

Case Studies and Activities for BTEC First in Health and Social Care



Unit 5: Promoting Health and Wellbeing



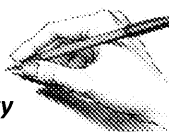
ZigZag is a large community of over 6000 teachers & educationalists.
Review new titles or publish your own work

Fancy being involved?

Then register at...

publishmenow.co.uk

The Professional Publishing Community



Alternatively email new resource ideas directly to...
publishmenow@zigzageducation.co.uk

Contents

Thank You for Choosing ZigZag Education.....	ii
Teacher Feedback Opportunity	iii
Terms and Conditions of Use.....	iv
Teacher's Introduction.....	1
Background Material	2
The Thornton Green Scenario.....	2
Presentation 1: The Health Visitor	3
Presentation 2: The Dietician	4
Presentation 3: The Health and Fitness Officer	5
Case Study 1: Maria and Family	6
Case Study 2: The Bradfields	7
Case Study 3: Ivy	8
Activities.....	10
Introductory Activity	10
<i>Introductory Activity 1 (The vocabulary of health promotion)</i>	10
Learning Aim A: Explore the purpose, types and benefits of health promotion.....	13
<i>Activity A1 (The importance of a healthy lifestyle)</i>	13
<i>Activity A2 (The purposes and aims of health promotion)</i>	14
<i>Activity A3 (Medical intervention)</i>	15
<i>Activity A4 (Advising on particular health problems)</i>	16
<i>Activity A5 (The benefits of exercise)</i>	18
<i>Activity A6 (The national benefits of health promotion)</i>	21
Learning Aim B: Investigate how health risks can be addressed through health promotion..	23
<i>Activity B1 (Developing a health promotion plan)</i>	23
<i>Activity B2 (Researching health risks)</i>	25
<i>Activity B3 (Evaluating health promotion campaigns)</i>	28
<i>Activity B4 (Gathering data to understand a health topic)</i>	31
<i>Activity B5 (Target groups)</i>	32
Answers.....	38
Introductory Activity	38
Learning Aim A Activities	38
Learning Aim B Activities.....	42

Teacher's Introduction

This workbook has been prepared to assist students and staff with the learning aims of Unit 5 of the BTEC First Award in Health and Social Care. It comprises a collection of presentations by working health practitioners, set in the fictional town of Thornton Green. These and case studies of clients provide the basis for a range of tasks and activities for both classroom and homework use, to complement the tutor's input. It is not intended as a textbook; indeed, we do not refer to a textbook, but instead offer suggestions for students to do their own research. It also cannot replace the tutor; it is a supplementary source to facilitate teaching and learning, and could form part of a departmental virtual library.

It contains a variety of student-centred activities, discussions, tasks and practical exercises based on health situations. They are designed to encourage students to develop their knowledge and prepare them for the examination.

Similar activities have been used by the author during many years of both vocational and GCSE / Advanced Level teaching and examining, and have proved extremely successful in enhancing student motivation and improving performance.

All the worksheets are photocopiable, and they provide a valuable resource for the busy tutor. Learning takes place through practical tasks performed by the students themselves. Where relevant, suggested answers are given for the activities.

Many of the activities and case studies are based on visits to and interviews with actual practitioners to ensure that the information is as up to date and as relevant as possible. Organisations and settings may be different in different areas, and service provision may depend on practitioners' interpretation of local needs. We therefore strongly recommend that contact is made with local authorities and service providers to find out what the local situation is and how it differs from what is presented here and, if possible, to arrange visits or invite guest speakers in.

The information provided is correct at the time of writing, but legislation and circumstances change, so tutors should check the current situation for any changes.

If using this resource for assessed work, then as with all BTEC assignments they must be **internally verified**. Also you must check suitability with the board and follow the **important disclaimer notice below**.

IMPORTANT DISCLAIMER REGARDING ASSESSMENT: please check for the most up-to-date information from Edexcel at: <http://www.edexcel.com/btec/Pages/default.aspx>. Assignment details, paperwork for practical work, and requirements from the awarding bodies sometimes change after their initial published requirements and so you must check that the resource material here is in line with the latest requirements **before use**.

K Bennie, January 2015

Free updates

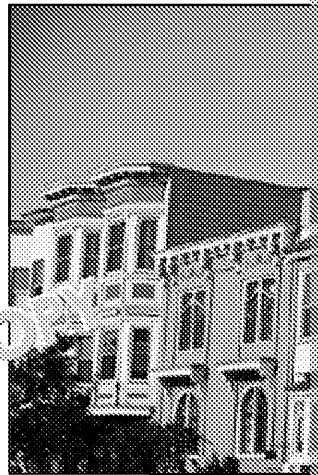
Register your email address to receive any future free updates* made to this resource or other Health and Social Care resources your school has purchased, and details of any promotions for your subject.

Go to zzed.co.uk/freeupdates

*resulting from minor specification changes, suggestions from teachers and peer reviews, or occasional errors reported by customers

The Thornton Green Scene

The presentations and case studies in this book have been drawn from health and social care settings in Thornton Green, a small market town a few miles from a major city, with several features that are typical of many towns in Britain in the twenty-first century.



A recent health survey shows that residents generally enjoy a good standard of health, but there are pockets of deprivation where health is poor, and it is in these parts that a large proportion of the area's children live.

One such area is the Greenview Estate, an area of mainly social housing, a few miles from the town centre. Access to services is generally good, but the lack of public transport has created transport issues for some elderly and poorer residents.

The local health service providers have identified the following issues: teenage pregnancy, lung cancer, hypertension, obesity, diabetes, heart disease. With an increasing number of elderly people in the area, there is a growing need for them, including residential care.

The economic crisis has led to service cutbacks and business closures, leading to a high level of unemployment. Many long-established shops have closed, as have many small shops and fast-food restaurants. A number of marginalised groups are now present, including travellers, homeless people, migrants, and new residents from Eastern Europe.

INSPECTION COPY



INSPECTION COPY

COPYRIGHT
PROTECTED



Presentation 1: The Health Visitor

My name is Cassie, and I am a health visitor attached to the Parkview Health Centre. I trained initially with a degree in adult nursing and worked in the local hospital as a nurse. After a few years of experience I decided that I wanted to work in the community with families, so I undertook further training in community health practice, to become a health visitor.

