

2005 Lifestyle and Consumer Technology

Advanced Higher

Finalised Marking Instructions

These Marking Instructions have been prepared for use by Examination Teams for use by SQA Appointed Markers when marking External Course Assessments.

Advanced Higher

Home Economics – Lifestyle and Consumer Technology

Instructions to Markers

General Instructions

Each question is marked out of 25. Markers should use the full range of marks available as indicated in the mark descriptors for an A, B and C response at the top of each question.

Candidates should be awarded according to the quality of thought revealed in their answers. They should not be rewarded solely, or even mainly, according to the quantity of knowledge conveyed. In progression from Higher a more advanced grasp of the skills of analysis, synthesis and interpretation is required. Credit will be awarded according to the degree of success with which the candidate:

- gives an answer which is relevant to the question and is explicitly related to the terms of the question
- is able to make the various distinctions required by the question
- responds to all the elements in the question in a coherent manner
- applies knowledge and explains, analyses, discusses rather than simply stating facts
- develops the skills of analysis and evaluation through critical appraisal.

Section A

1. (a) Outline the main issues in the report.	5 marks
<p>A 4-5 marks The candidate is able to clearly outline the majority of the main issues of the report.</p> <p>B 3 marks The candidate is able to outline most of the issues of the report.</p> <p>C 2 marks The candidate is able to list some of the main issues of the report.</p>	
<p>Answers should make reference to the following points:</p> <ul style="list-style-type: none">• fewer pre schoolchildren now stay at home all day with parents• as more parents are returning to work after having children, childcare is becoming big business• recent statistics show a marked increase in the number of children attending nursery in the 2 years before school• almost ¼ million children in Scotland are in some sort of pre-school childcare provision• the Scottish Commission for the Regulation of Care was formed in 2002, one of its jobs is to inspect all forms of childcare provision• there is a wide range of pre education providers eg nurseries (state and private) play groups and registered childminders• extended care is now available at many childcare establishments – wraparound and after school/holiday clubs are two examples• a wider range of opportunities is now on offer which may make it easier for parents to return to work• nurseries contribute positively to a child’s development• rising house prices may be contributory factors in parents going back to work• many women opt to work part time to allow time for both work and children• some feel women are pressured in going back to work due to attitude towards full time mothers• the numbers of childminders are dropping• appropriate child care may help reduce the number of children living in poverty.	

1. (b) Discuss how the role of women has changed in the last century.	10 marks
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A – 8-10 marks
The candidate is able to develop a full and coherent discussion of the changing role of women. The discussion shows good analysis and the identification of the main points with full explanations.

B – 6-7 marks
The candidate is able to develop a discussion of the changing role of women. Most of the main points will be identified with some explanation.

C – 4-5 marks
The candidate is able to identify some of the main points with limited explanation.

Answers should make reference to the following points:

- more women than ever work now
- many choose part time work so as to spend time with their families
- some women may provide the main source of income with changing roles for the other members of the family
- in the first half of the 20th century most women were employed in jobs such as clerical, secretarial, hairdressing etc, in the latter half of the century more were being employed as managers and administrators
- as a result of improved educational opportunities, more women now enter the professions
- even after the Second World War, many married women were not ‘allowed to work’ and had to give up their jobs when they got married
- 1976 Sex Discrimination Act made all jobs (technically) open to women affects types of careers and role within work force
- it is still women who are primarily responsible for running the home
- cooking, washing and cleaning are predominantly done by women, shopping is the only chore shared almost equally by both sexes
- if there are children, women are much less likely to be in full time employment and the bulk of the child care tasks fall to the mother
- the falling birth rate and ageing population means care of the elderly is becoming an increasing burden of women
- despite their household management role many women do not have equal control of household resources. They tend to earn less and hold less back for personal use
- women’s increased role in the workplace has brought more money into the household for spending on material goods and services
- reliance on reliable contraception has allowed women to plan when to have children
- increased/advance technology has allowed many household tasks to be completed easily thus releasing women from household tasks
- women marrying/having children later in life
- divorce/separation is easier so women may have to work to support family
- many women prefer to have financial independence.

1. (c) 'More parents are opting to return to employment soon after the arrival of a child'.
Critically discuss the implications of this statement in relation to family life.

10 marks

A – 8-10 marks

The candidate is able to develop a full and coherent discussion of the implications in relation to family life. The discussion shows good analysis and the identification of a wide range of implications and full explanations.

