TOPIC 7
Health and wellbeing

7.1 Overview
7.1.1 Introduction
In the past, the idea of ‘health’ was viewed very much in terms of physical health — we thought that if someone was physically well they were in good health. However, we have come to realise that physical health is only one factor and other elements such as social, emotional, mental and spiritual health all interact to create a person’s overall level of health and wellbeing. For example, an athlete who is physically healthy may experience poor mental and emotional health, which affects their overall health and wellbeing.

In this topic you will learn about the components that contribute to your health and the factors that influence it as well as ways to improve and maintain it.

Eating well is a good start towards health and can make a big difference to your overall state of wellbeing.

Resources
- eLesson: Health and wellbeing (eles-2948)
- Digital doc: Key terms glossary (doc-29213)

Essential Question
How can we influence and make positive decisions to achieve our optimal health and wellbeing?

Syllabus Outcomes
A student:
- recognises how contextual factors influence attitudes and behaviours and proposes strategies to enhance health, safety, wellbeing and participation in physical activity (PD4-6)
- investigates health practices, behaviours and resources to promote health, safety, wellbeing and physically active communities (PD4-7)
- plans for and participates in activities that encourage health and a lifetime of physical activity (PD4-8)
- demonstrates self-management skills to effectively manage complex situations (PD4-9)
- applies and refines interpersonal skills to assist themselves and others to interact respectfully and promote inclusion in a variety of groups or contexts. (PD4-10)
7.2 What is health?

Health is much more than just an absence of disease. Health has physical, social, emotional/mental, cognitive and spiritual components. In this subtopic, you will explore how these components combine to determine your overall level of health and wellbeing, and how to recognise health strength in yourself and others.

7.2.1 The components of health

Compared to many countries, the average life expectancy in Australia is very high. Does this mean that we make positive decisions about our health and, as a result, are healthy? The answer to this question is complicated. Health is measured by a range of factors, not just by how long we live. Different groups of Australians have varied levels of health and wellbeing in each component.

Components of health:

- Physical health
- Social health
- Emotional/mental health
- Cognitive health
- Spiritual health

Physical health

Physical health refers to the health of the body. It includes:

- fitness level
- energy level
- body weight
- absence of disease
- efficient functioning of organs, such as the heart and lungs.

Your physical health is determined by your genetic make-up and your lifestyle behaviours, such as eating a balanced and nutritious diet, and participating regularly in physical activity. Behaviours such as smoking and excessive consumption of alcohol can have negative effects on an individual’s physical health; smoking causes many types of cancer and alcohol abuse can damage your liver and have other physical impacts.

HEALTH FACT

According to the World Health Organization, low levels of physical activity contributes to more than 3 million preventable deaths per year. It is the fourth highest cause of death due to non-communicable disease. The world needs to get active!
Social health

Social health refers to our social interactions and how we relate to others. Positive social health means:
- communicating effectively with others by expressing your thoughts and feelings in an assertive and respectful way
- working cooperatively
- resisting peer pressure to do things you do not want to do
- feeling a sense of purpose in living your life
- feeling able to help others who are in need of assistance.

Emotional/mental health

Emotional/mental health relates to how we feel about who we are, how we express our emotions and how we react when stressed. Emotionally healthy people have self-confidence and a positive sense of self. They are able to:
- express their emotions and feelings in a positive way
- bounce back after a hard time
- be productive in their work or study
- make positive decisions to resolve problems.

Cognitive health

Cognitive health refers to our ability to think and reason and to make good decisions. When we have positive cognitive health, we are able to:
- make informed choices
- solve problems
- set goals and devise plans to reach those goals
- understand the consequences of our behaviours for ourselves and others.

Spiritual health

Spiritual health refers to having a sense of purpose and meaning in our lives. When we are spiritually healthy, we are able to:
- feel connected to others who are important to us, such as our family and friends
- feel connected to things that are greater than us, such as our community, the environment and our beliefs or religion
- appreciate the feelings and needs of others
- develop an understanding and awareness of other people and things that are greater than ourselves.

Wellbeing

Wellbeing is a combination of a person’s physical, social, cognitive, emotional and spiritual health factors. Wellbeing is strongly linked to happiness, satisfaction with life and positive relationships. Wellbeing reflects a high level of satisfaction with self, as well as individual resilience and self-efficacy.
Culture and the contribution of mind–body–spirit to health and wellbeing

Many cultures have a strong belief in the idea of health and wellbeing reflecting the connection between the mind, the body and the spirit. For example, in Aboriginal and Torres Strait Islander cultures, wellbeing is widely thought of as being holistic — that is, linked to both a healthy mind and body. There is a strong connection to the land, people and ways of being, all of which are believed to influence health and wellbeing. Health and wellbeing is made up of mental, physical, cultural and spiritual health. The importance of cultural and spiritual health is reflected in the passing down of stories from the Dreamtime, or the Dreaming. They are passed on through art, dance, stories and song. These messages are not seen as based in the past, rather they are timeless and so keep their relevance from generation to generation. This reflects the importance of culture and the contribution of these mind–body–spirit connections to health and wellbeing.

Asian cultures also place an emphasis on the strong connection between health and wellbeing and the connections between mind–body–spirit. This view of health is a holistic one, with many medical practices following the idea that the mind and body are inseparable. So to treat a person who is ill, both the mind and the body need to be treated. We see this in examples such as acupuncture, yoga and herbal medicine. This differs from western medicine, which concentrates predominantly on the physical symptoms.

7.2.2 Health and wellbeing

Your level of health and wellbeing is determined by considering all the health components and how they relate to each other. Each component has the potential to have an impact on the others. When people are emotionally well and have a positive sense of self, they are more likely to relate well to others and choose positive health behaviours such as eating well and exercising. Conversely, if your physical health is poor because you are sick, unfit or overweight, then your emotional health may suffer. You may feel generally unhappy about yourself, not feel like communicating or socialising with your friends, or may experience depression.

Health and wellbeing is a dynamic state — it can change from day to day or week to week. There are many factors that affect your level of health and wellbeing and these can be positive, such as regular exercise and a balanced diet, or negative, such as being bullied.

You can improve your health and wellbeing by making positive decisions. Adopting a healthy lifestyle has many benefits, including:

- a reduced risk of illness and disease
- increased energy levels
- increased participation and a greater enjoyment of life
- improved relationships
- a positive sense of self
- a positive body image
- feeling more productive
- dealing with stress more effectively.

7.2 Activities

What is health?

1. Conduct a survey of five people, including adults and young people. Ask them what health means to them.
2. In groups of four, share your survey results and compile a list of similar and unique answers.
3. Discuss what health means to your group.
4. Using your group’s ideas and your survey results, come up with a group definition of health.
5. Share your group definition with the class and identify similarities and differences.
6. From ideas expressed by the class and your thoughts about the meaning of health, write your own definition of what health means to you.
Components of health and wellbeing

7. Read each of the scenarios below and answer the questions that follow.

Dave is in Year 9. He is very good at sports and often receives praise from his friends, family and teachers. He trains hard and says no to drinking, smoking and drugs to keep himself healthy. Dave has great leadership potential. He often volunteers to help coach the younger students and will referee games as well. Dave comes from a large extended family, his parents both have jobs they like and the family enjoys the benefits of their parents’ hard work. Dave has a number of good mates. He believes that if you treat people with respect they will respect you.