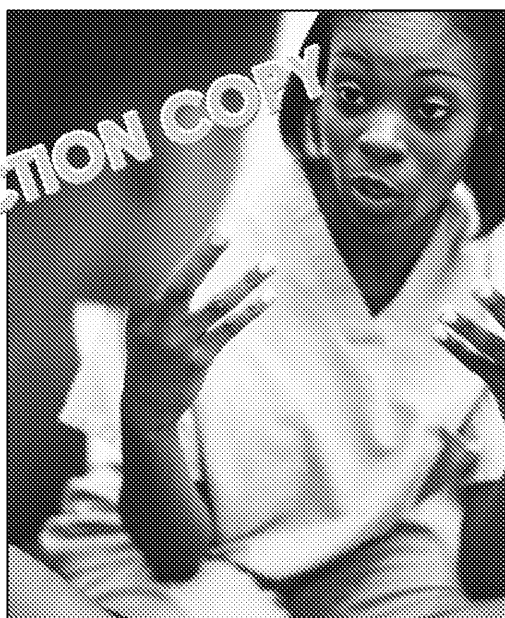
My job is very interesting and varied. My role is to meet the needs of individuals in the local area. Our local community is varied, with a number of elderly people, ethnic minorities, and we work to address the specific health needs of the population.

One of my main roles is to support new parents. I visit families, taking over where the midwife has left off. I advise parents on feeding, choice of milk, weaning and early development, safety, sleeping, babies' development, and support if there are special needs or in cases of postnatal depression. I also run parenting groups at the local centre (for example, for new mums), as well as baby clinics to check development. I also run a number of 'drop in' clinics. A lot of my work is on the Greenview Estate, where there are many problems affecting people on low incomes.

Apart from my work with new parents, I work with other health professionals on issues such as eating, fitness, sexual health, living with disability and stopping smoking. In addition to my work with new parents on immunisation, I advise others on various medical prevention measures, such as vaccination and screening. Although I am responsible for preventive health, I work alongside nurseries, children's centres and the community service in health promotion, giving talks and advice and distributing educational material.

Our local community has a health action plan, and I work in partnership with other health workers, school nurses and housing officers to support identified groups, such as the over 65 population, teenage parents, travellers and ethnic minority families.

Apart from a professional knowledge of health, I would say health visitors need to be good at listening and listening to clients of all ages and backgrounds, working as part of a team and maintaining records. It is also important to support and motivate people to lead a healthier lifestyle.



**COPYRIGHT
PROTECTED**



Presentation 2: The Dietician

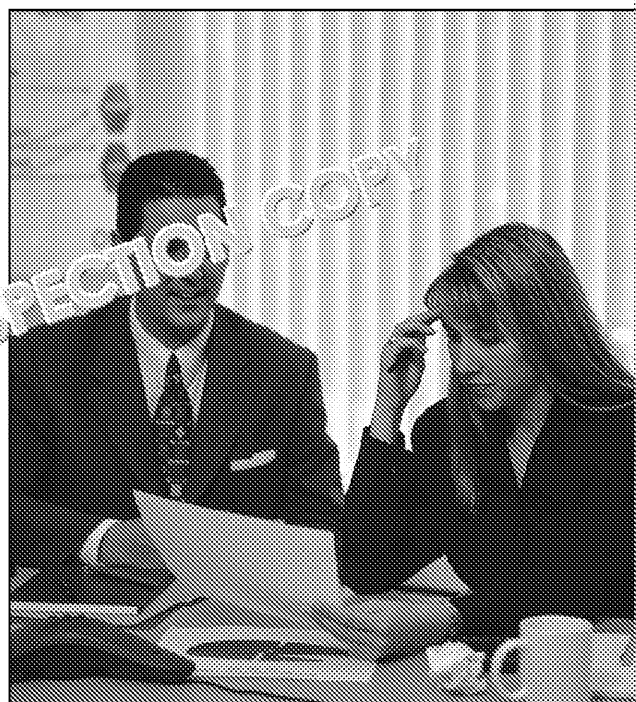
My name is Greg, and I am a dietician. I am part of the local community health team, working with a variety of people who have different nutritional needs and promoting healthy eating.

Many of my clients have conditions and factors that prevent them from leading a healthy lifestyle. I am often able to address these factors and positively affect how they feel, helping them to control or maintain their weight, or helping them with a genetic predisposition to diabetes, heart disease or conditions such as cystic fibrosis. These factors can impact on the client and can in some circumstances be controlled or alleviated.

Clients are referred to me by different health professionals, such as GPs or nurses. I also provide as much as I can about their social, cultural and emotional background, as well as their living circumstances, finance, education and religion may have a strong influence on their health. There is some evidence that men eat less well than women. In this area some elderly people have been found to suffer from scurvy because their wives have been over-protective and they are not aware of the importance of eating fresh fruit and vegetables. These factors can affect the type of food that can be prepared.

Healthy eating means different things for different people, so diets are based on individual needs. The diets of an athlete and an elderly person will differ greatly. It is also very important for school or hospital meals or meals for the elderly, to be culturally sensitive to the needs of certain foods so nutrients must be balanced. There is also evidence that rich people eat healthier diets than the less well off. So, in addition to the advice I give to my clients, I have to find ways of promoting the benefits of healthy eating to all social groups.

A number of changes have been introduced to the way we promote healthy eating, such as the Change4Life programme, use similar methods to the food companies to promote sugary foods. It has been found that 'social marketing' in the form of short films, posters, advertisements, posters at bus stops, social media, etc. has a greater impact than the 'telling us what to do' approach previously used in guidance leaflets. The local health authority and Trust in promoting nutritious and tasty school meals has also had an impact.



INSPECTION COPY

**COPYRIGHT
PROTECTED**



Presentation 3: The Health and Fitness Officer

My name is Hannah and I am the local authority's Health and Fitness Officer at the community centre. My main client groups are:

- Young people aged 18–25 who are keen to maintain or improve their fitness
- Young families, for whom we aim to provide a range of fitness activities
- Over-55s, who are mainly self-motivated people who are keen to remain active
- Professional referrals – these are mainly clients referred by the local authority following a programme of fitness and mobility following an illness

The referral group includes people recovering from a cardiac illness, hip or knee problems or osteoporosis. We provide a range of fitness activities, aiming to give people a good start in their recovery. The social aspect of the group is also very important, and we aim to support the client's recovery.

We encourage younger clients to become members of the sports centre. We also offer programmes in anxiety and stress management, as well as working with other centres, especially places such as the Greenview Community Centre, to offer things such as music and movement, pilates and aerobics classes.