B – 6-7 marks

The candidate is able to develop a discussion of the implications in relation to family life. A range of implications will be discussed with explanation.

C – 4-5 marks

The candidate is able to develop some implications with limited explanation.

Answers should make reference to the following points:

- family has more money – improved lifestyle
- more likely to be able to afford holidays and relax together as a family
- ability to enable children to experience a wide range of leisure pursuits
- more able to afford cleaners etc to ease burden of home life and relieve pressure
- less time may be spent with children depending on full or part time work
- time spent with children valued and of high quality as it is short
- time that is spent with children is when everyone is tired at the end of a working day
- stress levels of parents high due to pressure of work against family life could cause arguments between family members
- despite earning more, cost of living goes up, cost of childcare etc, this cycle puts stress on the family
- higher income so less financial pressure
- less time may be available for food preparation, increased use of convenience foods – may be health implications
- parents spoil children financially due to feelings of guilt for 'not being there'
- still tends to be women who do most at home – stressed, run down, short tempered, less time with children
- household chores still need to be done – eats into family time at the weekends
- increase in ability to purchase labour saving devices help ease situation
- little time for pleasurable family outings due to lack of time
- many parents work weekends therefore even less time to spend with children/spouse
- pressure on men to contribute more to the running of the home – a significant change to the traditional male role
- potential increased child to father contact means a change of emphasis of parenting. Change of male role model
- greater socialisation of children – meet more varied people due to attending childcare therefore different influences on the children
- effective role models/development of work ethic within children
- parents feel as if they are making a contribution to both family and society and therefore feel valued and happier
- single/lone parent may have no option but to return to work and this could result in a variety of pressures
- lack of parental contact may prevent bonding taking place, eg nannies.

Section B

1. (a) Using the data below, discuss the social, economic and technological factors which may have influenced the changes in household spending over the thirty year period.

10 marks

A – 8-10 marks

The candidate is able to develop a full and coherent discussion of the changes and influencing factors in household expenditure. The discussion shows good analysis and the identification of the main points with full explanations.

B – 6-7 marks

The candidate is able to develop a discussion of the changes and influencing factors in household expenditure. Most of the main points will be identified with some explanation.

C – 4-5 marks

The candidate will be able to identify some of the main points with limited explanation.

Answers should make reference to the following points:

Housing

- increased amount of money spent on housing – deliberate government policy to reduce council housing stocks so cheap council owned property is less available and in smaller supply
- increase in number of people buying their own home – the private sector is often more costly/ people more willing to pay a higher proportion of their income to own their own home
- housing prices rose rapidly in the late 20th century especially in cities.

Fuel and power

- much smaller amount of money spent on fuel and power especially in relation to disposable income – may be due to the fact that significantly more women are now out at work so houses are empty during the day so heating etc is not required
- much smaller proportion of money spent on fuel and power – improved technology has meant that the actual cost of producing electricity, for example, is less
- energy conservation schemes saves on bills
- more energy efficient housing/equipment saves bills
- deregulation/combined gas and electricity suppliers/dual fuel companies have allowed more competition so reducing bills.

Food and non alcoholic drinks

- decrease in expenditure on food and non alcoholic drinks especially in relation to disposable income
- improvements in technology in food production allow foods to be made with very cheap ingredients therefore a large supply of very cheap foods available on the market eg ‘basics’ ranges
- decrease in expenditure on food – eating out has become a leisure activity so money spent on food may be seen as money spent on leisure
- more money spent proportionately in this area in 1970.

Tobacco

- large decrease in expenditure on tobacco in relation to income – health implications of smoking now so well publicised that fewer people smoke
- smoking is becoming increasingly anti social and not accepted in public and so less people are continuing to smoke/unable to smoke eg at work, cinema, so quantity smoked is less.

Clothing and footwear

- slight drop in percentage of income but consumers may get more for their money due to availability of low priced ranges in clothing and footwear
- income has risen therefore less percentage of income spent on clothes/footwear.

Household goods and services

- increased disposable income allows more expenditure on household services eg home cleaners etc so allowing more leisure time
- more disposable income allows consumers to purchase items to make life easier eg dishwashers etc.

Personal goods and services

- rise in spending on personal goods and services as a result of technological advances such as mobile phones, computers etc – results in a frequent updating of technology
- increased income allows an increase in personal care services such as hair dressing, beauty treatment, manicures etc.