Dianna’s parents recently split up and she is finding it difficult to cope. She feels her parents are so caught up in their own problems that they barely remember she exists. She has started to stay out late with friends and has found that drinking alcohol seems to help her escape from her stress. She is often tired at school and her grades are starting to fall but she doesn’t really care.

(a) Is the person in each scenario healthy or unhealthy? List the factors that led you to your decision.
(b) Explain how each of the components of health relate overall to give either a positive or a negative level of health. Use examples from the scenarios.
(c) Describe the problems that Dianna is experiencing.
(d) Outline what Dianna could do to try to address her problems.

7.2 Check and challenge

Explain
1. List the five main components of health.
2. What are three qualities of an emotionally healthy person?
3. Suggest two events that could have a negative impact on your emotional health.

Evaluate
4. Think of a time when you were unwell or injured. Did the fact that you were physically unwell affect the way in which you related to others, your motivation level, how productive you were or your sense of self? Why or why not?
5. What role does the mind–body–spirit connection play in different cultures around the world? How does this differ from traditional western medicine?

7.3 Factors that affect health and wellbeing

There are some factors that affect your health and wellbeing that you might be unable to control, such as your genes, gender or environment. But other factors, such as the choices you make about your lifestyle, are yours to control.

7.3.1 Effects on your health and wellbeing

Your level of health and wellbeing is influenced by a number of factors. You have little control over some of these factors, such as a family history of disease or your physical environment. However, there are many choices you can make to achieve and maintain your optimal health.

Your genetic make-up, the physical and socioeconomic environment in which you live and your lifestyle all affect your level of health and wellbeing.
Our health and wellbeing depends on our genes, our behaviour and our environment.

Factors that affect health and wellbeing

Genetics

Examples
- Inherited disease
- Sex
- Medical conditions

Environment

Examples
- Socioeconomic — low income
- Physical — air and water pollution

Disease

Examples
- Communicable
- Non-communicable

Lifestyle behaviours

Examples
- Drug use
- Level of physical activity
- Diet

Genetics

Your genetic make-up is inherited from your parents. There are some medical conditions you can inherit from your parents, and other conditions you are more at risk of developing if there is a family history, such as some blood disorders or cystic fibrosis. What do you know about your genetic make-up?

Sexual characteristics

Your sexual characteristics (i.e. your biological or physical sex) influence the level of risk of developing some diseases. For example, men are more likely than women to develop heart disease and women are more likely to develop mental illnesses than men.

It is important to note the connections between genetics and sexual characteristics when it comes to the development of some diseases. For example, women who have a family history of breast cancer have a higher risk of developing this type of cancer than those women who do not have a history of breast cancer in their family. Likewise, men who have a family history of prostate cancer have a higher risk of developing this type of cancer than men who do not have a family history of the disease. In such cases, early and ongoing screenings, for example, regular breast checks and mammograms, are essential for the early detection and treatment these of diseases.

Gender

Our gender (i.e. a sense of who you are as a male or female, rather than what your physical characteristics, genes and hormones indicate) plays an important role in our lives. While in the past there have been many stereotypes assigned to genders, many of these have now been challenged and this has seen greater equity in the treatment of all people. However, there are several contexts where gender still influences the behaviour and treatment of an individual and thus affects a person’s health and wellbeing. For example, the unfair treatment and discrimination of individuals based on gender may result in an individual developing certain mental illnesses such as depression.

Family and domestic violence

Family and domestic violence is behaviour that involves threatening, controlling or violent actions against an individual or their family, which makes them feel unsafe. In Australia, statistics indicate that one in four women and one in 20 men have experienced physical, sexual or emotional abuse by a current or former partner.
partner. The experience of family violence can have a significant impact on an individual’s mental, emotional and physical wellbeing.

**Alcohol use**

More men than women (around three times as many) consume alcohol in quantities that pose a threat to their health over their lifetime. Short-term issues linked to this statistic include rates of violence and injury due to alcohol use.

**Road use**

Women are much less likely than men to be killed or injured on our roads. Recent statistics for New South Wales show that men are approximately:

- eight times more likely to be injured or killed as motorcyclists
- twelve per cent more likely to be injured or killed as drivers
- five times more likely to be injured or killed as pedal cyclists.

In part, these statistics reflect men’s greater likelihood of participating in negative risk-taking and impulsive behaviours, which are discussed later in this topic.

**Environment**

The *socioeconomic environment* in which we live can have a significant impact on our level of health. Generally, people from higher socioeconomic groups tend to have higher levels of education and income and are more likely to have a better level of health than people from lower socioeconomic groups. This means that people with less money and lower education levels are at a greater risk of ill health and adopting poor lifestyle behaviours, such as smoking. Statistics show that people from lower socioeconomic groups:

- are sick more often and die younger
- have limited choice in housing, which can lead to a greater chance of being exposed to pollution, crime and overcrowding
- have limited financial ability to access medical facilities, services and treatments.

People from higher socioeconomic groups usually:

- have lower infant death rates
- have better knowledge of and access to health services
- are more likely to undertake preventive health measures such as regular dental check-ups, immunisation and Pap smears.

The *physical environment* can also have an impact on people’s health. People living in built-up urban areas can be affected by the quality of air and water, housing and crowded living. Practices such as crop spraying, for example, can affect the health of people who live in rural areas. Other climatic events such as dust storms and bushfires can also affect people’s health and wellbeing.

**Disease**

Even if we look after our bodies, but especially if we don’t, we can become ill or develop a disease. We are born with some diseases and some develop as we grow. Others result from making poor decisions and adopting poor lifestyle behaviours. Diseases can be categorised into *communicable diseases* and *non-communicable diseases*. 
Communicable diseases

Communicable diseases are passed from one person to another either through physical contact with an infected person or through the air. The common cold, for example, can be spread from someone when they cough, from kissing the person or sharing a cup or glass that they have used. Sharing a drink bottle is a common way for communicable diseases to spread.

People who are sexually active, particularly if they do not practise safe sex, are at risk of catching sexually transmitted infections through skin-to-skin contact, blood-to-blood contact or the transmission of bodily fluids. Hepatitis B is an example of a communicable disease that is sexually transmitted.

Many childhood diseases such as whooping cough and measles can be passed from one person to another. It is important to maintain good hygiene and follow a doctor’s instructions if you have a disease that can be spread, to minimise the risk of other people being infected. Immunisations are also effective in reducing the spread of communicable diseases such as whooping cough, measles and influenza.

Lifestyle behaviours

Making poor lifestyle decisions can increase the risk of developing lifestyle diseases. Lifestyle diseases are caused by particular behaviours. These behaviours can include having a poor diet, not being physically active on a regular basis and having unprotected sex. Table 7.1 indicates common lifestyle diseases and the related behaviours that can cause them.

<table>
<thead>
<tr>
<th>Common lifestyle diseases</th>
<th>Related lifestyle behaviours</th>
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<tbody>
<tr>
<td>Cardiovascular disease</td>
<td>Smoking</td>
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<tr>
<td></td>
<td>Eating a diet high in saturated fats</td>
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<td></td>
<td>Lack of physical activity contributing to obesity</td>
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<tr>
<td>Cancer</td>
<td>Lung cancer:</td>
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<tr>
<td></td>
<td>Smoking cigarettes</td>
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<td></td>
<td>Skin cancer:</td>
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<tr>
<td></td>
<td>Failing to use sun protection (hats/sunscreen etc.)</td>
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<tr>
<td></td>
<td>Colorectal cancer:</td>
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<tr>
<td></td>
<td>Being overweight</td>
</tr>
<tr>
<td></td>
<td>Eating a high-fat, low-fibre diet</td>
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</tbody>
</table>

HEALTH FACT

Obesity occurs when a person’s weight increases beyond a healthy level due to excessive energy (kilojoules) intake. This means that over time, their energy intake is much greater than the energy they use each day.