As a practitioner, I use a holistic definition of health, aiming to increase access to sport and physical activity, thus increasing individual health and well-being in our communities. I am also the Walking for Health coordinator, and arrange a range of activities for all ages and abilities. The aim of this programme is to improve fitness and well-being, help with weight control, and reduce the risks of high blood pressure and heart disease.

Local authorities are now responsible for public health, so we work hard to promote health at local events such as village fetes and the Thornton Green Carnival, and we display posters in the market square on market days. We display posters at the library, the Community Centre, the Children's Centre. We try to make these as eye-catching as possible, and encourage people to notice them. A lot of our promotional work, however, is with other professionals. We work in partnership with GPs, consultants, cardiac and diabetic nurses and local health centres and hospitals display our 'Walk for Health' posters as well as using us directly.



**COPYRIGHT
PROTECTED**



Case Study 1: Maria and Family



Maria is a divorcee in her fifties. She works part-time, and lives with her mother Dorcas and her daughter Leesha, who is 18, and Leona, a baby, Zach, in a three-bedroomed terrace in Greenview Estate, which has inadequate heating and is damp in winter. They have no other family.

Maria is overweight and smokes. Dorcas has dementia, and as her increasing support needs grow, her mother, who is 75, is suffering from arthritis and is also overweight.

Cassie, the health visitor, was initially working to support Leesha but she has subsequently become involved with the whole family and the arrival of the new baby have had a significant impact on her. She is working with social services to try to arrange residential care for Leesha, meantime she is looking to see whether she can find her some help to relieve the pressure on Maria. She is also liaising with the housing department to try to get Leesha and Zach better accommodation because of the damp and the damp are having on Zach's breathing.

She is trying to persuade Leesha to attend the local children's centre to meet other young mothers, who might be able to help her get on. She is also advising Maria on how to give up smoking and has suggested a local Walking for Health group, which meets weekly, both for the exercise that she gets some exercise. She is working with the dietician to develop a plan for both Maria and Leesha, and is hoping to persuade Maria to go to the food bank, since their weight problem is partly due to a poor diet.

INSPECTION COPY

COPYRIGHT
PROTECTED



Case Study 2: The Bradfield



Scott and Carol live with their three children, Kate and Daniel, on the Estate in Thornton. The town centre has been unemployed and is feeling depressed, spending a lot of time drinking heavily, is overweight, and has diabetes. She lives in town, and so

finding time to cook and enjoy family meals at home. Kate has become a vegetarian. She is very concerned about her body image and preferring to eat fast food on her way to and from school. Daniel is teased at school for being overweight. He gets little exercise, plays computer games at home. When he was younger, he was brilliant at sports, but now he has a bad behaviour, and still takes sweets for his break-time snack.

The family live some distance from the supermarkets and do not therefore rely on buses, which are expensive and do not run very often. They obviously do not have very much money. Like a lot of people on the estate, they rely on the local shop and

Greg, the dietician, first became involved with the family when he was called in by his GP because of his weight problem, but he soon became involved with the whole family and they lead a healthier lifestyle.

INSPECTION COPY

COPYRIGHT
PROTECTED



INSPECTION COPY



Case Study 3: Ivy



Ivy is 64 years old, and is recovering from double heart surgery, high cholesterol and high blood pressure. She has leg cramps at night as a side effect of her medication, and is often light-headed, exhausted and depressed during the day. Her medication takes a while to settle. She was referred to a Physiotherapist and Fitness Officer, by the cardiologist for a rehabilitation intervention programme following her operation.

Working with cardiac nurses, Hannah assessed and interviewed Ivy about her current lifestyle, exercise preferences and diet. A number of assessments including tests for blood pressure, cholesterol level, lung strength and a suitable program for exercise set up. During this process, Ivy had never learned to swim, so Hannah had to remove that element from the programme she had originally had in mind.

The programme consisted of a variety of activities to develop Ivy's muscular function and her cardiac fitness, and included specific exercises. For example, there was a four-minute exercise activity followed by a recovery, then more activity. The activities started very gently, as Ivy's fitness improved. The programme lasted for 16 weeks, with her colleagues always on hand to offer advice and guidance, but motivation sometimes slipped and she needed encouragement to continue.

After the initial programme, Ivy was invited to continue with other voluntary activity programmes, but she chose instead to join the Health group because she was attracted by the social aspect of it. She has persuaded her husband to join her, which has led to improvement as well.

INSPECTION COPY

COPYRIGHT
PROTECTED



Activities based on the Thornton Green

For these activities, you will need the case studies and presentations from

The specific materials required for each activity are clearly displayed in the

This pack contains a variety of student-centred activities, discussions, role exercises based on health and social care settings. They are designed to enhance their knowledge and prepare them for the assignments. In addition to the specifically to cover the learning aims of this unit, there is one general activity the vocabulary used by health professionals, which could be used as an exercise



INSPECTION COPY



INSPECTION COPY

INSPECTION COPY

**COPYRIGHT
PROTECTED**



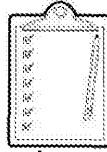
Introductory Activity

Introductory Activity 1 (The vocabulary of health)



Topics covered:

All



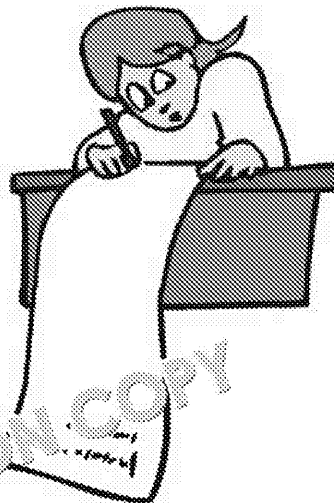
You will need:

- ☒ All the terms
- ☒ All the definitions
- ☒ Access to a computer
- ☒ Scissors
- ☒ Paste

Activity 11 (Individual work)

Read the three case studies by the health visitor, the dietician and the health professional. In them, you will find information about Maria, the Bradfields and Ivy. The aim of this activity is to match the terms with the definitions.



Cut out the definitions from the sheet provided, and match them to the terms. Then paste them in the correct place.



