



higher education & training

Department:
Higher Education and Training
REPUBLIC OF SOUTH AFRICA

NATIONAL CERTIFICATE (VOCATIONAL)

COMMUNITY ORIENTED PRIMARY CARE NQF LEVEL 2

(9010102)

**12 March 2018 (X-Paper)
09:00–11:00**

This question paper consists of 10 pages.

TIME: 2 HOURS
MARKS: 150

INSTRUCTIONS AND INFORMATION

1. Answer ALL the questions.
 2. Read ALL the questions carefully.
 3. Number the answers according to the numbering system used in this question paper.
 4. Start each question on a new page.
 5. Use only blue or black ink.
 6. Write neatly and legibly.
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QUESTION 1

1.1 Various options are given as possible answers to the following questions. Choose the answer and write only the letter (A–D) next to the question number (1.1.1–1.1.10) in the ANSWER BOOK.

1.1.1 The study of the distribution and determinants of health-related states or events and the application of this study to the control of disease and other health problems is known as ...

- A endemic.
- B epidemiology.
- C anthropology.
- D equity.

1.1.2 The first principle of COPC is known as ...

- A local health and institutional analysis.
- B comprehensive care.
- C equity.
- D practice with science.

1.1.3 The fourth principle of COPC is known as ...

- A local health and institutional analysis.
- B comprehensive care.
- C equity.
- D practice with science.

1.1.4 The principle of equity's components includes ...

- A xenophobia.
- B primary, secondary and tertiary.
- C accessible, appropriate, affordable and relevant.
- D accountable, appropriate, affordable and reality.

1.1.5 Person-centred health care, people and practitioners in partnership and continuity of care are components of the ... principle.

- A local health and institutional analysis
- B comprehensive care
- C equity
- D service integration around users

1.1.6 The types of prevention include ...

- A primary, secondary and tertiary.
- B retain, restore and create.
- C values, justice and human rights.
- D values and facts.

1.1.7 Accessibility in health care is based on ... equity.

- A primary and secondary
- B horizontal and vertical
- C first and second
- D beginning and end

1.1.8 Practise with science includes ... as a component.

- A person-centred health care
- B continuity of care
- C scientifically informed
- D palliation

1.1.9 The abbreviation DOTS refers to ...

- A a fashion statement on health care uniforms.
- B Directly Observed Treatment Short Course.
- C Direct Transmission STIs.
- D Directly Observed Training on STIs.

1.1.10 The three severe types of TB in terms of being drug-resistant (from least to most severe) are ...

- A MDR-TB, XDR-TB and TDR-TB.
- B XDR-TB, TDR-TB and MDR-TB.
- C TDR-TB, MDR-TB and XDR-TB.
- D MDR-TB, TDR-TB and XDR-TB.

(10 × 1) (10)

1.2 Explain the term *community oriented primary care*. (5)

1.3 Name the FIVE components of comprehensive care. (5)

1.4 Give ONE example of how the different components of comprehensive care mentioned in QUESTION 1.3 can be used in terms of persons with chronic illnesses and diseases.

Use the following topics for each component:

1.4.1 Component 1: TB

1.4.2 Component 2: Diabetes

1.4.3 Component 3: HIV/AIDS

1.4.4 Component 4: Hypertension/Stroke patients

1.4.5 Component 5: Cancer patients

(5 × 2) (10)
[30]

QUESTION 2

- 2.1 Indicate whether the following statements are TRUE or FALSE. Choose the answer and write only 'true' or 'false' next to the question number (2.1.1–2.1.5) in the ANSWER BOOK.
- 2.1.1 Social space is used to create, describe and compare categories, hierarchies, experiences and differences.
- 2.1.2 When a child is described as first born, it is known as distinct physical location.
- 2.1.3 Postnatal care is health care given to a mother when pregnant.
- 2.1.4 PMTCT refers to prevention of mother-to-child transmission in terms of HIV.
- 2.1.5 A genogram is a diagram that shows the structure of families over time.
- (5 × 1) (5)
- 2.2 Define the following terms:
- 2.2.1 Physical time
- 2.2.2 Biological time
- 2.2.3 Psychological time
- 2.2.4 Sociological time
- 2.2.5 Physical space
- (5 × 2) (10)
- 2.3 List FIVE roles of the family in society. (5)
- 2.4 Explain the importance of time in COPC in terms of service delivery to women and children during and after pregnancy. (5)
- 2.5 Discuss how space and place can influence a person's health and therefore are of importance to COPC. (5)
- [30]**

QUESTION 3

3.1 Define the following terms:

3.1.1 Chronological age

3.1.2 Disability

3.1.3 Origin

3.1.4 Sex

3.1.5 Absolute poverty

(5 × 2) (10)

3.2 Explain how chronological age plays a role in the following aspects of society:

3.2.1 Education

3.2.2 Employment

3.2.3 Health care

(3 × 2) (6)

3.3 State the FOUR elements of social class.

(4)

3.4 Family is seen as the so-called context of individual health and therefore plays a role in COPC.

Discuss this statement by referring to how the family can play a role in individual health in terms of nutrition, exercise, sexuality, caregiving and personal hygiene.