Motoring

- slight increase in expenditure on motoring in relation to income – as more people now own motor cars than in the 70's the average spent on cars per family has risen
- increase in expenditure on motoring – people who own cars travel greater distances than they used to eg social and entertainment trips, this also increases the cost per household
- rising cost of fuel in relation to motoring
- although car prices have risen manufacturers now tend to have special offers/finance packages/purchase on-line which helps to keep car prices down.

Fares and other travel costs

- remain much the same in relation to disposable income
- fewer people use public transport due to lack of reliability and increase in car ownership.

Leisure goods and services

- large increase in expenditure on leisure services – average earnings have risen at a higher rate than prices so more people are better off and have more money available for leisure activities
- large increase in expenditure on leisure services – foreign travel is more common place so the amount of income dedicated to this has increased over the last 30 years
- large increase in expenditure on leisure services – may be due to increased expenditure on home entertainment
- more availability and increased range encourages use.

1. (b) Critically discuss the factors that should be considered when assessing the housing and personal needs of an elderly woman who is recovering from a recent hip replacement operation.

15 marks

A – 12-15 marks

The candidate is able to develop a full and coherent discussion of the needs of the elderly woman. The discussion shows good analysis and the identification of a wide range of factors with full explanation.

B – 9-11 marks

The candidate is able to develop a discussion of the needs of the elderly woman. A range of factors will be identified with explanation.

C – 7-9 marks

The candidate is able to identify some of the factors with limited explanation.

Answers should make reference to the following points:

Housing

- neighbours, friends and family close by may be more important now as help may be needed on occasion
- less mobile so will be less independent in the home especially if house is not appropriate
- stairs may be difficult to cope with if exist in present home – may need to live downstairs for a time
- may need to install a chair lift for stairs if existing stair is steep and operation not successful long term
- bath may need temporary adaptations or installation of a shower for ease
- equipment eg vacuum cleaner may be more difficult to use/carry especially if on more than one floor
- occupational therapy and social work may need to become involved to help with any changes and adaptations to the home or in relation to moving to a more appropriate home
- may need to look at other housing possibilities eg all on one level or other housing such as sheltered if operation not successful long term
- may lose additional income to pension from part time work so may need to consider housing benefit claim

Personal

- ability to do own shopping may be affected for some time – may need help
- ability to prepare food may be affected for some time
- ability to socialise may be affected for some time – could feel isolated
- driving ability will be affected for some time – could feel isolated
- use of public transport
- dressing and undressing may be difficult – changes to clothing or assistance may be required
- household cleaning, ironing – home help or help may be required – financial implications
- may require respite care for a few days/week before returning home depending on home/family circumstances
- lack of confidence/self esteem may be affected through lack of independence
- need for back up services for some time and the ability to pay for them
- meal provision eg meals on wheels may need to be considered
- physiotherapy may be required to regain full use of hip to ensure independence in future

2. Discuss how Scottish dietary targets might improve the health of Scottish people.	25 marks
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<p>A – 18-25 marks The candidate is able to develop a full and coherent discussion of how the SDT may improve the health of Scottish people. The discussion shows good analysis and the identification of the majority of the main points with full explanation.</p> <p>B – 15-17 marks The candidate is able to develop a discussion of how the SDT may improve the health of the Scottish people. Most of the main points are identified with explanation.</p> <p>C – 12-14 marks The candidate will be able to identify some of the main points with limited explanation.</p>	
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<p>Answers should make reference to the following points:</p> <p>Reduce fat intake to no more than 35% of total energy intake This will lead to a reduced risk of;</p> <ul style="list-style-type: none"> • overweight/obesity as high as calories – concentrated source of energy. Excess weight puts a strain on the heart which may lead to CHD • increase in high blood pressure which could lead to strokes • complications during operations associated with excess weight • excess weight associated with increased risks to the mother during pregnancy and childbirth • trans fatty acids in processed and dairy foods which act like saturated fatty acids causing an increase in cholesterol levels and increased risk of heart disease. <p>Reduce saturated fat intake to no more than 11% of total energy intake This will lead to a reduced risk of;</p> <ul style="list-style-type: none"> • CHD and heart attacks as diets high in saturated fat raise cholesterol in the blood deposits of cholesterol on arteries restrict blood flow. <p>Reduce salt intake to no more than 100mmol per day This will reduce the risk of;</p> <ul style="list-style-type: none"> • high blood pressure and CHD as salt is known to be a contributor towards this • stomach cancer as high intakes of salt thought to be linked to this • Alzheimer’s Disease as high intakes of salt associated with this. <p>Adult sugar intake to remain the same, children’s sugar intake to reduce by half</p> <ul style="list-style-type: none"> • sugar provides a concentrated source of calories and as such may contribute to overweight/obesity. This puts a strain on the heart and may also lead to high blood pressure • bacteria breaks down sugar, this results in the production of acids which attack and may eventually destroy the teeth • empty calories so may reduce intake of other valuable nutrients • high intakes associated with diabetes, gallstones etc • addictive in nature therefore difficult to cut down • overweight children often become overweight adults therefore preventative health measures for the future. 	
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Increase fruit and vegetable intake to 400g per day