**COPYRIGHT
PROTECTED**



'Definitions' Sheet for Activity 11

	Protecting people against infections before they occur
	Taking account of people's different cultural or religious beliefs
	A campaign to persuade people to lead healthier, more active lives
	What makes people believe that behaving in a certain way is better
	A physical or mental impairment
	Indicating the nutritional content of processed foods on packaging
	Disease of the heart and blood vessels
	The way a person lives
	Using traditional marketing methods to achieve social goals
	The type of food a person eats
	A person's feelings about his or her body
	The extent to which a person can perform a range of physical activities
	A set of symptoms involving problems with memory, thinking and concentration
	An organisation that promotes healthy eating for children
	A plan for promoting health in a community, usually developed by a partnership
	A feeling of being under too much physical, emotional or mental stress

INSPECTION COPY

**COPYRIGHT
PROTECTED**



‘Terms’ Sheet for Activity I1

Key Term	Definition
Diet	
Immunisation	
Disability	
Health action plan	
Lifestyle	
Cultural sensitivity	
Social marketing	
Food labelling	
Children’s Food Trust	
Change4Life	
Fitness	
Stress	
Coronary disease	
Dementia	
Body image	
Motivation	

INSPECTION COPY

**COPYRIGHT
PROTECTED**



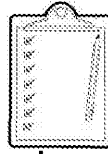
Learning Aim A: Explore the purpose, types and benefits of health and social care

Activity A1 (The importance of a healthy lifestyle)



Topics covered:

A.1 Health promotion



You will need:

- ☒ Presentation
- ☒ Case Study
- ☒ Access to the internet

Activity A1 (Individual Work)

Read Presentation 1 by the health visitor and Case Study 1 about Maria and her family.

Imagine that you are a health visitor trying to explain the importance of a healthy lifestyle to Maria. Using the internet, research and briefly explain the importance of each of the factors listed below. Indicate the source of your information.

Factor	Source	Importance
Eating sensibly		
Taking regular exercise		
Monitoring your weight		
Not smoking		
Visiting your GP		

INSPECTION COPY

COPYRIGHT
PROTECTED

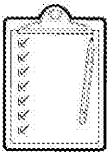


Activity A2 (The purposes and aims of health)



Topics covered:

A.1 Health promotion



You will need:

- ☒ All the case studies
- ☒ Access to the internet

Activity A2 (Small Group Work)

Read the three case studies about Maria, the Bradfields and Ivy. Below is a list of health promotion campaigns that the health professionals working with the clients have used. Research these campaigns and describe the aims and objectives of each. Then indicate which health studies each campaign would apply to. You will have been given the answer to the first one.

Campaign	Purpose
Walking for Health	To improve fitness and well-being, increase confidence, control, and reduce the risks of high blood pressure and
Change4Life	
Stoptober	
Keep Warm, Keep Well	
Alzheimer’s Society	

INSPECTION COPY

COPYRIGHT
PROTECTED

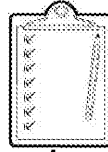


Activity A3 (Medical intervention)



Topics covered:

- A.1 Health promotion
- B.1. Targeting selected health risks



You will need:

- ☒ Presentation
- ☒ Information leaflet or vaccine information sheet
- ☒ Paper

Activity A3 (Individual and Small Group Work)

Read Presentation 1 by the health visitor to the class.

- a. She mentions a book advising clients on immunisation, vaccination choices. If these types of intervention to research, using the Internet, a simple poster or leaflet for the health visitor to give her clients, outline procedure and the risks of not taking part. Bear in mind the target group.
- b. In small groups, evaluate each other's posters. Is the information clear of language for the target group?
- c. Still in your groups, discuss what other methods (apart from your leaflet) use to get her message across; for example:
 - Peer education (getting clients themselves to pass on the message)
 - Shock tactics – the use of dramatic images
 - Testimony from people who have been affected by not taking part
 - Advice from other professionals (teachers, social workers, care workers)

Share your ideas with the rest of the class.



INSPECTION COPY

COPYRIGHT
PROTECTED

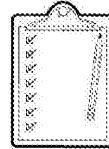


Activity A4 (Advising on particular health



Topics covered:

- A.1 Health promotion
- A.2 Benefits of health promotion to both the health and well-being of the individual and the nation



You will need:

- ☒ Presentation
- ☒ Case Study

Activity A4 (Small Group Work)

'Health promotion is the process of enabling people to increase control over, and to improve, their health.'
Health Organization

Read Presentation 1 by the health visitor and Case Study 1 about Maria and her family. In small groups the various health problems of the men and women in the family and the health visitor might help to increase their control over, and improve, their health. Discuss the outcomes she might expect if they follow her advice. Complete the table below.

INSPECTION COPY



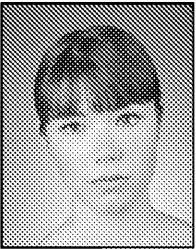

COPYRIGHT
PROTECTED



INSPECTION COPY



Activity A4 (cont.)

Family member	Health problem	How the health visitor can help
Maria 		
Doreen 		
Leesha 		
Zach 		

INSPECTION COPY

COPYRIGHT
PROTECTED

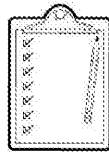


Activity A5 (The benefits of exercise)



Topics covered:

- A.2 Benefits of health promotion to both the health and well-being of the individual and the nation
- B.1. Targeting selected health risks



You will need:

- ☒ Presentation software
- ☒ Information and leaflets on physical activity
- ☒ Paper
- ☒ Coloured pens

Activity A5 (Individual and Group work)

Read Presentation 3 by the health and fitness officer.

- a. The British Nutrition Foundation recommends that children and young people should do moderate exercise per day. Adults should exercise for around 30 minutes five days per week. Give examples of how the following clients might get their exercise.

Client	
A five-year-old child	
A 16-year-old girl or boy	
A working single mother aged 30, with two young children	
A 50-year-old man with an office job	
A 75-year-old person living on a state pension	

INSPECTION COPY

COPYRIGHT
PROTECTED



Activity A5 (cont.)

- b. Read the two newspaper articles provided. As a group, consider thinking, in particular, about how health promotion might address

What did the researchers find when they studied the waist circles?
Why do you think they are increasing?

.....

.....

.....

.....

.....

.....

.....

.....

What are the possible consequences of a child becoming overweight?

.....

.....

.....

.....

.....

.....

.....

.....

Why do you think children are getting less exercise than they did?

.....

.....

.....

.....

.....

.....

.....

.....

INSPECTION COPY

**COPYRIGHT
PROTECTED**



Articles for Activity A5

Article 1

Children Getting Up To 2.5 cm Fatter

Research has shown that children's waists are expanding by as much as 2.5 cm every 10 years, and health professionals warn that they could face major health problems as a result. The biggest increase is among girls aged two to three, with an increase of 2%. The waistlines of boys of the same age increased by 1.2%. Among girls with an average age of three-and-a-half, the increase was 3.8%.

