Assessment Schedule - 2012

Health: Analyse an adolescent health issue (91235)

Evidence Statement

NOTE: The analysis is a single outcome. All assessment evidence presented by the candidate must be considered as an overall response. It is expected that the assessment evidence provided throughout the paper will demonstrate the candidate's knowledge of why the chosen topic is a health issue for adolescents. A candidate who cannot clearly identify the selected issue and provide relevant supporting examples throughout the paper is unlikely to achieve Merit or Excellence, as all examples / evidence used to illustrate or justify explanations must provide a valid and coherent picture of the issue, and incorporate the consequences, influences, and strategies. Holistic marking across the consequences, influences, and strategies questions should convincingly show that the candidate has an understanding of the personal, interpersonal, and societal aspects of the issue.

Question	Achievement	Achievement with Merit	Achievement with Excellence		
	Note: Where ONE of the personal, interpersonal, or societal areas is weak, a holistic judgement drawing on understandings of personal, interpersonal, and societal aspects demonstrated elsewhere in the paper might be used as part of an overall judgement.				
(a)	Consequences for well-being				
(i) and (ii) in combination	How the selected health issue impacts on well-being at a personal, interpersonal, AND / OR societal level is explained (these can include any combination of short- and / or long-term; positive and negative consequences, as relevant to the issue).	Impacts / consequences are explained for EACH of personal, interpersonal, AND societal well-being, AND have some connections to the stated influences (following).	Consequences are explained for EACH of personal, interpersonal, AND societal well-being, AND are clearly connected to the influences (following). Responses should also cover some of the more critical and insightful understanding of the		
	Note: The candidate does not need to refer to the dimensions of well-being specifically, but it must be evident in their response that the consequences will impact on a range of dimensions of well-being.		impacts / aspects of the issue (not just the superficial or obvious).		

(b)	Factors influencing the issue					
(i) and (ii) in combination	ONE EACH of personal, interpersonal, AND societal factors that could contribute to any of the consequences for adolescent well-being in (a) is identified and explained.	The explanation clearly shows how the influencing factors have contributed to consequences for well-being, in relation to the issue, through the use of some supporting	The explanation includes conceptually sound links between the influencing factors (including the understanding of the relevant determinant of health as a societal factor) AND the issue.			
	Responses MUST show a reasonable understanding of personal, interpersonal, and societal influences; indicate how these influences are operating at EACH level; and may include some relevant examples to illustrate or justify the explanation.	evidence / examples. The ways factors interrelate in (ii) may provide additional assessment evidence to support the explanation of the factors.	Relevant evidence / examples are used to critically support the explanation of the influencing factors, as well as to show how these combine to make this a health issue for adolescents.			
	The ways factors interrelate in (ii) may provide additional assessment evidence to support the explanation of the factors.					
	Overall, it is expected that an Achievement response can give some valid information for EACH of personal, interpersonal, and societal influences.					

(c)	Strategies for healthier outcomes		
(i) and (ii) in combination	ONE EACH of personal, interpersonal, and societal / community strategies that could address any of the influences in (b) and result in healthier outcomes, is identified and explained. A specific action is included in EACH strategy and why these actions would result in healthier outcomes is explained. These strategies should be consistent with the Health Education principles of health promotion and attitudes and values of the learning area (respect for self, others and society, and values of social justice). Strategies should be valid, feasible, and relate to the chosen issue. Strategies may include some that are quite superficial or obvious, or that only react to the consequences, and may be only loosely connected to the influence, or weak / low level responses. The ways the strategies combine in (ii) may provide additional assessment evidence to support the explanation of the strategies.	Strategies should include some more critical considerations (and not only the superficial or obvious strategies, or ones that react only to the consequences) AND have clear / obvious links back to the influencing factors. The ways the strategies combine in (ii) may provide additional assessment evidence to support the explanation of the strategies.	Overall, strategies show critical understanding of the underlying concepts as follows: • The strategies explained are the most critical and important ones that have very clear and obvious connection to the influences, for EACH of personal, interpersonal, and societal strategies (socioecological perspective (SEP)). • These strategies are not reactions to the consequences, but instead, get to the source of the influence on the health issue and clearly aim to produce healthier outcomes (hauora, attitudes and values (A&V), health promotion (HP)). The explanation of the ways the strategies combine in (ii) demonstrates higher-level thinking and reasonable understanding of the ways factors and strategies impact upon each other (SEP, HP), as well as how the strategies combine to promote healthier outcomes for adolescents, in relation to the selected issue.

Examples of evidence

Consequences for (impacts on) well-being that relate to the influence in context of the issue could include, eg:

Personal: Any immediate or short-term impact on physical health, mental and emotional well-being (what the adolescent personally thinks and feels), their sense of belonging and connection, a combination of ideas related to low self-concept or poor self-esteem, little self-worth, low confidence in self, not feeling liked, not feeling accepted as male or female; patterns of disordered eating or over-exercising; social withdrawal, OR longer term: entrenched beliefs about self and self-worth; long-term physical health effects relevant to the issue related to alcohol, infertility, body image; with a relevant example of evidence from (eg) a class survey, a story, or magazine article.

Interpersonal: Difficulty making and maintaining meaningful relationships, ongoing conflict, exclusion, (in)effective communication leading to conflict, tension, fighting; misuse of power resulting in bullying or pressuring, few meaningful friendships with peers (perhaps as a consequence of bullying or isolation); conflict with family members not understanding feelings or distress of the adolescent; with an example of evidence from stories about alcohol use, films or magazine articles where a character is experiencing negative body image, etc.

Societal: Increased social costs to society if many adolescents' lives are impacted by alcohol or sexually transmitted infections (STIs), implications for family cohesion across society, the way adolescents are viewed and treated by other community groups, increased pressure on health and other services meaning similar services for other sectors may suffer, loss of productivity, or opportunities, due to limited education, dominant societal attitudes assuming all adolescents have negative body image and that having a healthy body image is not normal; with an example of evidence of this type of message or attitude from (eg) a TV documentary or research article.

Factors influencing the issue could include, eg:

Personal: How an individual's beliefs and values, thoughts and feelings, sense of self-worth, lifestyle choices or behaviour, or knowledge and experience, influence adolescent health as related to the issue.

Interpersonal: How the expectations of other people influence adolescent health related to the issue, eg through pressuring or bullying, imposing their attitudes and values, modelling behaviours that help or hinder, how effectively others communicate their expectations of the adolescent.

Societal: How one of political, economic, or cultural attitudes, values or practices, influences adolescent health as related to the issue (other societal influences may be acceptable as long as they are clearly societal / wider community).

Strategies (as relevant to the influence and the issue) could include, eg:

Personal: Learning new knowledge and skills for managing the issue; questioning own values and beliefs (and) learning to think differently about the situation and change behaviours.

Interpersonal (many of these examples are variations of similar ideas to illustrate ways candidates may respond): effective communication to resolve conflict (inclusive of assertiveness, problem solving, etc); respectful communication that acknowledges the other person's situation (which includes no pressuring, exclusionary or hurtful actions); modelling expected behaviours for the adolescent, negotiation of limits or expected / acceptable behaviours; being assertive, giving constructive feedback and requesting behaviour changes of the adolescent.

Societal: [Advocacy] Political lobbying, writing to companies or the press, developing support networks to raise awareness and effect change, the provision of accessible, affordable, and age / culturally appropriate local community agencies and health facilities, or changes to policy, and requiring healthier practices to be adopted; school-based awareness support and action programmes related to the issue; social marketing campaigns that challenge attitudes, values, and behaviours, and suggest alternatives; community actions that model expected / acceptable behaviours.

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N1	N2	А3	A4	M5	М6	E7	E8
Sparse information; some topic-related material; some parts not attempted.	Brief answers that do not explain consequences, influences, and strategies; issue treated as a topic with no analysis, and with incorrect application of underlying concepts.	ONE aspect of the consequences, influences, OR strategies is weak (but not incorrect), and requires a holistic judgement across all evidence. The other aspects are at Achievement level.	Consequences, influences, AND strategies are EACH presented at Achievement level.	ONE aspect of the consequences, influences, OR strategies at Achievement level; the other aspects clearly at Merit level.	Consequences, influences, AND strategies are EACH presented at Merit level.	ONE aspect of the consequences, influences, OR strategies at Merit level; the other aspects clearly at Excellence level.	Consequences, influences, AND strategies are EACH presented at Excellence level.

N0 = No response; no relevant evidence.

Judgement Statement

	Not Achieved	Achievement	Achievement with Merit	Achievement with Excellence
Score range	0 – 2	3 – 4	5 – 6	7 – 8

Codes

SEP = Socioecological perspective

A&V = Attitudes and values
HP = Health promotion