www.atsb.wa.gov.au](http://www.atsb.wa.gov.au) (Australian Transport and Safety Bureau)
3. Students present their findings to the class using a suitable presentation method.
4. Discuss road safety initiatives that students feel are needed in their community. The following questions can be used to guide this discussion.
  - *How could these initiatives be implemented?*
  - *Who would be the target audience?*
  - *What would the benefits be to the community?*
  - *Would this initiative require funding, and if so, what level of funding?*
  - *Who could you or a member of the local community, approach to discuss this idea?*



# Road safety promotion

## Walking School Bus (<http://www.dpi.wa.gov.au/travelsmart>)

The Walking School Bus is a popular way of encouraging young children to walk to school together. It works like a motorised bus picking up 'passengers' along the way at designated 'bus stops'. In Western Australia, the Department for Planning and Infrastructure's TravelSmart Program coordinates the implementation of the Walking School Bus.

The Walking School Bus operates as a supervised group of children walking to and from school along a safe and enjoyable set route. The group is accompanied by at least two parent supervisors. One parent 'drives' at the front of the walking school bus, while the other parent supervises at the rear. The same or different supervisors accompany the children to and from school. Additional parents may be needed depending on the walking environment



## Bin stickers (<http://www.roadwise.asn.au/resources/projects/bin>)

Speeding drivers have been identified as a main contributing factor in road-related deaths and serious injury in Western Australia. The Road Safety Council of WA is committed to reducing the speed of vehicles on WA roads and continues to conduct regular community education campaigns targeting speed.

Road safety measures such as the 50 km/h speed limit on local roads have also been introduced to assist in the reduction of speeds in local neighbourhoods.

There are also other road safety initiatives that can be implemented to encourage drivers to slow down and to make local roads safer. A bin sticker initiative is one that the whole community can participate in to save lives on local roads. The initiative involves attaching a sticker, which displays the message 'Please slow down, consider our kids', onto household council wheelie bins.

## Sign of Safety

(<http://www.roadwise.asn.au/resources/projects/sign>)

This campaign encourages wineries to display road safety signs at the entry and exit of their property. The signs displaying the statements 'Who is the skipper?' and 'Belt up', are funded by the Insurance Commission of WA. This project was introduced in the south-west region of WA in July 2001. Of the wineries contacted, 80% elected to participate in the program. The signs encourage safe driving practices and target both tourists and locals visiting wineries. They attempt to promote a safe environment for travel within the region by raising awareness of two key road safety issues – driving after consuming alcohol, and the use of seat belts. This initiative is a great opportunity for individual wineries to show goodwill and concern for their patrons, and to support the safe service of alcohol practices.



## Speeding campaign

(<http://www.ors.wa.gov.au/index.cfm?event=topicsSpeeding>)

This commercial focuses on the important role WA Police play in keeping drivers safe on WA roads. It highlights that speed enforcement occurs in a variety of settings. The commercial also aims to educate drivers that if they continue to drive above the posted speed limit they could lose their licence – in a flash!

## Activity: Road safety around schools

This activity will help students to:

- identify road safety issues in the school environment and develop strategies to address these issues
- gain a greater awareness and commitment to school road safety
- use the Health Promoting Schools model in implementing road safety strategies in a school environment.

### Resources

- *Getting it Together: A Whole-School Approach to Road Safety Education* resource (available online at [www.sdera.wa.edu.au](http://www.sdera.wa.edu.au))
- *Guidelines for road safety around schools* resource ([www.roadwise.asn.au/schools](http://www.roadwise.asn.au/schools))

### How is it implemented?

1. Form a Student Road Safety Committee.
2. Conduct a school road safety survey of parents/families using the *School Road Safety Survey Form* (in the *Guidelines for road safety around schools*) to determine the popular routes to school and problem areas around the school.
3. Collect and interpret data from this survey using the *Safe Routes to School Access* database program.
4. Help students to determine road safety issues around the school. Identify no more than three key issues for the committee to plan strategies to address each term.
5. In order to plan strategies that the committee will undertake, students should use either one of two actions plans provided in SDERA's *Getting it Together: A Whole-School Approach to Road Safety Education* resource or WALGA's RoadWise resource, *Guidelines for road safety around schools*.
6. Consider who will need to authorise the action plan before it is implemented.
7. Review the progress of the action plan by checking if the planned strategies have been implemented.