Researchers compared the waist circumference and body mass index of children of the same age, taken 10 years apart, starting in 1989. Although boys generally had larger waists, the increase over time was greater among girls.

The researchers say that improvement in children's health is needed, including more exercise they take. It is important with young people are British children, as they are depositing fat which increases the risk of health problems in both childhood and adulthood. They believe that this is linked to this increase.

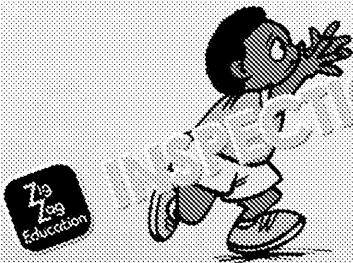


Article 2

Only 3% Of 11-Year-Olds Get Enough Exercise

A study of 5,500 11-year-olds has revealed that only one girl in 250 and one boy in 20 take enough exercise to stay healthy – at a time when they should be most active. The study found that only 0.4% of girls and 5% of boys did an hour's moderate to vigorous exercise a day.

So serious is the situation that doctors have warned that this could be a generation not to be born. Their parents. They say a number of possible reasons for this are the situation: the sale of playing fields; the unwillingness of parents to drive children to school rather than walking or cycling; the unwillingness of parents to let their children play in the street and the preference for computer games rather than sport.



**COPYRIGHT
PROTECTED**



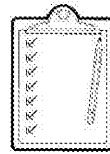
- c. Individually, choose one of the clients listed in Activity A5a and design a leaflet to be given out at your local sports centre, outlining the physical and psychological benefits that that person could gain from taking regular exercise.

Activity A6 (The national benefits of health)



Topics covered:

A.2 Benefits of health promotion to both the health and well-being of the individual and the nation



You will need:

- ☒ Presentation
- ☒ Case study

Activity A6 (Pair Work)

Read the Thornton Green Scenario. Identify the health issues that have been identified by health service providers. Research the national health promotion campaigns to address these issues, and discuss with your partner what the expected impact of these campaigns is. Use the space provided for your answers.



INSPECTION COPY

COPYRIGHT
PROTECTED



Answer Sheet for Activity

Thornton Green Issue	Campaign



INSPECTION COPY

COPYRIGHT
PROTECTED



Learning Aim B: Investigate how health risks can be addressed through health promotion

Activity B1 (Developing a health promotion plan)



Topics covered:

B.1 Targeting selected health risks



You will need:

- ☒ Presentation board
- ☒ Case study
- ☒ Information leaflets and websites
- ☒ Paper
- ☒ Colours

Activity B1 (Individual and Group Work)

- a. Read the information provided by the dietician and Case Study 2 about the Bradshaws, the family for whom you intend to design a health and well-being improvement plan. Below what is preventing them from leading a healthy life. Then find information from leaflets and websites, and indicate how you would improve their health and well-being plan.

Member of Family	Condition of client and factors preventing them from leading a healthy life	Information from leaflets and websites

COPYRIGHT
PROTECTED



Activity B1 (cont.)

- b. Design a leaflet or poster for your client to help them keep to their diet. Consider the need to use language and images that would suit the client you have chosen.
- c. As a group, research what support there is in your local area for health professionals. Find a dietitian to talk to the group.

Local support in our area



INSPECTION COPY



INSPECTION COPY



INSPECTION COPY

**COPYRIGHT
PROTECTED**

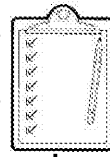


Activity B2 (Researching health risks)



Topics covered:

B.1 Targeting selected health risks



You will need:

- ☒ Presentation
- ☒ Case study
- ☒ Information and health
- ☒ heart
- ☒ Dice
- ☒ Counter

Activity B2 (Small Group Work)

Read Presentation 3 and Case Study 1 and Fitness Officer and Case Study 3 about

- a. In small groups, play the 'Ivy's Risk Factors' game, using the board and counter, which should be placed on the 'Start' square. Each player rolls the highest score starts. They roll the dice again and move the number they land on an 'instruction' square (indicated with a red square–black cross tick), they should move their counter as instructed. The winner is the first to reach the 'Finish' square. It is not necessary to throw exactly the right number to


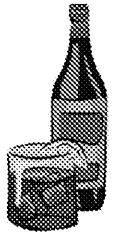
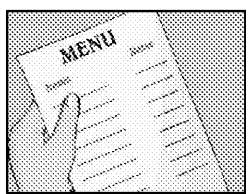





INSPECTION COPY

COPYRIGHT
PROTECTED



'Ivy's Risk Factors' Game Board for Act

30 FINISH	29	28 ✖ Her blood pressure is up again. Move back 5 spaces.	27
21 ✖ She takes to eating fast foods and puts on weight. Move back 18.	22 	23	2 She is not eating enough. Move back 5 spaces.
20 	19 ✖ She is drinking heavily. Move back to square 14.	18	17 She joins for Healthwatch. Move on 1 space.
11 ✖ Her cholesterol count has gone up. Move back 2 spaces.	12 ✔ Her GP gives her a diet sheet. Move on to square 14.	13 	16
10 	9	8 ✖ She smokes. Move back 3 spaces.	7 
1 START	2 ✔ Ivy has a complete health check. Move on 3 spaces.	3 	4 She is diagnosed with diabetes. Move on 1 space.

INSPECTION COPY

COPYRIGHT
PROTECTED



- b. Still in your groups, discuss what advice might have been given to Ivy identified in the game and so avoid contracting heart disease in the first suggestions below.

Risk factor	Advice

INSPECTION COPY

COPYRIGHT
PROTECTED

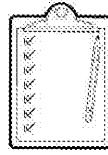


Activity B3 (Evaluating health promotion)



Topics covered:

B.1 Targeting selected health risks



You will need:

- ☒ The Targeting Health Risks form
- ☒ Your partner

Activity B3 (Pair Work)

With the partner with whom you did Activity A5, choose one of the campaigns you have identified and evaluate it, using the form below.

Chosen campaign:

Is the information it provides clear?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

How could the information be improved?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

INSPECTION COPY

COPYRIGHT
PROTECTED



Activity B3 (cont.)

Is the language used appropriate?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....



How could the language be improved?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....



INSPECTION COPY

**COPYRIGHT
PROTECTED**



Activity B3 (cont.)

Does the campaign use the right media for the target audience?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....



