### Assessment Schedule – 2022

# Health: Evaluate models for health promotion (91465)

## **Assessment Criteria**

Achievement	Achievement with Merit	Achievement with Excellence					
The candidate evaluates models for health promotion.							
Evaluation involves considering the implications for people's well-being by:	In-depth evaluation involves considering the implications for people's well-being by:	Perceptive evaluation involves considering the implications for people's well-being by:					
<ul> <li>comparing and contrasting models for health promotion</li> <li>explaining advantages and disadvantages of models for health promotion</li> <li>drawing conclusions about the effectiveness of the models.</li> </ul>	<ul> <li>exploring links between models for health promotion and their use for improving well-being in a given situation(s)</li> <li>drawing reasoned conclusions about the effectiveness of the models.</li> </ul>	<ul> <li>showing insight about how the models for health promotion relate to the underlying health concepts (hauora, socioecological perspective, health promotion, and attitudes and values)</li> <li>drawing conclusions informed by the relationship of the models to these concepts.</li> </ul>					

N1	N2	А3	A4	M5	M6	E7	E8
Partial answer, but does not evaluate the models for health promotion.	Insufficient evidence to meet the requirements for Achievement.	The response is at Achievement level.  The evaluation generally meets the requirements for Achievement, but the	The response is at Achievement level.  The evaluation consistently meets the requirements for Achievement.	The response is at Merit level.  The in-depth evaluation meets the requirements for Merit, but one of the aspects of the answer	The response is at Merit level.  The in-depth evaluation consistently meets the requirements for Merit.	The response is at Excellence level.  The perceptive evaluation meets the requirements for Excellence. However,	The response is at Excellence level.  The perceptive evaluation meets the requirements for Excellence.
NØ = No response; no re	levant evidence.	quality may be inconsistent across the criteria.		may be inconsistent across the criteria.		some of the relationships to the underlying concepts may be inconsistent across the criteria.	

### **Cut Scores**

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

#### **Sample Evidence**

Possible evidence for discussion based on the effectiveness, including advantages and disadvantages, of water safety promotion campaigns trying to reduce the number of drownings in New Zealand:

#### **Behavioural Change Model**

Behavioural change provides information about the dangers of poor water safety to a wide audience. This could involve some television or radio advertising around water safety as part of World Drowning Prevention Day (Resource C). Another behavioural change strategy could be advertising World Drowning Prevention Day on the back of city buses. However, not all New Zealanders may identify that this applies to them, so may not take any action to change. Therefore, people's well-being in relation to safe water practices would not be improved.

#### Collective Action Model

Collective action is about getting the community to assess what will work for them to reach the goal of improving water safety for all within the community and then prioritising needs and creating an action plan. This could be in the form of an event at the local pool where groups raise awareness of the importance of water safety for all members of the community. It could be a community group fundraising through a gala event so anyone who wants to can access free swimming lessons. Community groups could approach local community members to offer water safety education in a range of different languages so those for whom English is a second language are able to receive accessible and easy education around water safety – specifically in relation to New Zealand water conditions. Community action groups could identify spots within the community that are risky, such as unfenced ponds or water areas, and lobby local government to provide adequate fencing and signage for these areas.

Possible evidence explaining aspects of the Treaty of Waitangi and the Bangkok Charter for Health Promotion that are present in the water safety promotions:

### **Treaty of Waitangi**

Including the Māori community as stakeholders improves the well-being of people within society, as Māori input is valued and important. This could include a partnership between the water safety council and iwi in relation to safely collecting kaimoana, or fishing. This links to the principle of participation, where communities are encouraged to develop networks representative of all sectors. This improves the well-being of all by ensuring the ideas of all people are encouraged and valued.

#### **Bangkok Charter**

Building capacity through creating sustainable actions, e.g. that volunteers from the community come in and take community swimming lessons. This means that those who have the knowledge are able to help those in need of water safety skills within the local community. This encourages the building of networks within the community and provides a raising of awareness for those who do not have the necessary skill set or the capacity to afford the expense of swimming lessons. This improves the social cohesiveness of the whole community.

Other responses possible.