## Teacher notes: Road safety statistics

The information and activities are designed to cover the following content from the Health Studies Unit 1DHEA:

### Actions and strategies for health

- assessment of the health and wellbeing of young Australians
- measures of health status in Australia i.e. life expectancy, morbidity and mortality, incidence and prevalence of disease
- current Australian health priorities
- strategies for improving life expectancy with focus on prevention; importance of intervention, health environments.

### Road safety statistics

It is important that students are taught about reading, understanding and interpreting statistical data relating to road crashes.

We are constantly presented with numerical and statistical information about car crashes, rates of fatalities and injuries for different age groups, types of crashes, the influence of alcohol and drugs in crashes and location of crashes. It's all too easy for many of us to dismiss the WA road toll as numbers on a page, however it is important that we not only understand the information we are presented with, but that we interpret and reflect on this information.

The Australian Department of Infrastructure, Transport, Regional Development and Local Government's road safety activities include undertaking research projects to improve national road safety, research and statistical analysis, coordination of the National Road Safety Strategy and Action Plan, and publication of road fatality statistics.

Road crashes are a huge cause of human trauma. Since record keeping commenced in 1925, there have been over 169 000 road fatalities in Australia. In addition to the burden of personal suffering, the monetary cost of crashes is in the order of \$15 billion per annum (1996 data).

From 1970 until 2002, the fatality rate dropped from 30.4 to 8.8 deaths per 100 000 population. This reduction has been achieved in spite of a huge increase in motor vehicle use. From 1970 to 2002, the fatality rate per 10 000 registered vehicles has dropped from 8.0 to 1.4. In terms of 100 million vehicle-kilometres travelled the fatality rate has dropped from 4.4 in 1970 to 1.0 in 2000.

Statistical information is available at a number of Australian websites:

- [www.infrastructure.gov.au/roads/safety](http://www.infrastructure.gov.au/roads/safety) (Department of Infrastructure, Transport, Regional Development and Local Government)
- [www.officeofroadsafety.wa.gov.au](http://www.officeofroadsafety.wa.gov.au) (Office of Road Safety)
- [www.mainroads.wa.gov.au](http://www.mainroads.wa.gov.au) (Main Roads WA)
- [www.tacsafety.com.au](http://www.tacsafety.com.au) (Transport Accident Commission crash database)
- [www.atsb.gov.au](http://www.atsb.gov.au) (Australian Transport Safety Bureau)

## Activity: Crash data

This activity will help students to:

- increase their awareness and knowledge of the range of factors and causes relating to casualty and fatality crashes
- investigate data and statistics related to road crashes
- gain an understanding of the benefit of research into road toll and crashes.

### Resources

- Resource sheet: *Crash data 1* – one per student
- Resource sheet: *Crash data 2* – one per student
- Resource sheet: *Crash data 3* – one per student
- Resource sheet: *Searching for answers* – one per student
- Road Deaths Australia 2006 Statistical Summary pages 4,7,8,9,12,13,14 at [http://www.infrastructure.gov.au/roads/safety/publications/2007/pdf/mrf\\_2006.pdf](http://www.infrastructure.gov.au/roads/safety/publications/2007/pdf/mrf_2006.pdf) – one copy per group
- Internet access

### How is it implemented?

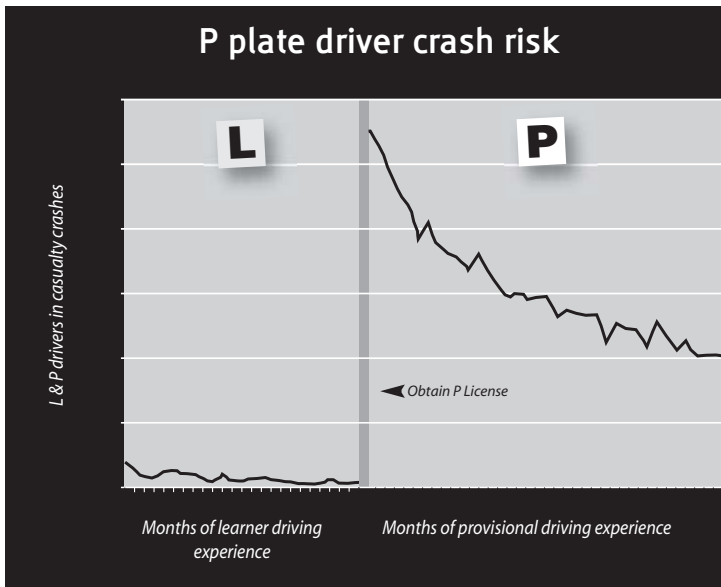
1. Explain that most states and territories of Australia collect a wide range of information about road crashes and the road toll. This information is often presented using graphs, tables and charts to relate statistics relevant to types of road users, age groups and gender. Point out these statistics highlights causal factors of road crashes such as fatigue, use of alcohol and other drugs, speed, time of day and weather conditions.
2. Students interpret a range of road safety statistics and information on Resource sheets: *Crash data 1, 2* and *3*. This can be done either individually or in small groups.
3. Discuss findings as a group.
4. Photocopy the relevant pages from the *Road Deaths Australia 2006 Statistical Summary* (or use more recent publications if available) and give a copy to each group of students. Explain that students are to examine the statistics in the summary then answer the questions on Resource sheet: *Searching for answers*.
5. Share responses as a class.
6. Conclude with a range of the suggested processing questions or others that may have arisen in the discussion.
  - *What role do statistics play in analysing road toll and crashes?*
  - *What is the benefit of this kind of research?*