How could the choice of media be improved?

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....

Overall, do you think the campaign is successful? Give your reasons.

.....

.....

.....

.....

.....

.....

.....

.....

.....

.....



INSPECTION COPY

**COPYRIGHT
PROTECTED**

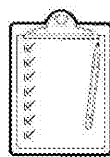


Activity B4 (Gathering data to understand a



Topics covered:

B.1 Targeting selected health risks



You will need:

- ☒ Presentation
- ☒ A set of scales
- ☒ A tape measure
- ☒ Information on health risks

Activity B2 (Pair Work)

Read the presentation by the health and fitness officer. Among the measures to assess a person's fitness are the body mass index (BMI) and their pulse rate.

- a. Weigh your partner and measure their height. Use these measurements to calculate their BMI using the equation: $\text{BMI} = \text{weight in kilograms} \div (\text{height in metres})^2$.

Height	
Weight	
BMI	

- b. Now measure your partner's resting pulse rate (this is usually between 60 and 80 beats per minute). Ask them to do some form of physical activity (e.g. walking up and down stairs) for five minutes and measure it again. Get them to rest for five minutes and then measure it again. Record your findings below.

Resting pulse rate	
Pulse rate after five minutes' exercise	
Pulse rate after five minutes' rest	

- c. Together, use the Internet to research national statistics and advice on how your readings compare. Discuss what kind of programme you think the officer might recommend to improve your fitness.



**COPYRIGHT
PROTECTED**

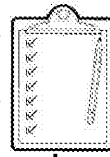


Activity B5 (Target groups)



Topics covered:

B.1 Targeting selected health risks



You will need:

- ☒ All the cards
- ☒ Information leaflets about health risks

Activity B2 (Small Group Work)

- a. In small groups, play the 'Target Group' card game. Give each player a set of cards provided. Spread out the 'problem' cards and the 'help' cards provided face up. The cards should turn over to show the back. The aim is to try to match a 'problem' card with a 'help' card. For example, if the 'problem' card says that a client feels unable to sleep at night, the corresponding 'help' card might suggest advising the client to go to bed at a regular time. (This situation is provided only as an example; it is not part of the game.) If a matching pair is found, the player who found it should place them in the appropriate squares on the board. If not, the cards should be turned face down again and the player should have another turn. If not, the cards should be turned face down again and the player should have another turn. The winner is the person with the most matching pairs.

INSPECTION COPY

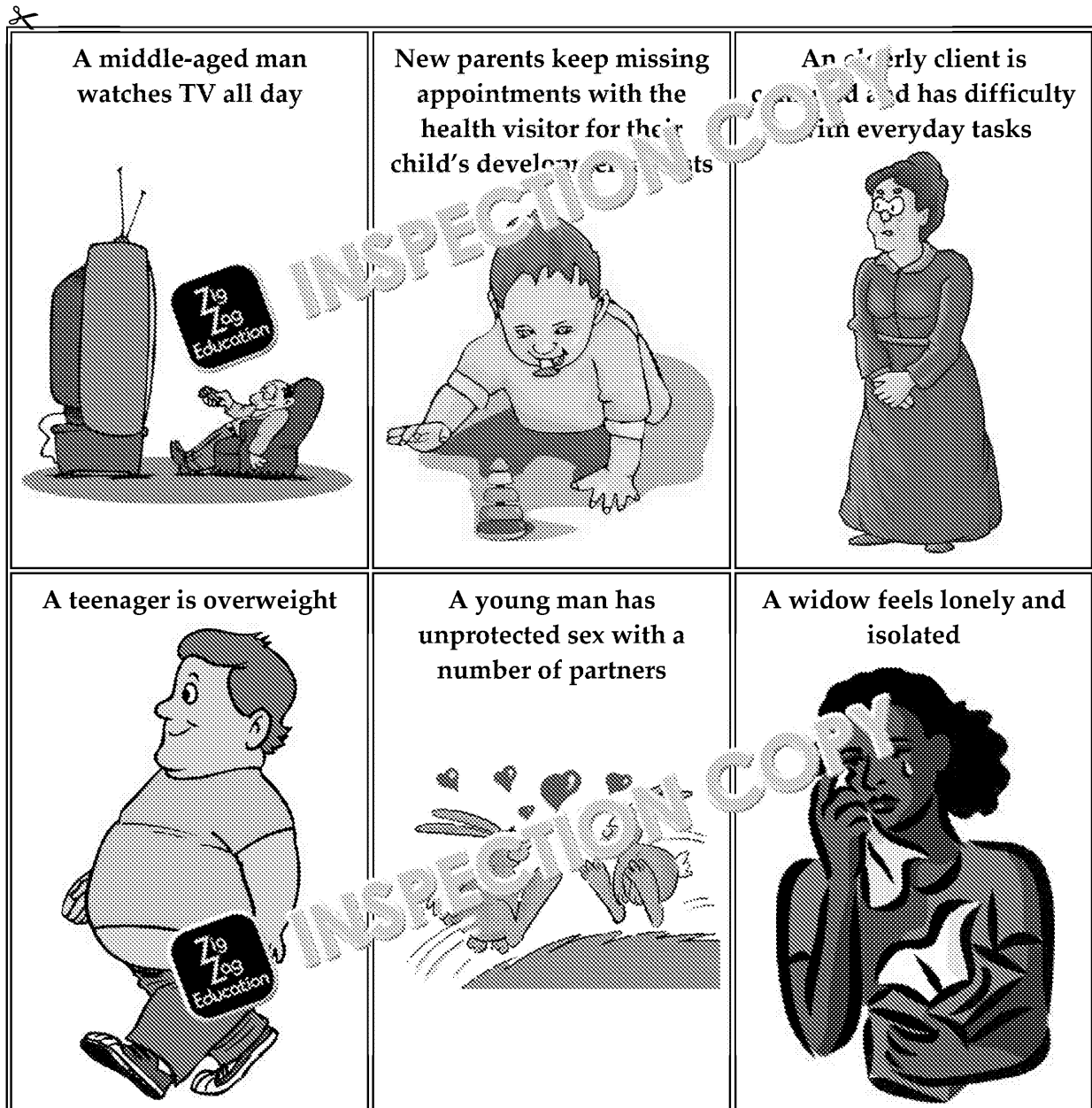


INSPECTION COPY

COPYRIGHT
PROTECTED



'Problem' Cards for Activity



INSPECTION COPY

COPYRIGHT
PROTECTED



'Help' Cards for Activity B


<p>Provide advice on getting regular exercise</p> 	<p>Encourage them to keep a diary</p> 	<p>Try to arrange home help</p> 
<p>Provide advice on healthy eating</p> 	<p>Provide advice on sexual health</p> 	<p>Support them in finding interests outside the home</p> 

INSPECTION COPY

COPYRIGHT
PROTECTED



Answer sheet for Activity 1

Problem	
 INSPECTION COPY	

INSPECTION COPY

**COPYRIGHT
PROTECTED**



Activity B5 (cont.)