Heart disease, certain types of cancer and type 2 diabetes are lifestyle diseases that are more likely to occur as we grow older. However, the lifestyle behaviours that lead to these diseases, such as lack of physical activity and high-fat diets, can start during childhood.
You can protect your health by making positive lifestyle choices.

You can protect your health by making positive lifestyle choices.

The lifestyles chosen by some young people put their health at risk in the short and long term. The fact that young people experiment more and take more risks with their health can increase the potential for future problems. Research shows, for example, that alcohol use can be associated with poor decision making for adolescents that can have negative outcomes, such as unsafe sex, unwanted pregnancy, accidents and violence.

Lifestyle choices that help avoid diseases include:

- eating a balanced, nutritious diet
- participating in daily physical activity
- not smoking and choosing not to use drugs
- practising safe sex — for example, using a condom
- getting adequate rest and sleep
- having regular medical check-ups
- using positive strategies to relieve stress and manage anger, such as talking to a counsellor, trusted adult or good friend
- adopting positive communication skills
- using self-talk to help you recognise and reinforce your positive attributes
- recognising your rights and undertaking your responsibilities
- supporting others in their attempts to make positive lifestyle choices. For example, offering to join a friend on a daily walk or jog when they are trying to improve their fitness.

7.3.2 Culture and our choice of leisure

Our cultural background, or the cultural groups that we belong to, can have an influence on the leisure pursuits in which we participate. This occurs in many areas of our society in both obvious and subtle ways. A common example is the drinking culture in the male-dominated sports of rugby league and cricket. While this doesn't exclude any person from participating in these sports, a non-drinker may feel less connection to a team. Many religions ban drinking of alcohol, so followers of these religions may feel less connected to the sport. Some mainstream sporting events are played during the significant religious events of different cultures (such as Good Friday or Ramadan). This may lead to decreased participation in these activities throughout the cultural or religious celebrations.
In the past, females may have faced opposition in some areas of sport and leisure but these barriers have been significantly reduced over recent years. Often a religion will require women to wear full body cover even while playing sport, which although uncomfortable in warmer climates, does not necessarily exclude them from participating.

An Aboriginal or Torres Strait Islander person may not be willing to participate in an activity because of the attention it may bring to them — either negative or positive. Because of this, individuals may not be empowered to try new activities because of the possibility of shame. In Aboriginal and Torres Strait Islander cultures, ‘shame’ has a wider meaning than for non-Indigenous people. It is a term meaning embarrassment in certain situations, usually due to circumstances or attention rather than the fear of a negative outcome.

### 7.3 Activities

#### Lifestyle behaviours

1. Read the scenario below and answer the questions that follow.

   Glenn is a 38-year-old truck driver. He spends long hours each day driving in busy city traffic. When he was young he really liked eating meat pies, hamburgers and chips and drinking chocolate thick shakes for lunch. He ate lots of food because he had a big appetite. This was not a problem because he rarely put on weight even though he did not exercise often. He still eats a big lunch each day and finds that eating smaller amounts or more nutritious foods is very hard. He is now 40 kilograms overweight and has been diagnosed with type 2 diabetes. He has been told he is at risk of heart disease if he doesn’t change his lifestyle.

   (a) What factors have led to Glenn’s poor level of physical health?
   (b) Devise a realistic plan that includes a range of strategies Glenn could adopt to improve his health. Keep in mind his occupation and current lifestyle habits. Share your plan with a partner.

### 7.3 Check and challenge

**Explain**

1. Explain how a combination of poor diet and lack of physical activity can affect your health.
2. Identify the diseases that can result from a poor lifestyle.
3. What advice would you give to someone who is at risk of cardiovascular disease?

**Evaluate**

4. Explain how cultural background can play a role in an individual’s ability to participate in physical activity and sport.
5. Consider your current lifestyle behaviours. Identify changes you could make to enhance your health and wellbeing into the future. Explain the effect that your suggested changes will have.
6. What areas of our health do we control? What can we do to keep ourselves healthy for life?

### Resources

- Digital doc: Worksheet 7.1 Disease: causes and impacts (doc-29208)
7.4 Making healthy decisions

Decision making is a part of life — everyone makes decisions that can put their health or the health of others at risk, or conversely makes positive decisions that help and improve others’ lives. In this subtopic you will explore the reasons why people take risks and learn good decision-making skills to minimise negative risk-taking and its possible consequences.

7.4.1 Decision-making skills

Everyone takes risk. Consider the risks that your parents or other adults have taken in their lives, such as entering into a committed relationship, buying a house or starting a new career. Young people also take risks but are often not aware of them or do not consider the impact the risks may have on their health and their lives.

Many of the risks young people take are related to their health — for example, experimenting in relationships, experimenting with drugs, taking risks on the road and neglecting their physical health by having a poor diet and not exercising. You can stay safe and healthy by working out how to minimise these risks; for example, by obeying road rules, you reduce the risks associated with being a cyclist, passenger, pedestrian and driver when we reach the appropriate age.

7.4.2 Positive risk-taking

Sometimes risk-taking can be positive. There will be situations in your life that have a reasonable degree of risk. For example, many people are fearful of public speaking. There is the risk that you may forget your speech or your peers might give you a hard time, but the potential for positive outcomes, such as improving your self-confidence, gaining respect from your teachers and peers, and getting better grades, far outweighs the risk. Another example is if a young person involved in an abusive relationship seeks help from someone who can support them in dealing with the situation. It is worth the risk of telling someone because of the potential positive outcome. As you grow and mature, your ability to assess the level of risk in any given situation improves. Young people may choose to engage in positive risk-taking for a number of reasons. This could include to assert their ability to make informed decisions. Making informed decisions means to calculate the potential benefit versus the impact if the potential risk is not successful. This is part of the process of growing into an adult. Making positive decisions is a way of exercising power over your own destiny. When you do this, you are showing your independence and gaining experience for future risk-taking and decision-making situations.

7.4.3 Risking your health

Young people often take more risks than adults for a number of reasons and the potential for risk-taking increases in certain circumstances. Young people are more likely to take risks such as getting drunk, fighting, taking risks on the road, stealing, smoking or having unsafe sex.
Peer pressure and the desire to fit in are factors that influence young people to take risks.

Young people tend to take negative risks for a range of reasons, including:
- being pressured by friends
- males ‘proving their masculinity’ to others
- feeling depressed
- a lack of experience and skill level
- feeling indestructible
- thinking ‘it won’t happen to me’
- feeling the need to fit into a peer group
- feeling the need to be accepted by others
- wanting to impress others
- wanting to gain attention
- wanting to rebel against authority
- trying to maintain a relationship
- being coerced or threatened by others
- parental influence, such as smoking and drinking alcohol.

7.4.4 Outcomes of risky behaviour
Risk-taking can be both positive and negative. Risk-taking can have a negative effect on your health, your relationships and the health of others, such as loss of respect from people you care about, injury to yourself or others, property damage, or trouble from parents or the law. Risk-taking can also lead to positive outcomes such as learning more about yourself and your relationships or learning better ways to deal with conflict or getting an outcome that is beneficial to you and others.