# Crash data 1

## P plate driver crash risk



What is the key message in each graph?

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How effective is the method of representing the data? Why?

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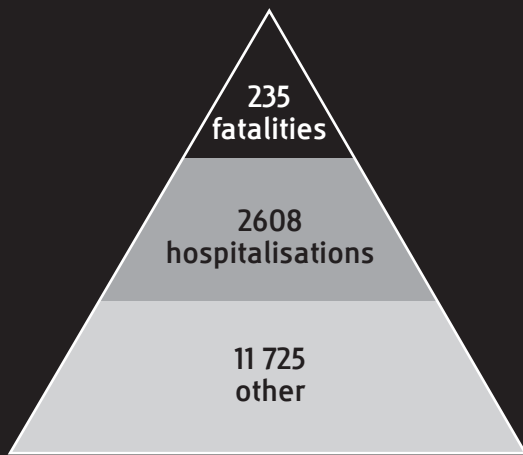
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## Western Australian road crash statistics 2007



What other ways could you illustrate this data?

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## In 2008, 209 Western Australian were killed in road crashes

(compared with 235 road crash fatalities in 2007)



- 106 drivers
- 44 passengers
- 36 motorcyclists
- 19 pedestrians
- 3 cyclists
- 1 unknown

Over 3000 people were hospitalised. Total cost to the WA community was > \$2.1 billion.



# Crash data 2

Western Australia's road fatalities year to date - as at 1 October 2009

Year	Metropolitan	Regional WA	Total
2005	48	80	128
2006	63	82	145
2007	60	114	174
2008	68	79	147
2009	44	81	125

Yearly road fatalities in Western Australia (Totals)

1999 – 217	2004 – 178
2000 – 212	2005 – 163
2001 – 165	2006 – 201
2002 – 179	2007 – 236
2003 – 180	2008 – 209

Source:  
<http://www.ors.wa.gov.au/index.cfm?event=researchRoadTollStats>

Describe the trend in road fatalities in Western Australia.

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What factors may contribute to the increase or decrease in road fatalities?

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Compare and describe the road fatalities in metropolitan and regional areas of WA.

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What other information would be needed in order to determine whether it is more dangerous to be a road user in metropolitan WA or regional WA?

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Describe the trend in fatalities in WA from 1999 to 2008. What factors may have contributed to the increase or decrease in road fatalities over these years?

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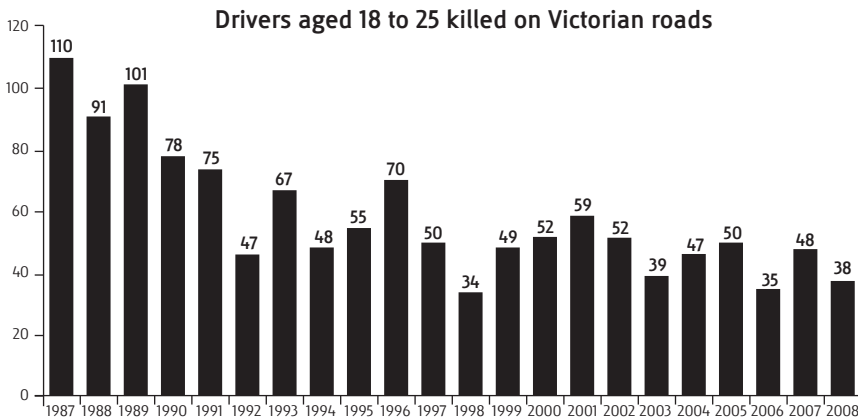
# Crash data 3

## Young driver statistics in Victoria

In 2008, 27% of drivers killed were aged between 18 and 25 years. This age group only represents 13% of all Victorian licence holders.