- b. When the game is over, research and discuss as a group what kind of would be best for that situation. Bear in mind the need to use images would attract the particular target group identified by the problem. V

Target Group	Promotional Materials
A middle-aged man watches TV all day	
New parents keep missing appointments with the health visitor for their child's developmental tests.	
An elderly client is confused and has difficulty with everyday tasks.	
A middle-aged woman is a heavy smoker.	
A parent refuses to take part in the immunisation programme.	

INSPECTION COPY

COPYRIGHT
PROTECTED



INSPECTION COPY

**COPYRIGHT
PROTECTED**



Target Group	Promotional Materials
A teenager is overweight.	
A young man has unprotected sex with a number of partners.	
A widow feels lonely and isolated.	
A young woman goes out binge drinking every weekend.	
A group of children regularly swim at a dangerous part of the beach.	

Answers

Introductory Activity Activity I1

Key Term	Definition
Diet	The type of food a person eats
Immunisation	Protecting people against infections before they occur
Disability	A physical or mental impairment
Health action plan	A plan for promoting health in a community, usually developed by health professionals
Lifestyle	The way a person lives
Cultural sensitivity	Taking account of people's different cultural or religious beliefs
Social marketing	Using traditional marketing methods to achieve social goals
Food labelling	Indicating the nutritional content of processed foods on their packaging
Children's Food Trust	An organisation that promotes healthy eating for children
Change4Life	A campaign to persuade people to lead healthier, more active lives
Fitness	The extent to which a person can perform a range of physical activities
Stress	A feeling of being under too much physical, emotional or mental pressure
Coronary disease	Disease of the heart and blood vessels
Dementia	A set of symptoms involving problems with memory, thinking and behaviour
Body image	A person's feelings about his or her body
Motivation	What makes people believe that behaving in a certain way is worth the effort

Learning Aim A Activities Activity A1

Factor	Importance
Eating sensibly	A balanced diet ensures that the body receives the correct nutrients for age and lifestyle.
Taking regular exercise	This ensures that muscular fitness, strength and endurance are maintained so that people can perform everyday activities without becoming exhausted.
Monitoring your weight	You need to check that you are not becoming overweight, as this increases the risk of health problems such as heart disease and diabetes.
Not smoking	Smoking can lead to cancer, heart disease and breathing problems. It can also affect the unborn child.
Visiting your GP	You should visit your GP in order to monitor your health and to get advice on diet. You would also, of course, visit him or her to seek treatment for any health problems.

INSPECTION COPY

**COPYRIGHT
PROTECTED**



Activity A2

Campaign	Purpose
Walking for Health	To improve fitness and well-being, increase confidence, help with weight control, and reduce the risks of high blood pressure and coronary disease
Change4Life	To encourage a healthy lifestyle, including healthy eating, increased exercise and cutting down on drinking
Stoptober	To encourage smokers to give up smoking during the month of October
Keep Warm, Keep Well	To provide information on how to get help to keep warm
Alzheimer's Society	To provide advice and information about living with dementia

Activity A3

- a. Your poster or leaflet might include the following:

Immunisation:

- Benefits: Provides immunity, usually for life, from a wide range of childhood diseases, including cough, measles, mumps, rubella and polio; on a national level, it prevents the spread of these diseases.
- Risks: Babies and young children are particularly vulnerable to these diseases, which can cause serious problems and even death; on a national level, unless a large majority of children are vaccinated, there is a strong risk of the diseases spreading.

Vaccination:

- Benefits: Prevents or reduces the risk of people contracting particular diseases, especially those at special risk (e.g. flu vaccination for older people) or who are travelling abroad where they are at risk of contracting diseases that in certain people can cause severe health problems or kill.
- Risks: It may not be possible to cure some diseases once they have been contracted; there is only a partial defence (e.g. there is no 'cure' for flu).

Screening:

- Benefits: Can detect symptoms of a disease before they become noticeable, even before the symptoms appear; the earlier a disease is detected, the better the chances of a successful cure.
- Risks: Without screening, the symptoms may not be apparent until the disease is advanced; this means that treatment will have to be more intensive, or that it will not be successful.

Target groups:

- Immunisation: The parents of babies and young children.
- Vaccination: Depending on the vaccination, it could be parents of school-age children, or people travelling abroad.
- Screening: Adult men and women, particularly those who fall into particular risk categories.

INSPECTION COPY

**COPYRIGHT
PROTECTED**



Activity A4

Family member	Health problem	How the health visitor can help	
Maria	<ul style="list-style-type: none"> She is overweight. She smokes. 	<ul style="list-style-type: none"> Arrange for her to be given a nutrition plan. Have her referred to a food bank. Encourage her to join a Walking for Health group. Suggest she gets a prescription for nicotine patches. Encourage her to switch to e-cigarettes. 	<ul style="list-style-type: none"> • • •
Doreen	<ul style="list-style-type: none"> She is experiencing dementia. 	<ul style="list-style-type: none"> Arrange for her to attend a day centre, with activities and opportunities for social contact. Look at options for residential care in the longer term. 	<ul style="list-style-type: none"> • •
Leesha	<ul style="list-style-type: none"> She is overweight. She has postnatal depression. 	<ul style="list-style-type: none"> Arrange for her to be given a nutrition plan. Encourage her to take more exercise, perhaps by walking Zach in the park. Encourage her to attend the children's centre for social contact. Try to arrange better housing for her. 	<ul style="list-style-type: none"> • • •
Zach	He has difficulty breathing.	<ul style="list-style-type: none"> Try to arrange better housing for Leesha and him. Help Maria to give up smoking. 	<ul style="list-style-type: none"> •

Activity A5

- a. There are a number of ways in which people can get the exercise they need, as suggested below.