7.4.5 Influences on decision making, behaviours and actions
Decision making is influenced by a range of factors. When and where we are making the decision and what type of decision it is all have an influence on our thoughts and actions. The social nature of young people usually means that risks are taken in front of peers, either to impress, to fit in or as a result of peer pressure. Taking risks is a natural part of developing responsibility and moving towards adulthood.

The circumstances and environments we are in influence the decisions we make. For example, when we are under pressure due to limited time or have not had enough sleep our decision making can become clouded. This might mean we rush a decision or become overly reliant on using our emotions to guide us.

Other contextual factors influence our decisions and actions. Individual attitudes towards emerging world issues such as climate change, use of non-renewable energy sources, sexual activity, poor nutrition and physical activity change based on circumstances such as the environment a person lives in and the wider views of that particular part of society.

Sexual relationships
Choosing when and to what level to take any intimate relationship is dependent on things such as your gender, the values and morals you hold, the situation and the environment you grew up in. These factors of course vary from person to person.

A person’s view on sexual relationships may have a flow-on effect to an individual’s views on and use of preventative sexual health practices. These are simply actions or behaviours that prevent sexually transmitted infection (STI) transfer or unwanted pregnancy. They range from behaviours such as abstinence, to the use of a variety of contraceptive methods to ensure that no fluid transfer or skin contact is made between consenting partners. Many cultures and religions hold strict views on how and at what stage of life an individual should
engage in these relationships. Other factors that could influence someone’s views on preventative sexual health practices include:

• education. Do the people in the relationship understand the correct or safest way to stay safe?
• family. Strong family units with high levels of trust and honesty generally have children who have safer and more considered approaches to intimate relationships.
• drug use. Drugs can affect our ability to make considered choices. When under the influence of drugs our resolve to maintain our beliefs and values may be weakened.

7.4.6 Interaction of factors

In some specific circumstances, we see many of these individual factors combine with other influences to create a complex situation for young people. The increasing use of social media platforms gives unprecedented exposure to the views and opinions of a range of people and groups from around the world. Many of these conflict with the rules and/or laws of a young person’s society. For example, YouTube videos may show illegal road-user behaviour such as speeding or not wearing seatbelts or may present images of underage or unsafe alcohol consumption or illicit drug use. Likewise, protective factors can interact to create a more positive and supportive environment. In circumstances such as sexual health, having a strong and honest relationship with family members can provide an individual with a strong moral sense of what is acceptable and what is not in terms of behaviour and provides clear guidance as to the likely response from those closest to them. This moral ‘compass’ is one that helps an individual make many moral and values-based decisions throughout their life.

7.4.7 The POOCH model of decision making

Being challenged by situations allows you to develop personal independence. Some young people, however, might be less skilled at thinking through the consequences of their behaviour. This has to do with brain growth and development, and the impulsive nature of adolescents. This has consequences for their own health and safety and that of others. Learning skills that assist in decision making can allow you to think issues through by using logic to judge information and weigh up the options. Decision making involves thinking skills that compare a range of options to reach a conclusion or choice. By following a simple process when you encounter an unfamiliar situation in which you have to make a decision, you will have more confidence knowing that you have considered all options.

The POOCH model of decision making can help you work through your options.

<table>
<thead>
<tr>
<th>Problem</th>
<th>Assess what the problem is and what decisions need to be made.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Option</td>
<td>Work through all the possible options.</td>
</tr>
<tr>
<td>Outcome</td>
<td>What are the outcomes of these options, positive and negative?</td>
</tr>
<tr>
<td>Choices</td>
<td>Decide on the best choice to minimise risk to yourself.</td>
</tr>
<tr>
<td>How did it go?</td>
<td>You can evaluate your decision by reflecting on the outcome.</td>
</tr>
</tbody>
</table>
7.4 Activities

Positive or negative risk

1. In pairs, undertake the following tasks.
   (a) Using examples, discuss what a ‘reasonable degree of risk’ is.
   (b) Compile a list of risks that young people take (for example, riding a bike on a busy road).
   (c) For each risk, identify the possible outcomes and determine whether there is a reasonable degree of risk or whether it is too risky.

Where and when does risk-taking occur?

2. For each of the following situations, identify the degree of risk by rating it as low risk, medium risk or high risk. List the potential harms that could occur in each situation.
   (a) Swimming at night in the surf
   (b) Riding your bike to a friend’s place
   (c) Asking someone on a date
   (d) Spending the day at the beach with your friends
   (e) Going to a party on Saturday night with your best friend
   (f) Walking home with someone you just met at a party
   (g) Trying out for a representative sporting team
   (h) Getting a lift in an overcrowded car
   (i) Taking a short cut across a railway line
   (j) Sending someone an inappropriate sexual image of yourself
   (k) Riding your bike on a busy road without a helmet
   (l) Asking someone to send you a sexy image of themselves
   (m) Being at a dance for under 18-year-olds and accepting an alcoholic drink

3. In groups of three, discuss and write answers to each of the following.
   (a) Identify five settings or circumstances in which risk-taking occurs (for example, at a party, hanging out with older friends).
   (b) Identify potential positive and negative outcomes of risk-taking.
   (c) Choose one setting or circumstance and develop a plan to reduce the risk and keep safe.

Making good decisions

4. In groups of three, investigate the following scenarios below using the Pooch model. Present your findings to the class using presentation software.
   (a) Some friends are pressuring Chris to attend a party on Saturday, but his parents want him to go to a family dinner. Chris would really like to go to the party because a girl he likes is also going to be there. What should Chris do?
   (b) Alice went to a party on the weekend and met a new boy she got on really well with. On Monday there were lots of stories around school about what she may have done over the weekend, none of which were true. What should she do?
   (c) Kim received a text message from an unknown caller containing explicit images. What should she do?

Risk-taking behaviour

5. Use the Risk-taking behaviour weblink in the Resources tab to watch the video to find out more about this type of behaviour.

6. Explain the reasons teenagers take risks.

7. Identify some strategies to reduce negative risk-taking.

8. List three ‘safe’ risk-taking activities.

Types of decision makers

9. Making healthy decisions and committing to these behaviours is not always easy and is influenced by the way you make decisions.
   In groups of four, for each of the decision maker types outlined below, identify:
   • the challenges faced
   • the possible processes used
   • the probable consequences
   when making decisions about their health. Share your reflections with the class.
### TABLE 7.2 Types of decision maker

<table>
<thead>
<tr>
<th>Types of decision maker</th>
<th>Behaviour</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impulsive</td>
<td>Always takes the first alternative that is offered. ‘Speaks before they think.’</td>
</tr>
<tr>
<td>Fatalistic</td>
<td>Leaves the decision up to fate. ‘What will be, will be.’</td>
</tr>
<tr>
<td>Compliant</td>
<td>Goes along with someone else’s plans rather than making a personal choice, even if it does not agree with their values. ‘Whatever everyone else is going to decide.’</td>
</tr>
<tr>
<td>Intuitive</td>
<td>Decides based on what they ‘feel’ but can’t verbalise the reason why. ‘It just feels like the right decision.’</td>
</tr>
<tr>
<td>Play-it-safe</td>
<td>Always picks the ‘easiest’ alternative with the least potential of risk. ‘I like A but B will be easier.’</td>
</tr>
<tr>
<td>Delayer</td>
<td>Delays making a decision. ‘I’ll think about it later.’</td>
</tr>
</tbody>
</table>

---

#### 7.4 Check and challenge

**Explain**
1. Using examples, explain the difference between positive risk-taking and negative risk-taking.
2. List the reasons why young people take risks with their health.
3. Explain how your parents and friends can influence your risk-taking.