- these foods are high in NSP which promotes a feeling of fullness and reduces risk of snacking on high fat/sugar snacks between meals
- the foods are low in fat so useful as snack food which does not increase daily fat or calorie intake to any great extent
- NSP in fruit and vegetables combines with cholesterol and bile salts preventing cholesterol from being absorbed – reducing risk of CHD
- fruit and vegetables an important source of NSP and therefore help prevent constipation and other bowel disorders
- fruit and vegetables are an excellent source of anti oxidant vitamins, these have a vital role in the prevention of CHD, cancers etc
- Vitamin C helps absorption of iron so preventing risk of anaemia.

Increase intake of complex carbohydrate by 25%

- provides a steady supply of energy helping blood sugar levels to remain stable thus preventing snacking on high fat foods
- often a good source of NSP therefore associated benefits of fullness and removal of waste efficiently/reduce bowel disorders
- NSP combines with cholesterol and bile salts preventing the cholesterol from being absorbed – reducing the risk of CHD.

Consumption of breakfast cereals to double to 34g/day

- consumption of breakfast reduces the desire to snack on high fat/sugar snacks, particularly mid morning
- often contain NSP – associated health benefits/reduce bowel disorders
- wholewheat/no added sugar will give associated health benefits.

Bread intake to increase by 45% using mainly brown and wholemeal breads

- often a good source of NSP therefore associated benefits of fullness and removal of waste efficiently
- NSP combines with cholesterol and bile salts preventing the cholesterol from being absorbed – reducing the risk of CHD
- provides bulk to the diet and so reduces the desire to snack on fatty sugary snacks which may lead to a variety of health problems.

Consumption of white fish to be maintained at current levels, oil rich fish consumption to double from 44 grams per week to 88 grams per week

- oily fish helps to lower cholesterol levels and CHD risk due to omega 3 content
- white fish an important low fat source of protein – may help to reduce CHD if eaten instead of fattier red meats
- oily fish are good sources of calcium – bone formation, prevention of rickets/osteoporosis.

Increase number of women breastfeeding during first 6 weeks to more than 50%

- reduces risk of baby developing gastrointestinal and respiratory illness in infancy
- provides protection against childhood diabetes/asthma/obesity in later life
- protects the mother against breast cancer
- boosts baby's immune system
- allows mother to lose weight gained in pregnancy.

3. Discuss the techniques employed by manufacturers and retailers when marketing a product for children.	
	25 marks
<p>A – 18-25 marks Candidates are able to develop a full and coherent discussion of the statement in relation to techniques employed by manufacturers and retailers when marketing products for children. The discussion must show good analysis and the identification of the majority of the main points with full explanations.</p> <p>B – 15-17 marks Candidates are able to develop a discussion of the statement in relation to techniques employed by manufacturers and retailers when marketing products for children. Most of the main points will be identified with explanations.</p> <p>C – 12-14 marks Candidates are able to identify some techniques employed by manufacturers and retailers when marketing products for children with limited explanation.</p>	

Answers should make reference to the following points:

Persuading parents

- manufacturers want to create a product children want that parents will buy
- balance of child appeal/parental acceptability is critical
- research indicates that if the parent feels that their children are being exploited by manufacturers they will not purchase the product
- manufacturers must ensure that the contents meet parental approval otherwise repeat purchases will not be made
- nutritional/educational value of products highlighted to parents to encourage purchase
- careful market research should be conducted on parents' expectations/product appeal
- product image must be acceptable to parent eg sweetie cigarettes/guns no longer acceptable
- this age range generally doesn't have their own money to spend on products – purchase tends to be made by adult through persuasion.