Of the 38 young drivers killed in Victoria in 2008:

- 74% were males
- 34% were killed on country roads
- 74% were killed in single vehicle crashes
- 68% were involved in crashes that occurred during high alcohol times
- the days when fatal crashes were most frequent were Sunday (24%), Friday (13%) and Saturday (26%)
- 55% of crashes occurred between the hours of 8pm and 6am
- 52% of deaths occurred on 100km/h and 110km/h sign posted roads.



Source: [www.tacsafety.com.au](http://www.tacsafety.com.au)

Explain the trend shown in this graph.

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What factors may have contributed to this result?

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What factors may account for the fact that a high percentage of Victoria's road toll was young drivers between the age of 18 and 25 years of age?

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What measures do you think should be taken to address these facts?

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# Searching for answers

**Questions**

**Answers**

Which gender was most represented in road fatalities – males or females? Give possible reasons for this.

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What other differences were there between the types of road users? Describe these.

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Which age groups are most at risk of being a casualty? Give possible reasons for this.

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Which road user group was most at risk?

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Within what speed range do most fatal crashes occur?

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Are there times of the day and days of the week when more fatalities occur?

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What might explain the findings around the number of fatalities occurring on certain days of the week or times of the day?

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What other statistics might support these findings?

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Greater numbers of pedestrians appeared to be killed in road crashes in the evening. Provide an explanation for this.

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Summarise the main problems that were highlighted in the data.

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What key road safety messages and/or strategies need to be communicated to the public?

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How could these messages be conveyed to young people?

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## Activity: Buckle up

This activity will help students to:

- become familiar with issues surrounding the use of restraints in motor vehicles
- explore strategies to improve the use of seat belts in motor vehicles.

### Resources

- Resource sheet: *Buckle up – attitudes and facts* – one per student
- Internet access to the Office of Road Safety website [www.ors.wa.gov.au](http://www.ors.wa.gov.au)

### How is it implemented?

1. Explain that injuries, including road injuries, are one of the major preventable causes of death in Australia, and therefore remain an Australian health priority. Crash data and serious casualty figures continue to show that non-use of restraints is still a an issue for all age groups and genders. Research shows that over 90% of people wear seat belts when in the front of a car, however only 57% of adults wear seat belts in the rear of cars, even though it is a legal requirement.
2. The Resource sheet: *Buckle up* can be used to introduce the topic of seat belts or as an alternative to the interview activity.
3. Students work in groups of three or four to conduct a survey to determine if seat belts are being worn in the local school community area. Point out to students that decisions about the type of data collected needs to be made before constructing the survey and recording devices. Some questions to guide this include:
  - *How many cars will be included in the survey?*
  - *Will all types of restraints or only lap-sash seat belts be recorded?*
  - *Will the location of the passengers in the vehicle be included?*
  - *Is the driver's and passengers age to be included?*
4. Students present their results in a chart or graph to the whole class. Discuss whether the results are surprising to class members or what was expected.
5. Students write an invitation to a local road safety officer, police officer or local councillor. The invitation should explain that students are interested in the speaker's views about seat belt wearing in the community and also information on campaigns addressing this issue.
6. Devise a local campaign to publicise the importance of wearing a seat belt. Consider who the target audience would be and how to make the campaign effective. View previous seat belt campaigns on the internet for ideas. Present the campaign as a poster, TV commercial, newspaper article or advertisement.



# Buckle up - attitudes and facts

## Did you know?

Passengers travelling unrestrained in a car are ten times more likely to be killed in a road crash than those wearing a seat belt.

(Data Analysis Australia 2000).

