



tūturu.

Supporting student-led action

Helping students promote
wellbeing through learning-
based activities

Acknowledgements

Publishing details

Tūturu 2022

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Acknowledgements

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Additional thanks to the Tūturu governance
group and Tūturu partner schools and
organisations for providing feedback on this
resource.

Design

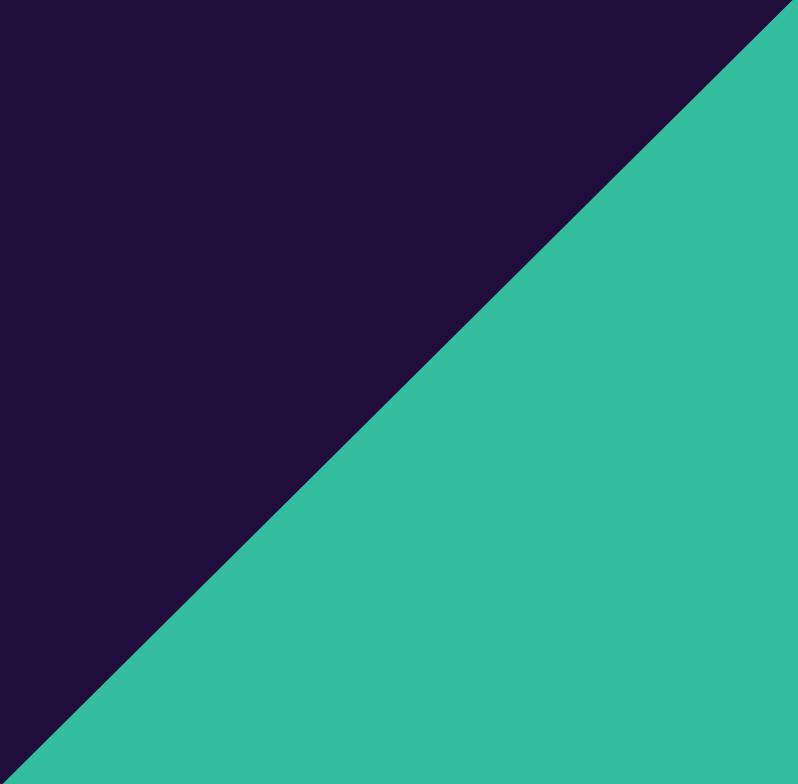
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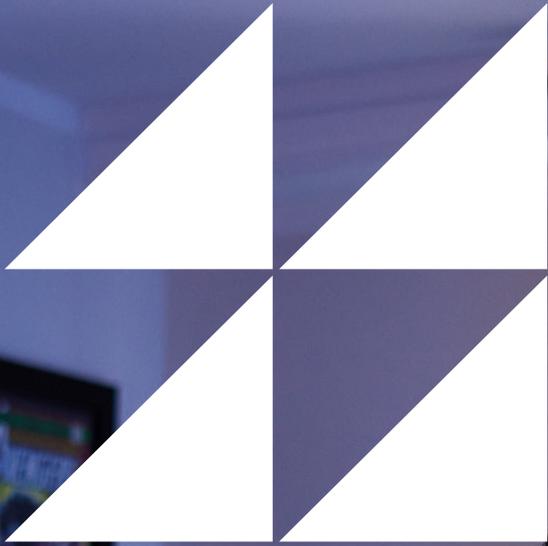
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Intro







Aims and purpose of this resource

The aim

This resource helps teachers integrate student inquiry and student-led action into their health learning programme.

The purpose

This resource is intended to build on and extend the scope of other Tūturu resources that:

- ▶ Support schools to design teaching and learning programmes focused on wellbeing, as framed by the New Zealand Curriculum.
- ▶ Engage in the biennial health education community consultation process.

The audience

The audience for this Tūturu resource is secondary school teachers and other school staff, as well as people working in the school and those who support them (e.g. School Based Health Services or health promoters), to deliver high quality teaching and learning programmes in schools. This resource includes learning activities for years 9 – 13.

Content overview

This resource is divided into two sections:

Part A

The background information to the resource provides discussion about the nature of student-led action in relation to:

- ▶ Curriculum teaching and learning about taking action to promote wellbeing in health education.
- ▶ Whole school approaches to the promotion of student wellbeing, and the role of students in this.
- ▶ How student-led action may be linked to the biennial health curriculum consultation process required under the Education and Training Act (2020 Section 91).

This includes consideration of what student-led action is – as well as what it is not – and why student-led action is a valuable context for learning.

Part B

A collection of teaching and learning activities that complement and add to those provided in other resourcing. These activities emphasise that student-led action needs to be an inquiry-based process that requires deliberate learning in order for students to take action in safe, ethical, purposeful and meaningful ways.

These activities consider the different opportunities presented in junior and senior secondary teaching and learning programmes with separate activities for years 9&10 and years 11-13.

Although the Tūturu project is widely known for the role it plays in Whole School Approaches (WSA) to alcohol and other drug education, the project, and this resource, is not limited to this wellbeing context.



tūturu.