**Elaborate**
4. Predict three situations where young people are more likely to take risks. How could negative risk-taking be reduced in each situation?

**Evaluate**
5. Think about some of your own behaviours that have put you at risk to some degree, such as walking home late at night by yourself or swimming in the late afternoon or night. What could have been the potential consequences of your behaviour? How could you have reduced the risk?
6. Use the Health issues and young people worksheet in the Resources tab to identify how decisions can have an impact on your health.

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**Resources**
- Weblink: Risk-taking behaviour
- Digital doc: Worksheet 7.2 Health issues and young people (doc-29209)
7.5 Making health decisions: nutrition

Determining which foods are healthy can be a challenge. Sometimes, what you think is nutritious may actually be high in sugars, preservatives, sodium (salt) or fat. The healthy option is not always the easy option either. It is important to be informed to make healthy decisions about your nutrition.

7.5.1 Food as fuel

A balanced diet and regular exercise will contribute to positive health. Food is the fuel for your body. All the food and drink (except water) you consume contains kilojoules that are either converted into energy to fuel your body or stored as fats. Some foods are very nutritious — that is, they contain lots of nutrients. Other foods, such as soft drinks and cakes, are high in kilojoules but have very few nutrients. Eating nutrient-dense food will ensure our bodies get all the nutrients they need to function efficiently. Table 7.3 outlines the nutrients our bodies need to grow and function properly.

<table>
<thead>
<tr>
<th>TABLE 7.3 Essential nutrients found in foods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrient</td>
</tr>
</tbody>
</table>
| Carbohydrates comprise two types: high GI and low GI. Low GI carbohydrates should make up the majority of your nutrient intake because they release energy slowly over a longer period of time. | • Provide fuel for the body in the form of energy  
• Provide fibre | • High GI carbohydrates: sugar, chocolate, honey, cakes  
• Low GI carbohydrates: wholegrain bread, pasta, rice, vegetables and noodles  
Note: High GI carbohydrates should be eaten only occasionally. |
| Protein makes up the main part of body tissue — for example, muscle, skin and hair. | • Used in the growth, repair and maintenance of body tissue  
• Used in the body’s cells | Milk, eggs, red meat, poultry and fish |
| Fat comprises two types: saturated and unsaturated. Saturated fat is responsible for raised cholesterol levels. | • Provides energy  
• Insulates vital organs and nerves  
• Transports fat-soluble vitamins  
• Used in the body’s cells | • Saturated fats: animal fats such as butter  
• Unsaturated fats: canola oil, olive oil and oil found in most nuts |
| Vitamins — there are about 20 different vitamins. Common vitamins are A, B, C and D. | • Help to release energy from our food stores  
• Regulate body processes  
• Aid in tissue building  
• Aid in production of red blood cells | Fruit and vegetables are a major source of vitamins. A balanced diet with foods from each food group will ensure you obtain all the necessary vitamins. |
| Minerals, for example, calcium and iron | • Calcium is required in many body functions, including growth of bones and teeth.  
• Iron helps carry oxygen to cells. | Major sources of minerals are meat, fruit and vegetables and dairy products. A balanced diet with foods from each food group will ensure you obtain all the necessary minerals. |
| Water | • Helps all cell functions  
• Regulates temperature  
• Transports wastes | Water, fruit and vegetables, juice drinks |
Eating nutritious foods will provide you with the nutrients you need for your body to grow and function at its best. Which meal would be the healthier choice?

7.5.2 What are ‘healthy food habits’?

Youth people eat a range of foods for a range of reasons. Think about the foods you consume in an average week and why you choose those foods. Do you always make the healthy and nutritious choice?

Healthy food habits include:

- eating a variety of nutritious foods that meet the dietary guidelines for children and adolescents
- drinking plenty of water
- eating regular meals in smaller amounts rather than bingeing once or twice during the day
- eating a nutritious breakfast to provide fuel for the day ahead
- avoiding eating large meals or junk food just before you go to bed
- avoiding eating foods that are high in saturated fat, sugar and salt.

**HEALTH FACT**

Young people aged 14 to 18 years require 1300 milligrams of calcium every day to keep their bones and teeth healthy. Recent figures show, however, that more than 70 per cent fail to meet this daily target. Some ways to boost your calcium intake include:

- eating green leafy vegetables such as cabbage, broccoli and kale
- including dairy foods (milk, cheese, yoghurt) into your daily diet
- adding tofu to some meals
- snacking on calcium-rich nuts and seeds such as brazil nuts, almonds and sesame seeds
- eating more fish, especially those where you eat the bones (such as sardines)
- reducing your intake of caffeine and soft drinks, which can inhibit calcium absorption.

7.5.3 Good food choices and health

The Australian Guide to Healthy Eating states that we should enjoy a wide variety of nutritious foods every day. The guide outlines the five food groups that provide the nutrients we need to grow and function on a daily basis. The amount of these foods we should eat each day depends on our body size and activity level. If you are very active and burn up lots of energy, you will need to eat more serves of these foods to sustain your energy levels. Table 7.4 outlines the number of serves for children and adolescents from each food group. For more information, use the Eat for health weblink in the Resources tab.

Few foods contain all the daily nutrients your body needs, so it is important to eat a variety of healthy foods. If you eat only three or four types of food, your body will not get all of the nutrients it needs. It is also vital to drink plenty of water to remain hydrated throughout the day.
**TABLE 7.4** Recommended average daily number of serves from each of the five food groups*  

<table>
<thead>
<tr>
<th>Toddlers**</th>
<th>Vegetables and legumes/beans</th>
<th>Fruit</th>
<th>Grain (cereal) foods, mostly wholegrain</th>
<th>Lean meat and poultry, fish, eggs, nuts and seeds, and legumes/beans</th>
<th>Milk, yoghurt, cheese and/or alternatives (mostly reduced fat)</th>
<th>Approx. number of additional serves (for more active, taller or older children and adolescents) from the five food groups or discretionary choices</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boys</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1–2</td>
<td>2-3</td>
<td>½</td>
<td>4</td>
<td>1</td>
<td>½</td>
<td>0–1</td>
</tr>
<tr>
<td>2–3</td>
<td>2½</td>
<td>1</td>
<td>4</td>
<td>1</td>
<td>1½</td>
<td>0–1</td>
</tr>
<tr>
<td>4–8</td>
<td>4½</td>
<td>1½</td>
<td>4</td>
<td>1½</td>
<td>2</td>
<td>0–½</td>
</tr>
<tr>
<td>9–11</td>
<td>5</td>
<td>2</td>
<td>5</td>
<td>2½</td>
<td>2½</td>
<td>0–3</td>
</tr>
<tr>
<td>12–13</td>
<td>5½</td>
<td>2</td>
<td>6</td>
<td>2½</td>
<td>3½</td>
<td>0–3</td>
</tr>
<tr>
<td>14–18</td>
<td>5½</td>
<td>2</td>
<td>7</td>
<td>2½</td>
<td>3 ½</td>
<td>0–5</td>
</tr>
<tr>
<td>Girls</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2–3</td>
<td>2½</td>
<td>1</td>
<td>4</td>
<td>1</td>
<td>1½</td>
<td>0–1</td>
</tr>
<tr>
<td>4–8</td>
<td>4½</td>
<td>1½</td>
<td>4</td>
<td>1½</td>
<td>1½</td>
<td>0–1</td>
</tr>
<tr>
<td>9–11</td>
<td>5</td>
<td>2</td>
<td>4</td>
<td>2½</td>
<td>3</td>
<td>0–3</td>
</tr>
<tr>
<td>12–13</td>
<td>5</td>
<td>2</td>
<td>5</td>
<td>2½</td>
<td>3½</td>
<td>0–2½</td>
</tr>
<tr>
<td>14–18</td>
<td>5</td>
<td>2</td>
<td>7</td>
<td>2½</td>
<td>3½</td>
<td>0–2½</td>
</tr>
<tr>
<td>Pregnant</td>
<td>5</td>
<td>2</td>
<td>8</td>
<td>3½</td>
<td>3½</td>
<td>0–3</td>
</tr>
<tr>
<td>Breastfeeding</td>
<td>5½</td>
<td>2</td>
<td>9</td>
<td>2½</td>
<td>4</td>
<td>0–3</td>
</tr>
</tbody>
</table>