## Research topics

### Seat belt campaigns

Collect evidence of seat belt campaigns. You may find these on the internet, in newspapers or on the radio. Determine:

- who is the target audience
- who has funded the campaign
- what is the key message

### Penalties for not wearing seat belts

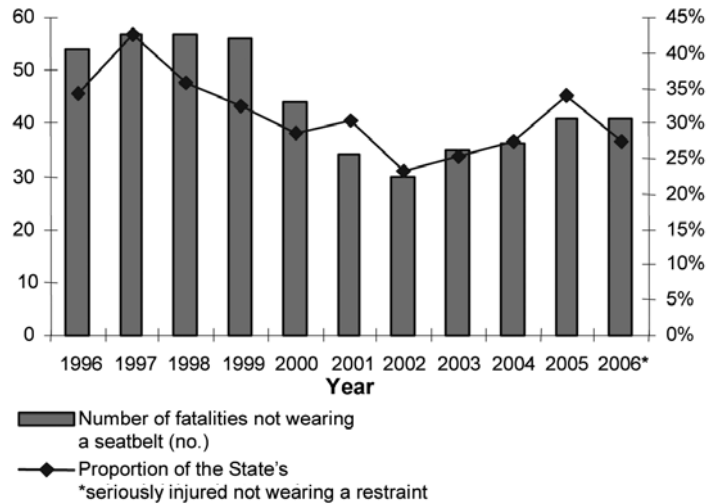
Find out the penalties for not wearing a seat belt in Western Australia.

Do you think that increasing the penalties for not wearing a seat belt would reduce the number of people who choose not to wear a seat belt?

### Seat belts and the law

- When was legislation first introduced requiring seat belts to be fitted to motor vehicles in WA?
- When did it become law to wear seat belts in WA?
- When did child restraints become compulsory in WA?
- Make a timeline showing the history of legislation regarding the use of seat belts in WA.

Vehicle Occupant Fatalities Not Wearing a Seatbelt, 1996-2006



## What are your views about seat belt wearing?

Do you think seat belts saves lives?

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Should it be compulsory or personal choice to wear a seat belt?

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## Seat belt scenario

Imagine that you are the driver of a car. You put your seat belt on but your four friends do not.

Decide what tactics you could use to encourage your friends to put on their seat belts.

What will you do if they continue to refuse to wear a seat belt?

In groups, role-play this scenario showing what the driver does and the response of the friends.





### Type of assessment

#### Response

Students apply their knowledge and skills in analysing and responding to stimuli or prompts.

At the end of this unit you will be required to demonstrate how you work in a small group and apply your knowledge to research, investigate and then develop community action plans related to road trauma. The activity will provide the opportunity for you to demonstrate your understanding of a response type assessment.

*This assessment task is worth 40 marks.*

**Outcomes:** Outcome 1: Knowledge and understandings; Outcome 2: Beliefs, attitudes and values; Outcome 3: Self-management and interpersonal skills; Outcome 4: Health inquiry skills and processes

**Content:** Health concepts; Health principles, frameworks, models and theories; Actions and strategies for health; Health care systems

**Context:** Road safety.

### Task 1: Develop community actions to reduce the likelihood of alcohol-related road trauma. (40 marks)

#### What you need to do

Complete Part A, B and C of the assessment task described below.

<b>Part A:</b> Research	<b>Part B:</b> Community action plan	<b>Part C:</b> Implementing a strategy
15 marks	15 marks	10 marks

#### Part A: Research (15 marks)

- Form small groups. Complete the research sheet for three research questions (one sheet per question).
- Conduct research into alcohol-related road injuries in Australia. Possible areas of research may include:
  - current statistics
  - trends
  - laws and regulations regarding drinking and driving.
- Make sure that you select reliable sources of information and summarise (using bullet points) your findings into your own words.



**Part B: Community action plan (15 marks)**

1. Read through the scenario and answer the questions related to this incident.
2. Use the Action Plan template to record the strategies your group decides to implement.

**Part C: Implementing a strategy (10 marks)**

1. Demonstrate how you would implement one of your strategies. This could be a letter to local council or an advocacy group for support, a poster to create awareness of drink driving issues or a request to Government to change the laws regarding drinking and driving.



# Research

Name of group members \_\_\_\_\_  
\_\_\_\_\_

*Write each research question on a separate sheet and record your notes (in point form) and sources of information.*

Research question: \_\_\_\_\_

*(1 mark)*

Notes	Source of information

*(3 marks)* *(1 mark)*



# Alcohol-related scenario

Your local hotel advertises 'happy hour' every Friday from 5 to 6pm. Drinks are half price and a live band performs. Many young university students frequent 'happy hour' each Friday. They generally stay until early evening and then drive home.

Recently a group of university students, leaving the hotel, knocked a teenage boy off his bike. The boy broke his arm, but fortunately was not seriously injured.

The community is very upset and concerned about the practices of the hotel and the likelihood of a more serious accident occurring.

Members of the community have decided to form a group to tackle this problem.

The group will need to identify strategies to reduce injuries as a result of drinking and driving in your local area.