A modern approach to student wellbeing

- ▶ Tūturu helps NZ schools to implement school-wide changes that improve the wellbeing of their students and develops their critical thinking.
- ▶ The first focus area of Tūturu is reducing alcohol and other drug-related harm in ways that promote student engagement and wellbeing.
- ▶ This is how we will prepare students to live healthy and successful lives in a world where alcohol and other drugs exist.

<https://www.tuturu.org.nz/>

The resource also complements the Ministry of Education (2022) Taking Action. This publication includes a detailed account of health promotion concepts and research applicable for schooling contexts as well as a range of activities for primary and secondary schools. A central aim of that resource is to develop students' capabilities to use the Action Competence Learning Process (ACLP) - a subject specific form of inquiry process for taking action, used in its entirety once students are learning in senior health education.

Context

Student-led action
in schools



What is 'student-led action'?

For this resource, 'student-led' means actions that students can decide upon (based on evidence of wellbeing need), plan, implement and evaluate by drawing on their own knowledge, skills, and available resources.

In this context, student-led actions still require adult guidance. This is because professional input is needed to identify the learning that needs to occur to enable students to engage in this process, and to ensure actions remain appropriate and ethical for school settings.

Adult supervision is also needed to ensure educational and other policies are adhered to.

Students undertake these actions collectively, although the collective can only work with the input of individuals taking responsibility for their role in the process.

Student-led action to promote student and/or school community wellbeing is either:

- ▶ Action being taken as an integral part of learning in the Health and Physical Education learning area of the New Zealand Curriculum; and/or
- ▶ Contributing to a whole school approach (WSA) to the promotion of (student) wellbeing.



A key purpose of student-led action is to contribute to the wellbeing of the (school) community – the action is for a greater or common good, and not just for the benefit of self or individuals.

The wellbeing matters or ‘issues’ students are taking action in response to will be varied, with differing levels of personal experience from students.

Student action groups that operate outside of formal curriculum teaching and learning ideally contribute to this whole school approach. For example, school hauora or wellbeing committees and diversity groups.

Student-led action shares some features in common with student activism, although a key difference tends to be in the type of planning and action process that is followed, and the knowledge concepts and theories that underpin this. See Student activism: learning through action (NZCER, 2022)¹.

¹ <https://www.nzcer.org.nz/research/student-activism-learning-through-action>

Why is it important?

Effective teacher pedagogy that responds to and supports positive outcomes for all students, with consideration of the diversity of students – diverse in terms of learning needs and diverse in relation to identities – draws on theories related to critical constructivism and transformational teaching. This positions the teacher more as a facilitator of learning which is not content driven, nor (only) teacher directed. It regularly engages students in inquiry-based approaches to learning requiring critical thinking, decision making and problem solving, as well as using reputable, high-quality information.

Essential features of this pedagogical approach include developing student:

- ▶ **Agency** such as when students they feel in control of things that happen around them and when they feel that they can influence events (TKI, 2016, Learner Agency²)
- ▶ **Self-efficacy** which is when students believe in their capabilities to achieve a goal or an outcome, and are prepared to take on challenges and difficult tasks, which results in them being more intrinsically motivated.
- ▶ **Empowerment** which is where students have the authority and agency to make decisions on their own and implement their actions at school.
- ▶ **Advocacy** skills (or role) which is where students can act or speak on behalf of other (students) they represent.



Such approaches also require power sharing which is where students participate in an activity in which the teacher enables the students to share authority and responsibility for the task at hand.

Overall, 'student-led' action is an enabling process. Students are learning the knowledge and skills needed for taking action as well as putting these into practice, learning more as they do so. They are also learning what their actions can achieve and that what they do actually matters, and that they can make a difference to the wellbeing of others.

An extended discussion on student agency can be found here³.

Being enabled to take student-led action develops students' sense of agency, self-efficacy and empowerment.

² <https://nzcurriculum.tki.org.nz/Curriculum-resources/NZC-Online-blog/Learner-agency>

³ https://core-ed.org/en_NZ/free-resources/ten-trends/2017-ten-trends/learner-agency/

What it is, and isn't

When young people are positioned as 'students', 'ākonga' or 'tauirā', and they are using school time and resources to promote wellbeing, a wide range of education policy applies. However, it is not the students that are expected to have knowledge of such policy – that's the work of adults in their professional capacity as leaders and teachers working in school settings.

With the pedagogical approaches (above) in mind, it is then useful to consider what student-led action does, and does not, involve.