*Includes an allowance for unsaturated spreads or oils, nuts or seeds (½ serve [4.5 g] per day for children 2–3 years of age, 1 serve [7–10 g] per day for children 3–12 years of age; ½ serves [11–15 g] per day for children 12–13 years, and 2 serves [14–20 g] per day for adolescents 14–18 years of age and for pregnant and breastfeeding girls).  
**An allowance for unsaturated spreads or oils or nut/seed paste of 1 serve (7–10 g) per day is included. Whole nuts and seeds are not recommended for children of this age because of the potential choking risk.
**Enjoy a wide variety of nutritious foods**

Children and adolescents should be encouraged to:

- eat plenty of vegetables, **legumes** and fruits
- eat plenty of cereals (including breads, rice, pasta and noodles), preferably wholegrain
- include lean meat, fish, poultry and/or alternatives
- include milks, yoghurts, cheeses and/or alternatives, especially reduced-fat varieties
- choose water as a drink.

Care should be taken to:

- limit saturated fat and moderate total fat intake
- choose foods low in salt
- consume only moderate amounts of sugars and foods containing added sugars.

**Advice from health organisations**

The approval of particular food products by recognised health promotion groups, such as the Heart Foundation, has helped to provide a quick and easy source of information on food labels. The Heart Foundation’s Tick program was introduced in 1989 as a way of helping consumers to make healthier eating choices. Foods that meet certain nutritional requirements, such as limited levels of saturated and trans fats, kilojoules and sodium (salt), or foods that are higher in fibre than similar products could earn the Tick. Though the Tick is no longer used, it helped increase public health awareness and empowered people to make healthy food choices. A more recent initiative has been the Health Star rating system introduced by the state and Federal governments. It is used to show the nutritional profile of packaged foods — food with the most stars (up to five) are the healthier choice.

Media advertising can be a poor source of nutritional information. Advertising generally highlights only positive aspects of a product, for example, that a product is ‘97 per cent fat free’, which can be perceived as being a ‘healthier option’. However, further investigation may show that this product has high levels of sugars or sodium. Foods high in sugar can lead to an increased risk of **obesity** or **type 2 diabetes**. Foods high in sodium can lead to an increased risk of cardiovascular disease. Foods high in fats could contribute to unhealthy weight gain. It is important that we consider these claims carefully as well as understand the nutritional information available on the label.

**Food labels**

Food labels are a good source of nutritional information that can be used to make healthy food choices. The law in Australia requires these labels to provide consumers with a certain amount of information about the nutritional content of the food. Ingredients must be listed in descending order of quantity — the ingredient listed first is the one that is present in the largest amount.

A recent improvement in labelling requires that most labels also show, as a percentage, the amount of the ingredient that characterises or is used to name the food — for example, the percentage of apricots in apricot jam. Showing this percentage allows you to compare various types of apricot jam.
In addition, information about the levels of energy (kilojoules), carbohydrate, fat, protein, sugar, sodium (salt) and other nutrients must be included on the label, usually in two columns — one showing the amount per serve (for example, 30 grams) and the other showing the amount per 100 grams. This information is contained in a nutrition information panel usually located on the side or back of the product, allowing you to make further comparisons between products.

Although food labels provide useful information about the nutritional quality of a particular food, they also have some limitations. Do you find the labels confusing, complicated or time-consuming to interpret? Many people do. Others can be misled by the marketing claims on the front of the package or by advertisements for the product, which create the impression that a food is healthy. Manufacturers often use words such as ‘lite’ or ‘light’ when referring to the colour, flavour or salt content of a food, but this is sometimes misunderstood to mean the food is low in fat or kilojoules.

**Influences on food choice**

Many contextual factors influence the food choices we make. These vary greatly from person to person, and for the same person in different circumstances. The most obvious influence is hunger. When we are hungry, our need for energy is high so we tend to make less informed choices about the nature of the food we eat. Other factors that influence our decisions about food, such as our family, the media, our friends and our culture also play a strong role in this decision-making process. Influencing factors on our food choices include:

- **cost and accessibility.** In many places, there are foods that are produced locally. These tend to be cheaper and more readily available. For this reason, local foods are used in many dishes of a particular region. An example of this is the use of rice in Asian countries.
- **education and knowledge.** Many studies indicate that if a person is knowledgeable about healthy food and healthy eating they tend to make better choices regarding diet. Levels of obesity and illness related to poor lifestyle, including poor diet, are higher in the parts of our society with the lowest levels of education.
- **culture.** Particular cultures have a strong influence on the food choices of people who identify as being a part of that culture. Many beliefs that help shape a culture are based on food choice and eating patterns. For example, Ramadan is a cultural event that influences when and what is eaten by members of the Muslim community.
- **stress.** Stress is an increasingly dominant force in food choice within our society. We know that stress can produce reactions that vary from person to person. Stress can suppress (lower) a person’s appetite, but it can also increase it. Additionally, stress may cause rushed or poor food choices as people don’t have adequate time to prepare healthy food choices for themselves.

### 7.5.4 Influences on food behaviour

Young people make daily choices about the food they consume. While this is largely a decision affected by availability, your choices are also influenced by a range of factors that have the potential to change your decisions about food and nutrition. Three of these influences are nutritional value, value for money and sustainability.

#### Nutritional value

The amount of energy, the type of energy (carbohydrate, fat and protein) and the levels of vitamins and minerals in food can have a large influence on its popularity. Foods that are considered high in particular types of nutritional values are often popular with a particular section of the community. For example, foods that are high in protein are popular with active and health-conscious people, such as those who regularly workout and use gyms. Likewise, foods less dense in energy but high in vitamins and minerals are also popular.
Value for money
Food that is produced in large amounts, or grown locally are often more affordable due to the reduced costs involved in their production or transport. If a particular food is more affordable than other options then it may be more popular, despite perhaps not having the same nutritional value as other options. An example of this is bread. It is cheaper to buy a loaf of bread from a large supermarket chain, however, the nutritional value of that loaf of bread is usually lower than a more expensive wholegrain or rye variety.

Food sustainability
There is growing pressure on our food production due to an increasing population, decreasing farmland, drought and extreme weather events. As a consequence, there is increasing pressure being placed on governments to ensure that our food is produced in a sustainable manner, using ethically sound methods. This means that our food is grown or produced, processed and packaged in a way that doesn’t harm the environment, is fair to the producer, such as fair pay for farm workers, and encourages healthy eating. If a product is promoted as ‘sustainable’ this may influence our food choices and make us more willing to pay a higher price for food produced ethically and sustainably.

Weighing up the conflicting influences on food choice can be difficult. The food choices we make often change as we get older, gain more experience and knowledge about nutrition.