Group members: \_\_\_\_\_  
\_\_\_\_\_

**Use the following questions to assist you to formulate a list of strategies that could be used to tackle this community problem. Strategies can then be recorded on the Action plan.**

1. Suggest three ways that this situation could have been avoided.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. List at least three structural strategies that could be employed to reduce harm in the future.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What are the benefits to this community for each of these structural strategies?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Based on the above information, which strategy or strategies would your group choose and why?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. How could you implement this strategy?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# Action plan

Group members: \_\_\_\_\_

The aim of this action plan is... \_\_\_\_\_

<b>What is to be done?</b> <small>List the strategy or strategies selected.</small>	<b>How could this strategy be implemented?</b>	<b>What resources are required?</b>	<b>What groups could provide assistance?</b>
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## Part A Marking key: Research (15 marks)

Name: \_\_\_\_\_

Criteria	Marks allocated	Marks awarded			Total
		Q1	Q2	Q3	
Focus question for research is: <ul style="list-style-type: none"> <li>• relevant, specific and clear</li> </ul>	1				
Source(s) of information is: <ul style="list-style-type: none"> <li>• reliable and clearly referenced.</li> </ul>	1				
The research notes are: <ul style="list-style-type: none"> <li>• summarised clearly in own words; relate directly to the research question; use appropriate health language</li> <li>• clear and relevant</li> <li>• limited; or no attempt has been made to summarise in own word.</li> </ul>	3 2 1				
<b>Total mark</b>					<b>/15</b>

### Teacher feedback:

Use the feedback to refine your planning before starting the action plan.



## Part B Marking key: Community action plan (15 marks)

Name: \_\_\_\_\_

Criteria	Marks allocated (circle score)
Strategies are: <ul style="list-style-type: none"> <li>realistic and appropriate for this group to implement; actions are directed at promoting and protecting health within the community e.g. prevention; at least three strategies have been listed</li> <li>mostly realistic and appropriate for this group to implement; or only two strategies have been described</li> <li>described clearly, but would not be appropriate for this group to implement.</li> </ul>	3  2  1
The evaluation of the benefits of each strategy is: <ul style="list-style-type: none"> <li>accurate and well explained; draws on facts/ statistics or previous experiences</li> <li>mostly accurate and well explained</li> <li>explained briefly.</li> </ul>	3  2  1
The explanation of the selection of strategy for the action plan is: <ul style="list-style-type: none"> <li>clear and logical; draws on facts/ statistics or previous experiences to justify selection</li> <li>mostly clear and logical; some justification based on facts/ statistics is provided</li> <li>limited; little or no justification is provided for the selection.</li> </ul>	3  2  1
Description of how to implement the strategy is: <ul style="list-style-type: none"> <li>logical, detailed and clear; considers all stakeholders</li> <li>clear easy to follow; considers some community members</li> <li>brief; only basic information has been provided.</li> </ul>	3  2  1
Identification of resources/groups is: <ul style="list-style-type: none"> <li>comprehensive i.e. a variety of resources / groups have been identified (at least three); valid and reliable</li> <li>detailed; only two reliable resources have been identified</li> <li>limited; only one reliable resource has been identified.</li> </ul>	3  2  1
<b>Total mark</b>	
<b>/15</b>	

Teacher feedback:

## Part C Marking key: Implementing a strategy (10 marks)

Name: \_\_\_\_\_

Criteria	Marks allocated (circle score)
The presentation is: <ul style="list-style-type: none"> <li>• clear, logical; appropriate for task; suitable for intended audience</li> <li>• reasonably clear and appropriate for task</li> <li>• satisfactory; or presentation is not appropriate for target audience.</li> </ul>	3 2 1
The task selected is: <ul style="list-style-type: none"> <li>• an appropriate method of implementing the strategy i.e. this task is likely to have a positive result; main message is very clear</li> <li>• an appropriate method of implementing the strategy; main message is understood</li> <li>• an appropriate method of implementing the strategy; main message is unclear</li> <li>• not relevant to any of the strategies that has been identified.</li> </ul>	4 3 2 1
Language <ul style="list-style-type: none"> <li>• use of appropriate language for audience; health terminology used</li> <li>• some use of health terminology; appropriate for audience</li> <li>• little health terminology used; or not appropriate for this audience</li> </ul>	3 2 1
<b>Total mark</b>	<b>/10</b>

Teacher feedback:

Part A	Part B	Part C	Total assessment mark
/15	/15	/10	/40