WHAT STUDENT-LED ACTION IS/DOES INVOLVE:

A learning opportunity for all involved

Achievable as a student-led action

Supervised and monitored by designated adults in a professional support role

Ethical for students to lead

Framed within the vision, principles and values of the New Zealand Curriculum

Reflect all relevant education policy as well as other essential policy such as the Human Rights Act

Negotiated in partnership with school leadership or governance

Inclusive of diversity – sex, sexuality and gender, ethnicity and culture, ability, and other dispositions and identities

Informed by reliable evidence that identifies the nature of the wellbeing need

Follows a critical inquiry process in order to align the wellbeing need with the actions

Evaluated to check that the process was appropriate and to determine impact of the actions

Considers the implications of actions that balance individual rights versus the common good

Utilise a wide range of learned personal and interpersonal skills needed for taking action

Utilise advocacy approaches when direct action is not possible

See students as having agency and self-efficacy and who are agents and advocates for change

Seek the participation of all peers

Invite participation

Recognised as an important part of the school’s response to the promotion of student wellbeing

School and student led and ‘owned’

WHAT STUDENT-LED ACTION IS NOT/DOES NOT INVOLVE:

Just for those students ‘who need it’

Unrealistic in its aims and what can be achieved by students

A complete handover to students with no guidance, monitoring or supervision

Have expectations of students that requires them to have professional adult training and qualifications

Frame actions in values and principles not recognised or supported by education policy

Support actions by lobby groups who disagree with inclusive social policy

Expose or leave students vulnerable to power imbalances in relationships (e.g., with adults)

Perpetuate ‘isms’ and exclusion or discrimination of some groups (noting that groups who already hold exclusionary beliefs and values, and exhibit anti-social behaviours, cannot claim to be discriminated against because of their already discriminatory views and behaviours)

Based on a person’s or one group’s ‘good idea’ and what they think is important

Use only opinion and conjecture to inform decision making about actions to take

Ignorant or dismissive of reflection and evaluation processes

Prioritise actions for the benefit of one group at the expense of another

Assume participants already have the knowledge and skills needed for carrying out the action

Dismiss as ‘not possible’, or takes matters into their own hands, situations where people in roles of authority and responsibility need to be encouraged to act on behalf of others

See students as having no authority or efficacy to act for themselves and need actions done to or done for them by others who have power and control of the situation

Something the privileged or advantaged students do to or for the vulnerable, underprivileged or disadvantaged

Coercive or demanding

Ignored as a valuable learning experience

Driven by agencies and agendas external to the school

Our Code Our Standards

The pedagogical approaches associated with teaching and learning for student-led action, is a well-established expectation of New Zealand teachers, as documented in the Standards for the Teaching Profession⁴. In addition, the cultural competencies that feature in the *Ministry of Education Tātaiako: cultural competencies for teachers of Māori learners* and *Tapasā Cultural Competencies Framework for Teachers of Pacific Learners* further reinforce these pedagogical approaches.

⁴ <https://teachingcouncil.nz/assets/Files/Code-and-Standards/Our-Code-Our-Standards-Nga-Tikanga-Matatika-Nga-Paerewa.pdf>



Current support

A summary of factors supporting an understanding of student-led action in a curriculum context.

In this resource the focus is on student-led action developed as part of curriculum teaching and learning which means that the following factors must all be considered (noting this is not an exhaustive account of all education policy and strategy informing teaching practice in schools). These policy and strategy documents are summarised below.

- ▶ **The New Zealand Curriculum** Health and Physical Education Learning Area which gives direction to the design of the Health Education teaching and learning programmes for years 9-13.
- ▶ **Teacher pedagogy** which includes:
 - i. Compliance with Our Code, Our Standards | Ngā Tikanga Matatika, Ngā Paerewa which includes the Code of Professional Responsibility / Ngā Tikanga Matatika and Standards for the Teaching Profession / Ngā Paerewa.
 - ii. Additional pedagogical approaches that specifically consider cultural capabilities can be found in Tātaiako and Tapasā.
 - iii. Teaching as Inquiry (NZC) – a framework that involves four main components: Focusing inquiry – where teachers identify the outcomes they want their students to achieve; Teaching inquiry – where teachers select teaching strategies that will support their students to achieve identified outcomes; Teaching and learning - Putting strategies into action to achieve the intended outcomes; Learning inquiry - where teachers constantly monitor their students' progress towards the identified outcomes and reflect on what this tells the teacher.



- ▶ **Local Curriculum Design**⁵ which is responsive to the needs, identities, languages, cultures, interests, strengths, and aspirations of learners and their families, and have a clear focus on what supports the progress of all learners. A school's local curriculum needs to reflect the intentions of the New Zealand Curriculum (NZC). The NZC vision, principles, values, key competencies, and learning areas need to be expressed in your local curriculum in ways that build on the strengths and meet the aspirations of your learners and their families and whānau. (p5&8)
- ▶ **Biennial community consultation** about the delivery of the school's health education programme – led by the school's Board of Trustees to:
 - i. Inform the school community about the content of the health curriculum; and
 - ii. ascertain the wishes of the school community regarding the way in which the health curriculum should be implemented given the views, beliefs, and customs of the members of that community; and
 - iii. determine, in broad terms, the health education needs of the students at the school.

⁵ <https://nzcurriculum.tki.org.nz/Strengthening-local-curriculum/Leading-local-curriculum-guide-series>

The Scope

Student-led action to promote student (and school community) wellbeing is either:

- ▶ Contributing to a whole school approach (WSA) to the promotion of (student) wellbeing; and/or
- ▶ action being taken as an integral part of learning in the Health and Physical Education learning area or connected with another aspect of learning in the New Zealand Curriculum.