Product image

- use of characters/packaging/sports personalities/brand names to attract children and increase product appeal
- promotional packs – film characters, etc for visual appeal eg Looney Tunes baked beans; Harry Potter pencils, clothing etc
- consumer research to establish acceptability of product by target group

Promotion/Advertising

- manufacturers sponsor events to advertise products
- use of on-pack offers for additional items/special offers/competitions can increase sales eg buy six cans and send for teddy bear for £3.99
- TV advertising is a high profile format for older age range
- timing of TV adverts is crucial to reach correct audience – children's TV time
- children are encouraged through adverts (mainly TV) to apply pressure to parents to purchase latest product/collect the set
- women's magazines – adverts to appeal to parents eg Sunny Delight
- websites – children are encouraged by magazines/TV adverts/cable channels to access products through games on the Internet
- timing of adverts crucial eg xmas toy ads start in early November, crème/easter eggs start in January to allow children time to persuade parents
- adverts which appeal to target group
- use of jingles
- use of celebrities
- free samples/free trial.

Marketing

- identify target market/customer profile
- name change/product revamp to increase appeal.
- shelf-life of product must be carefully monitored – update/change of image should be maintained in relation to popular characters eg 101 Dalmations became Harry Potter
- product location – citing within supermarkets/shops is crucial – shelf height must be within child's reach/end of aisle promotions/beside checkouts will allow child to access product and persuade parent to purchase
- careful monitoring of product sales must be conducted to maintain pace in market eg Playstation became Playstation 2
- retail price critical – parents want to feel it offers value for money
- novelty factor – must provide the child with a certain level of entertainment/enjoyment or the child will not pressure parent to re-purchase
- children in nursery/primary school can be encouraged to apply pressure to parents to purchase product through peer pressure/competition element
- offer free gifts.

Qualities of products

- food additives – parents who have an understanding of the possible effects of food additives may think twice about purchasing products high in food additives
- promote the 'natural' ingredients in the product – encourages parents to feel that they are improving their children's diet/health
- vitamins – addition of extra vitamins can persuade some parents to purchase – media link with IQ
- educational benefits often highlighted – interactive games.

4. Discuss the causes and implications of poverty and deprivation in Scotland.	25 marks
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A – 18-25 marks

The candidate is able to develop a full and coherent discussion of the causes and implications of poverty. The discussion shows good analysis and the identification of a wide range of factors with full explanations.

B – 15-17 marks

The candidate is able to develop a discussion of the causes and implications of poverty. A range of factors will be identified with explanation.

C – 12-14 marks

The candidate is able to identify some of the factors with limited explanation.

Answers should make reference to the following points:

Causes:

- poverty can be described as lack of resources to obtain the type of diet, participate in the activities and have the living conditions and amenities which are customary in ones society
- deprivation relates to lack of amenities whereas poverty is caused by lack of money
- the elderly are more likely to be poor as income drops at retirement
- unemployment often leads to poverty as income is very low
- having children can lead to poverty as income has to be stretched to meet the needs of more people
- people in low paid jobs are more likely to be poor
- single parent families often with one or very limited income may suffer from poverty
- long term sick who cannot work and have to rely on benefits may be poor
- generally being outside the labour market eg elderly, unemployed, sick and disabled make up the majority of the poor in Scotland
- poverty also evident in rural areas due to the decline of agriculture employment, prevalence of low wages and the reduction of rural services
- poverty in rural areas often seen as less important due to the general image of the rural idyll, so less is done about it
- widening class divisions contribute to poverty, the exclusion of the poor from rising living standards and the general shift of attitudes to those of self interest do nothing to contribute towards a caring inclusive society.