7.5 Activities

Personal diet analysis
1. (a) Record your food intake over a period of one week.
(b) Compare your weekly food intake to the dietary guidelines for children and adolescents in Australia shown in table 7.4 or in the Australian Guide to Healthy Eating. Are you meeting the dietary guidelines for adolescents and children?
(c) Describe how you could improve your eating habits so that your diet is in line with the Australian dietary guidelines.

2. Do you think most young people eat a nutritious, balanced diet that is in line with the dietary guidelines? Give reasons for your answer, referring to at least three influences on behaviour in your response.

3. Plan a healthy diet for yourself that meets the dietary guidelines for adolescents and children for one week.

4. Find one interesting food label either from your own consumption or online. Prepare a 30-second presentation to your class (or group) about what is interesting or misleading about the information in the label and suggest who the target market might be.

5. (a) Compare a meal from a fast-food outlet to an equivalent home-cooked meal. Research the resources, packaging and transport that may have been used in the entire production of each meal.
(b) Which meal do you consider to be more ethically and sustainably produced? How would this affect your decision about which one to choose?

Nutrients
6. (a) Choose two of the essential nutrients found in foods. Use the Important nutrients weblink in the Resources tab to investigate then design an information sheet for each that includes the following:
• a description of the nutrient
• its main functions
• examples of recommended food sources
• the recommended intake for adolescents and adults.
(b) Present your findings using PowerPoint slides. Using SlideShare, collate at least six different nutrients. Alternatively, prepare a Kahoot quiz for your class about the different nutrients and their benefits, suggested serving size and foods high in each of the nutrients.
Healthy snacks
7. (a) Survey the class on what snacks they have had in the past 24 hours. You may wish to present your findings in a graph.
(b) Using your knowledge about nutrition, evaluate the nutritional value of the most popular choices.
(c) Discuss reasons why these snacks were chosen.
(d) Suggest at least five nutritious snack alternatives and create a poster or Prezi presentation to encourage your classmates to make healthier choices when choosing their snacks.

8. As a class, discuss and decide on a set of questions to ask your school canteen staff regarding the healthy options offered. Seek permission and elect two or three class representatives to undertake a tour of the canteen. Be sure to be respectful in your manner with the staff. What does the school do well in regard to looking after the health of students? What other things does the school do? For example, is there a breakfast club?
9. In small groups, produce a self-help guide poster to assist students in making healthy food choices from the school canteen. Obtain permission to display a different group’s poster each week in the canteen.
10. Create a checklist to analyse nutritional labels.

Making healthy choices
11. (a) Visit your local supermarket or browse their website. Using a set budget, plan a week’s diet that would align with the Australian Guide to Healthy Eating. Make a note of labels, advertising messages and marketing gimmicks.
(b) As a class, compare and discuss your findings. Discuss the challenges of planning a healthy diet, including value for money and eating sustainably.

Analysis of breakfast
Complete the following tasks to analyse the most important meal of the day.
12. (a) Nominate a number of students to each bring a box of breakfast cereal to class from home.
   Ensure there is a range of different cereals to analyse. Have one student bring a bag of sugar and a measuring teaspoon from home.
(b) In small groups, examine the nutrition label of each cereal.
(c) Compare the cereals and discuss the differences.
(d) Focus on the sugar content. Convert grams into teaspoons (one teaspoon = 4 grams of sugar) and physically measure out the amount of sugar (per serve) in the breakfast cereal. Which cereal had the least amount of sugar per serve? Were you surprised by your findings?
(e) In your groups, discuss the importance of consuming an adequate breakfast.
(f) Discuss three possible barriers to enjoying a healthy breakfast.
(g) As a group discuss some possible strategies to overcome the barriers identified; share your group’s ideas with the class.

Resources
- Interactivity: The nutrition of food (int-5452)
- Interactivity: Keeping the balance (int-5453)
- Digital doc: Worksheet 7.3 Analysing snack and lunch options (doc-29210)
- Weblink: Important nutrients
7.5 Check and challenge

Explain
1. List the essential nutrients found in food and the main function of each.
2. What foods are recommended in greater proportions in the Australian Guide to Healthy Eating?
3. What type of carbohydrates are best for you and why?
4. Why is it important to have a variety of fruits and vegetables in your diet every day?

Elaborate
5. Dietary guidelines for children and adolescents are different to those for adults. Research and identify the differences and discuss why they exist.
6. Outline how contextual factors such as education, culture and socioeconomic status can affect food choices and therefore eating patterns. Give positive and negative examples in your response.
7. What advice would you give to someone who had a diet of fast food that was high in fat and salt?
8. What is meant by sustainable and ethically sound food production? Give examples to support your answer.

Evaluate
9. Your family has decided to improve their diet. Identify the less healthy eating habits of your family and list ways these could be improved.
10. Research and report on why it is recommended to eat regular, smaller meals rather than just one large meal per day.

7.6 Mental health

Adolescents are more likely to be affected by mental health problems such as depression and eating disorders than any other age group in Australia. By maintaining positive mental health, you can reduce the risk of experiencing these issues. Knowing how to support yourself or someone who is doing it tough is an important skill.

7.6.1 Mental health problems

How we perceive the world and how we react to what is happening in our lives are reflections of our mental health. Young people who have positive mental health feel good about themselves, can make decisions to resolve problems and can bounce back when things become stressful.

For some people, the way they see the world and their place in it, and what they think about themselves, can be quite negative. They may find it difficult to cope with stress or even with day-to-day activities, such as study, a part-time job or other responsibilities. A significant number of children and young people in Australia experience mental health problems and, for some, this leads to mental illness, which is more severe.

Unfortunately, in the past there has been a stigma attached to mental illness. People who experience mental illness are often afraid or embarrassed to seek help or tell their family. This is slowly changing as awareness about mental illness increases. It is important that people who experience mental illness are supported in the same way as those who have a physical illness.
7.6.2 Types of mental health problems

Mental illnesses are divided into two groups — psychotic illnesses and non-psychotic illnesses. Table 7.5 outlines some of these.

<table>
<thead>
<tr>
<th>TABLE 7.5 Some common mental illnesses</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mental illness</strong></td>
</tr>
<tr>
<td><strong>Non-psychotic illnesses</strong></td>
</tr>
<tr>
<td>• Anxiety disorders, for example, traumatic stress disorder and obsessive compulsive disorder</td>
</tr>
<tr>
<td>• Depression, for example, adjustment disorder and post-natal depression</td>
</tr>
<tr>
<td><strong>Psychotic illnesses</strong></td>
</tr>
<tr>
<td>• Bipolar disorders</td>
</tr>
<tr>
<td>• Schizophrenia</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

**HEALTH FACT**

One in five Australians will experience a mental illness. Many mental illnesses are caused by a physical dysfunction of the brain and can be treated effectively. Some people experience their illness only once and fully recover; for others, the illness recurs throughout their lives. Stress may trigger some mental illnesses or prolong them.

**Depression**

Depression is a common mental illness. There are many types of depression. When a person is experiencing depression, they often have overwhelming feelings of despair and sadness. We all experience times when we feel sad or down, often triggered by stress or a loss in our lives. Generally, most people recover and are able to move past the loss. For people who have a depressive illness, the feelings of depression last longer and can make it difficult to cope with daily life.

Clinical depression can make it difficult to cope with daily life.
Eating disorders
Anorexia and bulimia are types of non-psychotic mental illness. Each of these eating disorders involves a preoccupation with control over body weight, eating and food.