The difference between these approaches to taking action is in the detail or the purposes, processes and measurable outcomes.

CURRICULUM TEACHING AND LEARNING ABOUT TAKING ACTION

Purpose

Students are learning how to take action to promote wellbeing. Whether or not their actions are successful is not the measure of success. Instead, achievement is judged on what knowledge and skills they have learned about the process of taking action (needs assessment, goal setting, action planning, plan implementation, evaluation).

Process

Inquiry-based approach using the Action Competence Learning Process (ACLP) – a subject specific type of inquiry learning model.

See for example:

- ▶ Ministry of Education (2022) Taking Action.
- ▶ NCEA Achievement standards materials based on taking action and health promotion.

Success Measure

Success is measured as student learning outcomes for all students involved in the learning.

Being realistic the actions are within what students are able to manage themselves. The action may contribute something to a whole school approach, but the success of the students' contribution is still a learning outcome, not a wellbeing/behavioural outcome.

WHOLE SCHOOL APPROACH TO THE PROMOTION OF STUDENT WELLBEING

To improve a specific aspect of student wellbeing, based on identified need.

Inquiry based approach related to whole school review processes for which adults (BoT, leaders and teachers) have high level policy responsibilities and where students (ideally) are invited to participate in and lead aspects of some of these processes.

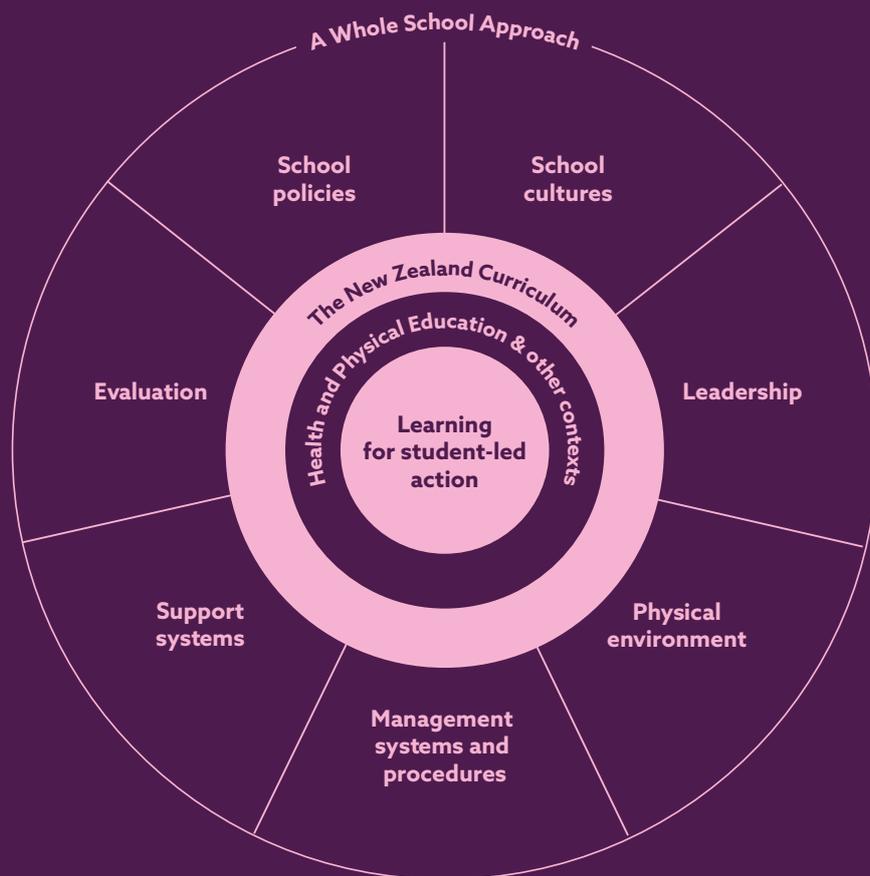
See for example:

- ▶ National Education Learning Priorities (NELP).
- ▶ Our Code Our Standards.

Success is measured in relation to specific wellbeing outcomes that are the focus for the action (or intervention).

Being realistic the actions are within what schools have the education mandate and resources to achieve which – as a matter of policy - focus on wellbeing (rather than 'health').

Whole school approach



A whole school approach (WSA) to the promotion of (student) wellbeing

Through the Ministry of Education policy guidelines⁶ in the Relationships and Sexuality Education Guide (2020) and the Mental Health Education Guide (2022) a whole school approach (WSA) has been framed as follows.

This model highlights how curriculum teaching and learning and the many actions that contribute to the promotion of student wellbeing need to interconnect and align across all of school policies, management systems and procedures, support systems school culture, leadership, the physical environment, and there needs to be ongoing evaluation of the effectiveness of all of these. Effective leadership is crucial to driving a whole school approach to the promotion of wellbeing.

Things to consider

What is realistic for students to contribute to and achieve when taking student-led action as part of a whole school approach to the promotion of student wellbeing?

The focus on student-led action is mainly for the promotion of wellbeing of other students, and in some context specific cases this may extend to the wider (school) community where appropriate support and resources exist.