Client	
A five-year-old child	swimming, group games, physical activities at school
A 16-year-old girl or boy	dancing, walking to and from school, working out at a gym, sports
A working single mother aged 30, with two young children	fitness videos, walking to and from school with the children in the car
A 50-year-old man with an office job	lunchtime sessions at a gym, walking during his lunch break, bowls at a club on a weekend, gardening
A 75-year-old person living on a state pension	bowls on a public green, walking, swimming, pool, gardening

INSPECTION COPY

COPYRIGHT
PROTECTED



- b. Your answers might include the following:

What did the researchers find when they studied the waist circumference of children who think they are increasing?

They found that the waistlines of girls aged two to three increased by 5.2 per cent, while boys of the same age increased by only 4.1 per cent. Overall, children's waistlines increased by 2.5 cm every 10 years. Some of the reasons might be:

- Increasing consumption of fast food and sweets
- Decreasing levels of exercise
- Less space for children to play
- Poor knowledge of cooking and nutrition among parents
- Bottle feeding of babies

What are the possible consequences of a child becoming overweight?

- The risk of moving from overweight to clinically obese
- Increased risk of cardiovascular problems
- Risk of diabetes
- Difficulty in taking physical exercise
- Teasing and bullying

Why do you think children are getting less exercise than they did 20 years ago?

- More mothers are now working, and are therefore unable to take the children to the park
- There is a greater fear among parents of letting their children play outside
- Children spend more time watching television
- Computer games are more popular and easier to access
- The Internet and social networking sites have been developed

- c. There are a number of benefits you might highlight, including the following:

A five-year-old child

- Physical: Strengthens muscles and bones; assists healthy growth and physical development
- Social: Involves interaction with others, especially in group games, and develops social skills
- Psychological: Physical activity assists emotional and psychological development

A 16-year-old girl or boy

- Physical: Develops the body as it continues to grow
- Social: Many activities involve interaction with others
- Psychological: Physical activity helps to lighten the mood

A working single mother aged 30, with two young children

- Physical: Improves muscle tone; reduces the risk of becoming overweight
- Social: Provides an opportunity to socialise with other people outside the home
- Psychological: Boosts self-esteem; improves mood; improves general well-being

A 50-year-old man with a full-time job

- Physical: Reduces the risk of becoming overweight and developing chronic health problems
- Social: Interaction with others with similar interests outside the workplace
- Psychological: Improves general well-being; promotes mental health

A 75-year-old person living on a state pension

- Physical: Reduces the risk of major illnesses such as heart disease, stroke (10 per cent); reduces the onset of muscular and other physical deterioration
- Social: Many activities (e.g. bowls, Walking for Health, swimming) involve interaction with others
- Psychological: Improves general well-being; reduces the onset of dementia

COPYRIGHT
PROTECTED



Activity A6

Thornton Green health issues

- Teenage pregnancy
- Lung cancer
- Hypertension
- Obesity
- Diabetes
- Heart disease
- Stroke

It is not possible to list the campaigns, as these will change over time. But the expected outcomes include:

- Teenage pregnancy: Less pressure on school services, health visitors and education
- Other issues:
 - Greater awareness of screening programmes
 - Greater awareness of the risk factors
 - Greater awareness of the benefits of a healthy lifestyle generally
 - Reduced levels of illness and disease
 - Cost savings for the NHS in relation to treatment of the various conditions
 - Improved well-being of the population as a whole

Learning Aim B Activities

Activity B2

Risk factor	Advice
Weight	Eat a healthy nutritious diet, with regular meals
Lack of exercise	Take regular exercise – 30 minutes per day for five days a week
High blood pressure	Take regular exercise, lose weight, eat a healthy diet
High cholesterol	Eat a cholesterol-reducing diet, ask the GP to prescribe medication
Diabetes	Cannot be 'cured', but the risk can be reduced with a healthy diet and regular exercise
Smoking	Get help and advice on giving up, including e-cigarettes
Drinking to excess	Reduce consumption, stick to the recommended maximum
Family history	The risk can be reduced with a healthy diet and regular exercise
Stress/pressure	Counselling to help with the problems and to reduce stress

**COPYRIGHT
PROTECTED**



Activity B5

There are various ways in which these target groups can be helped, and the prompts are to be used. The following are therefore only suggestions.

Problem: A middle-aged man watches TV all day.

- Help:** Provide advice on getting regular exercise
- Promotional materials:** TV advertisements emphasising the social as well as exercise options, perhaps using images and language that suggest how much in regular activities are.

Problem: New parents keep missing appointments with the health visitor for their child.

- Help:** Encourage them to keep a diary
- Promotional materials:** A free appointment calendar or diary; combining text messages with the calendar; they stick in the parents' mirror; peer education (asking a friend to bring them)

Problem: An elderly person is confused and has difficulty with everyday tasks.

- Help:** Arrange home help
- Promotional materials:** An easy-to-understand 'to do' list; regular personal visits to the client's family or carers

Problem: A parent refuses to take part in the immunisation programme.

- Help:** Explain the benefits of immunisation and the risks if it is not done
- Promotional materials:** Peer education; presentations at school and pre-school; images demonstrating the risks of not being immunised and explaining the programme

Problem: A teenager is overweight.

- Help:** Provide advice on healthy eating
- Promotional material:** Social media messages outlining what constitutes a healthy diet; information available to lose weight; school campaigns; peer education (young people who have lost weight on social media how they did it); posters and leaflets advertising opportunities for exercise; images of young people and language that suggests that exercise is 'cool'

Problem: A young man has unprotected sex with a number of partners.

- Help:** Provide advice on sexual health
- Promotional material:** TV advertisements graphically demonstrating the impact of sexually transmitted infections; posters in clubs outlining the risks to both the young man and his partners; language that his behaviour is not macho

Problem: A widow feels lonely and isolated.

- Help:** Support her in finding interests outside the home
- Promotional material:** Leaflets showing what social activities are available; posters encouraging her to become involved; peer education (meeting others in a similar situation including from local clubs; posters promoting community transport schemes)

Problem: A young man goes out binge drinking every weekend.

- Help:** Discuss the risks and provide advice on cutting down on drinking
- Promotional materials:** Shock tactics – advertisements on social media and TV showing the physical effects of alcohol abuse; posters in pubs and clubs showing the social effects of being completely stupefied by drink looks); peer education, outlining the risks of binge drinking

Problem: A group of children regularly swim at a dangerous part of the beach.

- Help:** Provide advice on safe bathing
- Promotional material:** Highly illustrated posters on beaches explaining, in simple terms, why it is important to bathe in the designated area; non-confrontational personal advice; leaflets for parents

**COPYRIGHT
PROTECTED**