Anorexia affects one out of every 50 adolescent girls. Most people who experience anorexia are female but males are also experiencing the disorder in increasing numbers.

Bulimia affects one in six adolescent females and can also affect males.

7.6.3 Positive mental health
People who have positive mental health:
• manage their emotions in a positive way
• develop and maintain positive relationships
• cope with the demands of everyday life
• feel content most of the time
• deal with stress in a positive way
• have a good sense of self
• know how to access help if they are not feeling ‘right’.

7.6.4 Supporting others
People who experience mental illness need the support of others. Treating others with respect and not putting them down will help them feel good and support their mental health. Think about how you would feel if your friends and family put you down. You would probably find it very difficult to handle. We may have a family member or friend who is going through a difficult time with anxiety, depression or an eating disorder and our support can help comfort them during this time.

Ways we can help include:
• being there for them
• talking
• listening
• encouraging them
• participating in their favourite hobby or activity.

If you are worried about yourself or someone you know, agencies such as Kids Helpline, Reachout, headspace, your school counsellor or a trusted adult are a good place to go so you can get the help you need.

7.6 Activities
Attitudes about mental illness
In groups of three, undertake the following tasks.
1. Discuss your attitudes about depression. What do you first think of when you hear the word?
2. Discuss the reasons why many people have negative attitudes towards people who experience mental illness.
3. Identify and discuss behaviours and language that you or others might use that can have a negative impact on people’s mental health, for example, calling them names or telling them they are stupid.
4. Design an advertising campaign that promotes awareness of mental illness and promotes positive attitudes towards people who have a mental illness.
5. Present your advertising campaign design to the class.
7.6 Check and challenge

Explain
1. Describe and give an example of a non-psychotic illness.
2. Describe four ways people display positive mental health.

Elaborate
3. Describe the difference between depression as a mental illness and feeling sad.
4. One method of protecting your mental health is learning positive ways to manage stress. Describe your favourite way to relax. Then use the Relax weblink in the Resources tab to learn some other relaxation methods.

7.7 Review

7.7.1 Summary
- Health is measured by a combination of physical, emotional, spiritual, social and cognitive components.
- Wellbeing is how these measures of health interact to create an overall picture of an individual’s wellness.
- There are some factors that affect your health that you might be unable to control, such as your genes, gender or environment. But other factors, such as the choices you make about your lifestyle, are yours to control.
- Young people often take risks that affect their health and the health of others.
- Knowing how to identify risks can keep you safe.
- Young people take risks for a range of reasons including peer pressure, to prove themselves, to rebel, inexperience and the need to be accepted.
- There is a difference between positive and negative risk. Positive risk is a considered risk where the potential outcome is worth the risk and will result in a positive outcome for an individual or group such as applying for a promotion.
- It is recommended that we eat a balanced diet that contains a variety of foods high in nutrients.
- There are many factors that influence our decisions about food, including our family, the media, our friends and our culture.
- Sustainability, value for money and nutritional value all influence our personal food choices and behaviours.
- The essential nutrients in foods are carbohydrates, vitamins, minerals, fats and protein.
- It is recommended that you limit your intake of saturated fats and high GI carbohydrates.
- The Australian Guide to Healthy Eating provides us with information on the type of foods we should eat and the daily proportions.
- Learning how to read food labels can provide you with the information you need to make better decisions about the food you eat.
ESSENTIAL QUESTION
How can we learn to make positive decisions to achieve our optimal health and wellbeing?

Evaluate your initial response to the essential question after having studied this topic.

7.7.2 Key terms

- **cardiovascular disease**: any disease that affects the heart or blood vessels, including stroke and high blood pressure.
- **cognitive health**: refers to our ability to think and reason and to make good decisions.
- **communicable disease**: can be passed from one person to another.
- **emotional health**: relates to how we feel about who we are, how we express our emotions and how we react when stressed.
- **ethically sound**: doing something the correct way according to the morals or principles involved.
- **extreme weather events**: unexpected, severe or unseasonal weather such as drought, flood or cyclone.
- **gender**: an individual’s sense of who they are, as opposed to what their sexual characteristics indicate. Gender can also be based on how a person feels inside and how they express their gender. For example, societal and cultural expectations usually depict that men should act and look ‘masculine’ and women, ‘feminine’.
- **heart attack**: a blockage in the blood flow in or to the heart.
- **kilojoules**: energy value of food.
- **legumes**: vegetables such as beans, peas and lentils.
- **mental health**: how we think, feel and express our emotions.
- **non-communicable disease**: cannot be passed from one person to another.
- **non-psychotic illnesses**: a group of disorders where the person feels high levels of anxiety most of the time.
- **nutrients**: chemical substances in food that nourish the body in specific ways; for example, carbohydrates provide energy.
- **obesity**: the presence of excess fat tissue in the body, having a body mass index (BMI) over 30.
- **peripheral artery disease**: reduced blood flow to the legs and feet.
- **physical environment**: our physical surroundings, such as housing and land; our natural resources, such as clean water.
- **physical health**: refers to the health of the body.
- **psychotic illnesses**: severe mental disorders that cause abnormal thinking and perceptions.
- **Ramadan**: Muslim practice involving fasting from dawn until sunset and increased prayer.
- **reasonable degree of risk**: the potential for a positive outcome is much greater than for a negative outcome.
- **resolve**: determination or a resolution to follow a course of action.
- **risk**: the chance for potential injury or loss.
- **sexual characteristics**: an individual’s identity based on their genes, hormones and physical characteristics, for example, having a vagina, breasts, penis or beard; can also be referred to as biological or physical sex.
- **shame**: Aboriginal and Torres Strait Islander term meaning embarrassment in certain situations, due mainly to the circumstances or attention rather than the result.
- **social health**: refers to our social interactions and how we relate to others.
- **socioeconomic environment**: determined by a person’s income, education and employment.
- **spiritual health**: refers to having a sense of purpose and meaning in our lives.
- **stereotypes**: widely held but overly simplified view of a particular individual or group based on their affiliation to a particular section of society.
- **stroke**: a blockage in the blood flow in or to the brain.
- **sustainable**: able to be maintained or sustained a certain rate or level.
- **type 2 diabetes**: high blood glucose levels as a result of not making enough insulin or because the insulin produced is not working effectively.
- **wellbeing**: a combination of person’s physical, social, cognitive, emotional and spiritual health factors. Wellbeing is strongly linked to happiness, satisfaction with life and positive relationships.
7.7 Check and challenge
To answer questions online and to receive immediate feedback and sample responses for every question, go to your learnON title at www.jacplus.com.au Note: Question numbers may vary slightly.

Key terms quiz online
Multiple choice quiz online

Check your understanding
1. What is health?
2. What is wellbeing?
3. What factors influence your health and wellbeing?
4. Why do young people take risks?
5. What is the difference between a positive and a negative risk?
6. Which communication skills assist you to stay safe in risky situations?
7. Identify and explain the major influences on your food choices.
8. List and describe the main function of the essential nutrients.
9. What are healthy food habits and why are they important?
11. Can mental health issues and conditions be treated?
12. If someone has a mental health condition, will they have it for life?
13. Is there a difference between feeling stressed and having a mental health condition?
14. What should you do if you are, or you think someone you know is, struggling with your/their mental health?

Resources
- Digital doc: Worksheet 7.4 Key terms quiz (doc-29211)
- Digital doc: Worksheet 7.5 Multiple choice quiz (doc-29212)
- Digital doc: Key terms glossary (doc-29213)