Implications

- one of the main implications of poverty is lack of choice
- this means a higher proportion of income is spent on essentials eg food, fuel, light and power
- inability to access high quality services
- the deprivation which accompanies poverty can be caused by a lack of power eg hospital closures are more likely in poorer areas where individuals are less able to organise resistance
- poor health often goes hand in hand with poverty
- people living in poor areas can expect to live for 8 years less than those in well off areas
- overcrowding is more likely in these areas
- higher incidence of infant mortality
- car ownership is very low amongst the poor and this limits access to amenities and shops eg out of town supermarkets where cheaper, better quality foods are available
- schizophrenia, CHD, strokes and lung cancer all show a higher incidence amongst deprived people
- poor quality housing, inadequate heating and poor diet, symptomatic of those living in poverty all have detrimental effect on health
- the stigma attached to being poor can have detrimental psychological effects
- people living in poor areas are 4 times more likely to be burgled than those living in more affluent areas
- affordable insurance may be difficult to get in poor areas, so if burgled – difficult to replace goods
- getting a job can be more difficult when employers realise you live at the ‘wrong address’
- opportunities constrained by lack of local opportunities
- poverty can be seen as a trap as those who are excluded from mainstream society find it very difficult to get back in.

5. Schools can have a large and significant part to play in the promotion of health. Discuss this statement in relation to teenagers.	
	25 marks
<p>A – 18-25 marks The candidate is able to develop a full and coherent discussion of the role played by schools in the promotion of health to teenagers. The discussion shows good analysis and the identification of a wide range of factors with full explanations.</p> <p>B – 15-17 marks The candidate is able to develop a discussion of the role played by schools in the promotion of health to teenagers. A range of factors will be identified with explanation.</p> <p>C – 12-14 marks The candidate is able to identify some of the factors with limited explanation.</p>	
<p>Answers should make reference to the following points:</p> <ul style="list-style-type: none"> • government guidelines ensure that health education features in the classroom • children are taught health education throughout pre-school, primary and secondary education • issues covered are relevant to age groups being taught • wide range of issues covered in the classroom in an effort to educate youngsters re their health eg road safety; drugs; alcohol; nutrition; fitness and AIDS • promotion of health takes many forms depending on individual school • health education is delivered through the formal and informal curriculum • secondary schools have subject specific areas of health education – Biology; Home Economics; PE; PSHE • many schools have joined Health Promoting Schools project showing a commitment to this area • foods available in schools canteens have been altered due to commitment to promoting good eating habits – Hungry for Success implementation • free fruit in schools in certain areas of the country • increased availability of fresh drinking water/water coolers/drinking in class • availability of healthier menus reflect work taught in Home Economics curriculum • many agencies are producing materials for schools to ensure promotion of this area – Sainsburys/FSA Food Bus etc • some resources are produced free of charge others are for commercial gain by companies wishing to promote own products – selective use of these resources ensures balanced views are developed • use is made of information/promotional materials from charitable organisations such as Cancer Research UK, British Heart Foundation etc • staging of events to promote health becoming more common eg health weeks • Home Economics departments can make use of industrial links with large supermarkets and access their specialist Home Economists to visit the classroom to give talks/demonstrations • many schools issue leaflets for information in an accessible form for youngsters • children are at an impressionable age during their primary years many schools now make health a daily feature in the classroom • increased promotion of exercise – role of PE/core PE/extra curricular activities on offer/sports co-ordinators • structured PSHE curriculum in secondary schools ensure appropriate information is covered at the appropriate time eg sex education/misuse of drugs • Health Promoting Schools status ensures schools lead by example – New Community Schools must have/promote a health policy 	

- well being of the whole child is now paramount in school, increased childrens' rights (Child Protection guidelines)
- increased involvement of outside/external agencies to ensure health of children
- different approaches in individual schools taken to meet needs of pupils eg drop in clinics with school nurse/contraceptive advice etc.

Note: Candidates may make reference to individual initiatives in health promotion undertaken by their own school.

Question	Context	Elaboration	Knowledge	Evaluation	Totals
Section B 1 (a) (b)	The household and the community	<ul style="list-style-type: none"> • Factors affecting household expenditure patterns since 1900 • Changes in living standards • Rise of service economy • Impact of technology • Use of demographic data 	10	15	25
2	Socio-economic factors affecting consumer choice of food and clothing	<ul style="list-style-type: none"> • The mass media, advertising and food habits • Relationship between the marketing mix and consumer behaviour • Role of psychology in development and launch of new products 	25		25
3	Nutrition and health in the community	<ul style="list-style-type: none"> • How/why dietary guidelines are compiled • Promoting health and nutrition • Target audiences for nutritional information – suitability/clarity 	25		25
4	Nutrition and health in the community	<ul style="list-style-type: none"> • Promoting health and nutrition 	25		25
5	The household and the community	<ul style="list-style-type: none"> • Causes and implications of poverty and deprivation 	25		25

[END OF MARKING INSTRUCTIONS]