(5 × 2) (10)
[30]

QUESTION 4

- 4.1 Complete the following sentences by using the words in the list below. Write only the missing word or words next to the question number (4.1.1–4.1.10) in the ANSWER BOOK.

anthropologists; origin; race; ethnicity; culture; nationality; descent; equity; sickle-cell anaemia; xenophobia; ukuthwala

- 4.1.1 ... has three dimensions, that is physical properties, thinking according to certain beliefs/folk theory and being created as social institution.
- 4.1.2 ... is used to categorise people, especially in political settings.
- 4.1.3 The idea of ethnicity calls for concepts of ... and identity.
- 4.1.4 When referring to ... one is referring to parentage or family.
- 4.1.5 ... refers to nation states that determine citizenship.
- 4.1.6 ... refers to discriminating behaviour towards other cultures, especially foreigners.
- 4.1.7 ... is an irregular but common way of negotiating customary marriage.
- 4.1.8 ... is an illness that affects mostly people of African descent but also Middle Eastern or Mediterranean descent.
- 4.1.9 The principle of ... means going against any form of discrimination due to race, origin or ethnic factors.
- 4.1.10 The concepts of race come from attempts made by ... to classify human beings.

(10 × 1) (10)

- 4.2 State FIVE possible challenges to ensure equity can be implemented with regards to race, origin and ethnicity.

(5)

4.3 Read the following article and answer the questions.

OVER 2,8 MILLION PEOPLE IN SA LIVE WITH DISABILITY

SOUTH AFRICA Tuesday 9 September 2014 - 15:15

Contributors: [Bianca Ackroyd](#)

JOHANNESBURG – In South Africa, 7,5 percent of the population (2 870 130 people) live with some form of a disability.

This is according to a Census 2011 report titled 'Profile of persons with disabilities in South Africa'. The report was released on Tuesday morning by Statistics South Africa. The figure cited is an increase from the 2% of people living with disability that was reported in 2001. It's been suggested that the increase in numbers was due to a change in evaluation methodology, which now incorporates a process of disabled persons reporting their afflictions in the census.

'The system of measurement is based on self-declaration. A different set of questions is being asked in the Census and this gives us a different process of measurement,' said Statistician-General Pali Lehola. In the 2011 Census, people were asked if they had mild or severe difficulty in the six functional areas of seeing, hearing, communicating, walking, remembering and self-care.

The method of evaluation is based on an international standard adopted by the Washington Group on Disability Statistics and the United Nations Statistical Commission. However, Disabled People of South Africa (DPSA) are disputing the figures released by Stats SA. 'This is a total fabrication of statistics because it doesn't look at disability as a social issue,' Olwethu Siphuka, national spokesperson for DPSA, said to eNCA.com on Tuesday. 'With this medical model people don't always disclose their disabilities,' said Siphuka.

According to DPSA, the prevalence of disability is almost double the amount (14%) compared to the Stats SA figure of 7,5% he said. Siphuka explained how this possible miscalculation could be devastating. 'Only 50% of people living with disabilities will be covered by the national budget.' The DPSA's method of evaluating the prevalence of disability is to look at their own membership figures as well as their door-to-door support efforts. 'The instrument is not scientific, we don't run tests on people, it all depends on self-declaration,' said Lehola.

The Free State and the Northern Cape have the highest proportion of people living with disabilities (11%), followed by the North West. The Western Cape and Gauteng have the lowest percentage of people living with disabilities (5%). Both Lehola and Siphuka agree that the cause of this is because people become disabled after working on mines. 'People from mining communities come back disabled and this is directly related to poverty levels,' said Siphuka.

Only 5,1% of disabled people obtain higher education, meaning that 94% of people get lost in the system. This represents the most important challenge facing disabled people in South Africa, that being education, followed by employment and health, says Siphuka. Not having a tertiary education reduces the chances of disabled people getting into business. 'People who are disabled don't just want to live on grants. They want to go to work and support their families,' said Siphuka.

[Adapted from: eNCA - <http://www.enca.com/self-declaration-key-accurate-disability-figures>, accessed 3 June 2017]

- 4.3.1 The article refers to statistics on South Africa and the disability prevalence.
Which COPC principle does this relate to? (1)
- 4.3.2 Explain how this principle can have an influence on disability and ability. (2 × 2) (4)
- 4.3.3 The article refers to the medical model of disability.
Name the other model of disability. (1)
- 4.3.4 Briefly explain the model of disability mentioned in QUESTION 4.3.3. (3)
- 4.3.5 'Not having a tertiary education reduces the chances of disabled people getting into business.'
Discuss how disability and ability has an influence on society by referring to each of the following aspects:
A Education
B Employment
C Welfare (3 × 2) (6)
- [30]**

QUESTION 5

- 5.1 Choose a description from COLUMN B that matches an item in COLUMN A. Write only the letter (A–F) next to the question number (5.1.1–5.1.5) in the ANSWER BOOK.

COLUMN A		COLUMN B	
5.1.1	Polygyny	A	an adult with children marries another adult with or without children
5.1.2	Skipped generation families	B	adults of the same sex marry
5.1.3	Natal family	C	marriage between two adults
5.1.4	Blended family	D	a man is married to more than one wife at the same time
5.1.5	Monogamy	E	grandparents are parents to grandchildren
		F	also known as your family of birth

(5 × 1)

(5)

- 5.2 State FIVE contributions (values) that having information on socio-economic status in the community can have on COPC. (5)

- 5.3 List FIVE life stages that the average person would experience in their life. (5)

- 5.4 Compare the sex differences between males and females in terms of reproductive health during puberty and adult life (exclude details about menopause). Copy and complete the table below in the ANSWER BOOK.

MALE		FEMALE	
1.		1.	
2.		2.	
3.		3.	
4.		4.	
5.		5.	

(5 × 2)

(10)

- 5.5 Discuss how social class can influence individual and family health in terms of nutrition. You may also refer to malnutrition and obesity. (5 × 1) (5)

[30]**TOTAL: 150**