Student-led actions as part of a WSA approach could contribute to:

- ▶ Awareness raising around topical wellbeing issues.
- ▶ Creating inclusive school environments (and reducing bullying and discrimination in relation to sexuality and gender, ability, ethnicity and culture, etc).
- ▶ Cybersafety.
- ▶ Period products.
- ▶ Stress management (reducing anxiety).
- ▶ Students against drunk (or drugged) driving.
- ▶ Enhanced access to support services in the school.

There is no expectation that students have any responsibility for promoting staff wellbeing, primarily because this is an employment issue and falls under the Employment Act. That said, any contribution of student-led action to staff wellbeing should be very carefully planned and the purposes (and limits) of the actions made clear (e.g., a school that wants to celebrate the contributions of its teachers).

Student-led actions could (or should) encourage teachers to contribute to actions that promote student wellbeing. The role of teachers for promoting student wellbeing is documented in Our Code Our Standards⁷ – the code of professional responsibility for teachers. Under Part 2. Commitment to learners it states that teachers 'will work in the best interests of learners by ... promoting the wellbeing of learners and protecting them from harm.

Previously, the National Administration Guidelines (NAG) 5 required each board of trustees is also required to: provide a safe physical and emotional environment for students; and comply in full with any legislation currently in force or that may be developed to ensure the safety of students and employees.

The NAGs and NEGs are to be replaced by the National Education Learning Priorities (NELP)⁸.

⁶ <https://hpe.tki.org.nz/>

⁷ <https://teachingcouncil.nz/assets/Files/Code-and-Standards/Our-Code-Our-Standards-Nga-Tikanga-Matatika-Nga-Paerewa.pdf>

⁸ <https://www.education.govt.nz/our-work/overall-strategies-and-policies/the-statement-of-national-education-and-learning-priorities-nelp-and-the-tertiary-education-strategy-tes/>

“From 1 January 2023, the new strategic planning and reporting framework will be introduced, and the NEG’s and the NAG’s will be removed. The new planning and reporting framework will require schools and kura to show how they’ve reflected the NELP in their three-year strategic plans.”

MINISTRY OF EDUCATION

Objective 1 Learners at the centre

Priority 1 Ensure places of learning are safe, inclusive and free from racism, discrimination and bullying

Actions for schools

- ▶ Ask learners/ākonga, whānau and staff about their experience of racism, discrimination and bullying, and use that information to reduce these behaviours.
- ▶ Have processes in place to promptly address and resolve any complaints or concerns about racism, discrimination and bullying.
- ▶ Create a safe and inclusive culture where diversity is valued and all learners/ākonga and staff, including those who identify as LGBTQIA+, are disabled, have learning support needs, are neurodiverse, or from diverse ethnic communities, feel they belong.

A curriculum-based activity

Taking critical action is a key feature of Health Education in The New Zealand Curriculum. Even if timeframes for whole school approaches don't align with student action, students' learning pathways and attainment of qualifications needs to proceed.

Taking action relates to the HPE underlying concept of health promotion⁹, as well as being shaped by the other underlying concepts - hauora (which presents wellbeing as a holistic concept), the socioecological perspective (which considers the complex interactions of the many social and environmental factors that impact wellbeing), and attitudes and values which focus on valuing self, and ways of relating to others that are respectful, fair and inclusive.¹⁰

Critical action requires critical thinking¹¹ and involves students in:

- ▶ Using their reasoning skills to analyse and understand wellbeing situations.
- ▶ Generating innovative solutions to wellbeing issues.
- ▶ Thinking and planning and strategically – i.e. their planning and actions respond to evidence that explains the nature of the situation and the wellbeing need.
- ▶ Using their reasoning skills to evaluate their actions.

Taking critical action is explained in detail through the Action Competence Learning Process (ACLP)¹² which is a HPE learning area specific inquiry learning process. Taking critical action in a curriculum context is fundamentally an inquiry-based process.

⁹ <https://hpe.tki.org.nz/health-and-physical-education-in-the-curriculum/underlying-concepts/health-promotion/>

¹⁰ <https://hpe.tki.org.nz/health-and-physical-education-in-the-curriculum/underlying-concepts/>

¹¹ <https://hpe.tki.org.nz/professional-learning-support/teaching-approaches/critical-thinking-and-critical-action/>

¹² <https://hpe.tki.org.nz/professional-learning-support/teaching-approaches/action-competence-learning-process/>



Pedagogical approach

Teaching as Inquiry as a pedagogical approach to teaching and learning in The New Zealand Curriculum.

How students contribute to decisions about the design of their health education learning programme AND making a case for student-led action as a teaching strategy to support student learning.

Considerations at individual teacher level

The practices that feature in a teaching as inquiry approach are embraced by teachers' professional standard and code of responsibility about curriculum delivery as outlined in Our Code Our Standards. See previous section¹³.

At an individual level, effective teachers are using teaching as inquiry processes all of the time. A teaching as inquiry approach occurs when they make in-the-moment decisions responding to the way students are learning in a lesson, through to longer term units and whole year programme planning that provides their students a learning pathway across the school year, and as they progress from year to year.

Teachers regularly and continuously gather data from this inquiry process, and this is used to inform what and how they teach (e.g. evidence of achievement from students' learning artefacts, and student voice collected in various ways). Along with the school's response to education policy expectations, this information from students helps to inform the draft delivery statement and health education programme design.

Overall, the teaching as inquiry approach offers teachers a more detailed, powerful, insightful, and responsive process to get feedback about individual student and class learning needs, than the broad sweep expectations of the biennial community consultation process.

¹³ <https://teachingcouncil.nz/assets/Files/Code-and-Standards/Our-Code-Our-Standards-Nga-Tikanga-Matatika-Nga-Paerewa.pdf>

¹⁴ <https://nzcurriculum.tki.org.nz/Teaching-as-inquiry>

FRAMEWORK FOR TEACHING AS INQUIRY CYCLE NZC P35¹⁴

Focusing inquiry

Teachers identify the outcomes they want their students to achieve. They consider how their students are doing in relation to those outcomes, and they ask what their students need to learn next in order to achieve them.

Teaching inquiry

Teachers select teaching strategies that will support their students to achieve identified outcomes. This involves asking questions about how well current strategies are working and whether others might be more successful.

Teaching and learning

Learning inquiry

Teachers monitor their students' progress towards the identified outcomes and reflect on what this tells them. Teachers use this new information to decide what to do next to ensure continued improvement in student achievement and in their own practice.

THIS NZC-DEVELOPED FRAMEWORK IS CYCLICAL AND INVOLVES FOUR MAIN COMPONENTS

Learning outcomes are based on curriculum expectations, hand in hand with where student learning is 'at' which is known to the teacher through the collection of a range of data – subject specific and other achievement data (e.g. literacy), as well as evidence of learning from learning artefacts and student voice, among other sources. This evidence is used to continuously adapt and modify the details of the learning programme to maximise learning outcomes for all students.

The selection of teaching strategies and how the learning programme will be delivered is based on evidence of teaching effective practice, the professional code and standards for teachers, and including cultural competencies.

Putting (new) strategies into action.

Further data collection provides evidence to monitor how well students are learning and this information continues to inform the delivery of the health education programme.

Considerations at a whole school level

Once the National Administration Guideline (NAGs) are replaced by the National Education Learning Priorities¹⁵ (NELP) in 2023, the following will apply for all schools and kura, and all school systems and reporting will need to reflect these priorities.

Objective 2: Barrier Free access

Priority 4. Ensure every learner/ākonga gains sound foundation skills, including language, literacy and numeracy

- ▶ Ensure all learners/ākonga have ongoing opportunities to develop key capabilities, including communication, problem solving, critical thinking and interpersonal skills.

¹⁵ <https://assets.education.govt.nz/public/Documents/NELP-2020-Schools-and-kura.pdf>

Community consultation

All teaching and learning that constitutes a school's health education programme needs to be considered in the biennial community consultation, required under Section 91 of the Education and Training Act (2020). Although this consultation is a board responsibility, and the main group to be consulted is parents of the students attending the school, there is the potential for student-led action to connect with this requirement of the Act.

Biennial community consultation about the school's health education programme is a requirement of all state and state integrated, primary and secondary schools. In secondary schools the consultation process is typically delegated to the specialist health education teacher(s). Students may contribute to this consultation process – but in monitored, supervised and specific ways.

See Tūturu resources, community consultation manual and video¹⁶.

The purpose of the consultation is only to achieve, in broad terms, agreement about the delivery and content of health education, with priority being given to the consultation of parents of students attending the school.

¹⁶ <https://www.tuturu.org.nz/healthconsultation/>

1. The board of a State school must, at least once every 2 years, after consulting the school community, adopt a statement on the delivery of the health curriculum.

- ▶ Community consultation is a Board of Trustees responsibility although they may delegate the tasks required for the consultation to staff with health education expertise.
- ▶ The consultation process, and the adopting of a statement on the delivery of the health curriculum, must be completed within a two year cycle – and then repeated. See part 4 for the requirements of the delivery statement.
- ▶ The outcome of the community consultation process is the adoption – by the BoT – of a statement on the delivery of the health curriculum.

2. The purpose of the consultation is to:

- a. inform the school community about the content of the health curriculum; and
- b. ascertain the wishes of the school community regarding the way in which the health curriculum should be implemented given the views, beliefs, and customs of the members of that community; and
- c. determine, in broad terms, the health education needs of the students at the school.

- ▶ The consultation process requires that the school community (see definition in (4) below) is firstly informed about the planned health education programme, across all levels of the school – both the content of the programme (as directed by the New Zealand Curriculum) and the delivery of it (as guided by a range of policy and evidence based practices related to effective teaching and learning).
- ▶ This requires the school to present relevant materials to parents/school community so that they can be informed, and then provide a way for parents /the school community to give feedback on these materials.
- ▶ Integral to this process of informing and receiving feedback are ways parents can broadly indicate their understanding of their children’s learning needs in health education.

The emphasis here is on health education learning needs for all students, not the assumed behaviour/clinical/medical needs of some young people.

3. The board may adopt any method of consultation that it thinks fit to best achieve the purpose, but it may not adopt a statement on the delivery of the health curriculum until it has:

- a. prepared the statement in draft; and
- b. given members of the school community an adequate opportunity to comment on the draft statement; and
- c. considered any comments received.

The way in which the school community is informed and then the way in which feedback is collected, is up to the school to decide. Methods that respond to the cultural diversity and nature of the community are strongly encouraged. This usually involves a combination of face to face events as well as digital communications and feedback surveys.

The outcome of the consultation process is the adoption – by the BoT – of the health education delivery statement and this comes at the culmination of the consultation events.

Note that the delivery statement has to firstly be prepared in draft before it can be consulted on. This requires expert teacher knowledge of the curriculum, learning progression and pathways (including NCEA), the wide range of education policy that underpins local curriculum design, and the many teaching practices required for

effective curriculum implementation, as well as an understanding of the current year level cohorts of students.

The requirement of consultation is only that the comments are considered. Schools cannot act on wishes of the community (2b) that contradict other Sections of the Act, the New Zealand Curriculum or Te Marautanga o Aotearoa or other education policy, nor the Human Rights Act.

4. In this section, school community means:

- a. for a State integrated school, the parents of students enrolled at the school, and the school's proprietors:
- b. for any other State school, the parents of students enrolled at the school:
- c. in every case, any other person who the board considers is part of the school community for the purpose of this section

Statement on the delivery of the health curriculum means a written statement of how the school intends to implement the health education components of the relevant national curriculum statements.

It is apparent from this clause that the main purpose of the Act is to consult with the parents of students at the school.

State integrated schools also need to include their proprietors, reflecting the special character of these schools. Beyond that it is up to the school to decide who their 'community' includes for the purpose of consultation.

That students are part of the school community is a given. However, consulting students is not the main purposes of this section of the Act. There are many ways teachers gather feedback from students about their health education learning, and this is done far more frequently than a biennial community consultation. Of itself, community consultation is not where the most valuable feedback from students, used to inform health education teaching and learning, comes from. See instead Our Code Our Standards and the teaching as inquiry approach in The New Zealand Curriculum.

A delivery statement needs to be understood by parents who are not teachers nor curriculum experts. Delivery statements do not tend to be long – just a few paragraphs and usually no longer than a page – and written in language(s) that can be understood by a broad audience. An overview of the health education programme is usually what can fit onto an A3 page. Parents can request to see more fully developed unit plans but there is no expectation this will, or needs to, happen.

Education and Training Act (2020) Section 91¹⁷

¹⁷ <https://www.legislation.govt.nz/act/public/2020/0038/latest/LMS171475.html>

Past Experience

Moving on from past community consultation practice

The health education community consultation requirement has been in existence since the 1980s. In the intervening years, since this section of the Act was developed, a lot of other education policy has changed which now must be factored into the consultation process – such as The New Zealand Curriculum statement, the National Education Learning Priorities, and the Teachers' Code of Professional Practice, to name a few.

As a cycle of activity, it is not expected that a delivery statement can or will start with a blank page ignoring all that has come before. It is an iterative process. Nor is it an open invitation for parents and community to decide (or dictate) what is taught in health education and how it is taught as the education policy environment has already made a lot of decisions about this for New Zealand schools. See for example the Relationships and Sexuality Education Guide (Ministry of Education, 2020) and the Mental Health Education Guide (Ministry of Education, 2022).

Also, it is not expected that parents, or students, will understand the curriculum statement and other education policy with the same depth as a professionally trained and registered practicing teacher. For genuine consultation, curriculum and education experts need to take the lead in the development of the delivery statement and the health education programme content (in broad terms) in order that education policy is adhered

to. Presenting an audience with open questions and a blank page about what they think should be taught in health education is disingenuous when education policy requires that many considerations must be met.

Data from whole school review processes

Schools collect a range of wellbeing-related data through school review processes related to improving student wellbeing. For example, results from aspects of the NZCER Wellbeing @ School tools¹⁸ This is typically different and distinct from the specific purposes and type of the feedback collected from the health education community consultation.

Information that relates to school wide systems for example, while useful for whole school review, is not part of the community consultation process about the health education programme as such - unless it happens to be asking parents (in particular) about the delivery and broad content of the health education learning programme.

¹⁸ <https://www.nzcer.org.nz/tests/wellbeingschool>



Student Engagement

Engaging students in the community consultation process

That students are part of the school community is a given.

'Consultation' of students themselves should be occurring in an ongoing way, and much more frequently and in far greater detail than the biennial community consultation cycle. This occurs primarily through the teaching as inquiry process carried out by every teacher. Teachers should be regularly gathering detailed class and year level-specific data (especially achievement data and student voice) to inform health education learning programme planning.

As a way to engage students meaningfully in the biennial health education community consultation process, students could be assigned responsibility for collecting feedback on the school's draft delivery statement and the health education course overview from:

- ▶ Specific groups of peers where data collected in class from the teaching as inquiry process may not surface key considerations specific to these groups, or where further data is needed to check on the extent of some matters e.g. information related to health education learning that has relevance for Rainbow groups, students with disabilities, or cultural/ethnicity groups – perhaps collected by students who are part of those communities themselves and where cultural protocols for gathering feedback can be observed.
- ▶ Whānau members (e.g. students' own families) with board or designated staff member guidance on what is needed for the consultation process, and what is to be consulted on.
- ▶ Other community members identified by the school with a vested interest in health education (this should be checked with school leadership and specialist staff to assure student safety and to address any ethical issues that students may be unaware of).

Student Safety



When students are surveying, interviewing, or running focus groups, especially with community members outside of the school, teachers and leaders at the school will need to be assured that any potential power imbalance in relationships that may exist, between the students as a young people, and adult members of the community are recognised and addressed. The potential for such situations needs to be recognised and action taken to mitigate this, in order that student(s) feel safe.

Carefully planning and monitoring is also required to ensure that students know what they will be asking when interviewing or surveying other people in the school community. They also need to know what is expected of them to ensure the collection of data is safe and ethical for everyone involved.

Activities

Curriculum teaching
and learning activities



The following activities use a curriculum teaching and learning approach to student-led action.

These same activities may be used as part of a whole school approach (WSA) to promoting student wellbeing.

This section contains:

- ▶ A framework of activities to develop students' capabilities for engagement in student-led action in years 9&10.
- ▶ Activities to support students' engagement in student-led action in years 11-13 with a focus on:
 - i. Activities that support students to ethically collect data, including feedback from community consultation.
 - ii. Activities that support students to use data to inform a student led action to promote wellbeing.

These activities supplement the Ministry of Education resource Ministry of Education (2022) Taking Action.

In a curriculum context, teaching and learning considerations that contribute to effective student-led action include knowledge of:

- ▶ A wide range of personal skills e.g. self-management skills related to managing stress, decision making, problem solving, positive self-talk, expressing feelings, etc.
- ▶ A wide range of interpersonal skills e.g. effective listening and communication, assertiveness, joint problem solving, compromise and negotiation, showing empathy, supporting others, etc.
- ▶ Advocacy skills e.g. being an upstander or to advocate by taking action on behalf of others, letter writing, etc.
- ▶ The contribution these skills make to whanaungatanga (~connectedness), manaakitanga (~the process of showing respect and care), and kotahitanga (~unity, togetherness).
- ▶ The Action Competence Learning Process (ACLP) - an inquiry process to ensure a well-reasoned and evidence-based foundation for the action, and that a logical, deliberate and purposeful, coherent process is taken as the action is planned, implemented and evaluated.



- ▶ Cognitive skills for critical thinking e.g. questioning, perspective taking, analysis, evaluation, reflection, and critical reading.
- ▶ A holistic understanding of health and wellbeing e.g. te whare tapa whā or other health or wellbeing model.
- ▶ Attitudes and values that show respect, care and concern for self, others and community, as well as values that are inclusive of diversity, and lead to people being treated fairly – and how this impacts wellbeing.
- ▶ An understanding of the interconnectedness of individuals (self), relationships with others and in context of community or wider society – and how this impacts wellbeing.
- ▶ (At the senior level) A basic understanding of models of health promotion or wellbeing promotion.
- ▶ Being able to recognise situations of unfairness and injustice.

In addition to the Ministry of Education Taking Action (2022), a range of resources exist to support the development of these skills and knowledge. For example:

- ▶ **Mental Health Education and Hauora: Teaching interpersonal skills, resilience and wellbeing**, Fitzpatrick, Wells, Tasker, Webber, & Riedel (2018) NZCER. Digital text¹⁹
- ▶ **Mental Health and Resilience**, Robertson (2021)²⁰
- ▶ **Alcohol and Other Drugs in the NZC Levels 4-8**, Robertson & Dixon (2021)²¹
- ▶ **Thinking critically about the marketing of energy drinks and/or vaping products**, Tūturu²²
- ▶ **Thinking critically about cannabis**²³

¹⁹ <https://healtheducation.org.nz/resources/mental-health-education/>

²⁰ <https://healtheducation.org.nz/resources/>

²¹ <https://healtheducation.org.nz/resources/>

²² <https://www.tuturu.org.nz/resource-hub/>

²³ <https://www.tuturu.org.nz/resource-hub/>



Activities for years 9&10

The opportunities for student-led action during time-constrained junior secondary health education programmes can be limited. There are added complications when there are several hundred junior students in a secondary school and the logistics of 'student-led' action become problematic.

Instead, the emphasis in this section is about students learning to recognise the value of student-led actions and building student capabilities so that their learning pathway from their year 9&10 programme leads them into designing and implementing student-led actions when and where the opportunity arises in senior school.

A great deal of student-led action requires the development of a range of interpersonal skills, activities for which can be found in health education resources. For example see Mental Health Education and Hauora: Teaching interpersonal skills, resilience and wellbeing. