



QUALIFY FOR THE FUTURE WORLD KIA NOHO TAKATŪ KI TŌ ĀMUA AO!

Level 3 Health 2022

91465 Evaluate models for health promotion

Credits: Five

RESOURCE BOOKLET

Refer to this booklet to answer the questions for Health 91465.

Check that this booklet has pages 2–5 in the correct order and that none of these pages is blank.

YOU MAY KEEP THIS BOOKLET AT THE END OF THE EXAMINATION.

RESOURCE A: Three models for health promotion

Behavioural change model

This is a preventative approach, which focuses on lifestyle behaviours that impact on health. It seeks to persuade individuals to adopt healthy lifestyle behaviours, to use preventive health services, and to take responsibility for their own health.

Self-empowerment model

This approach seeks to develop the individual's ability to control their own health status as far as possible within their own environment. This model focuses on enhancing an individual's sense of personal identity and self-worth, and on the development of 'life skills'.

Collective action model

This is a socioecological approach that takes account of the interrelationship that occurs between the individual and the environment.

It is based on the view that health is determined by factors that operate largely outside of the control of individuals.

This model encompasses ideas of community empowerment and commitment to improve the societal structures that have such a powerful influence on people's health status.

Source (adapted): *Models of Health Promotion*, The Curriculum in Action Series for the Ministry of Education, found online at http://health.tki.org.nz/Key-collections/Curriculum-in-action/Making-Meaning/Socio-ecological-perspective/Defining-health-promotion/Models-of-health-promotion

RESOURCE B: New Zealand's drowning problem: a snapshot

New Zealanders love the water. Each year, 3 million people visit beaches, 1.5 million go boating, over 1.1 million participate in swimming, and more than 630 000 go fishing. There are also over 20 million visits to public swimming pools.

On average, 103 people die by drowning in New Zealand waters each year, but up to 80 of these deaths, which are due to recreational water activity or accidental entry into water, are preventable.



Source (adapted): *New Zealand Water Safety Sector Strategy 2020*. https://cdn.fld.nz/uploads/sites/watersafety/files/PDFs/Official_Documents/Sector-Strategy-Published-Version-Aug-2015.pdf

RESOURCE C: World Drowning Prevention Day



for people aged 1-24 years

of the

Source: https://www.who.int/campaigns/world-drowning-prevention-day/2021

RESOURCE D: Supporting documents

The Bangkok Charter for Health Promotion

The Bangkok Charter builds upon the Ottawa Charter to guide health promotion in a globalised world. It is based on five main principles:

- Advocating for health, based on human rights and solidarity.
- Investing in sustainable policies, actions, and infrastructure to address the determinants of health.
- Building capacity for policy development, leadership, health-promotion practice, knowledge transfer and research, and health literacy.
- Regulating and legislating to enable equal opportunities for the well-being of all people.
- Partnering and building alliances with public, private, and non-governmental organisations, and civil society to create sustainable actions.

Te Tiriti o Waitangi / The Treaty of Waitangi and health promotion

The Treaty of Waitangi has been identified as the founding document of Aotearoa New Zealand, and as a key to health promotion in this country. Treaty principles and provisions that are of particular relevance to health include:

Partnership

Refers to ongoing relationships between the Crown (the government, or its agencies) and Māori.

Participation

Emphasises Māori involvement in all aspects of society within Aotearoa New Zealand. Within health promotion, this includes involvement of Māori stakeholders in the planning, delivery, and monitoring of programmes.

Active protection

Recognises that the Crown needs to be proactive in health promotion and the development of preventative strategies – for example, providing additional resources so that Māori are able to enjoy equitable health status with non-Māori.

Sources:

World Health Organization, The Ottawa Charter for Health Promotion, (1986).

Bangkok Charter for Health Promotion in a Globalized World, Prevention and Control, (2005).

Waa, A., Holibar, F., Spinola, C., & University of Auckland, *Programme evaluation: An introductory guide for health promotion*, Auckland: Alcohol & Public Health Research Unit. University of Auckland, (1998).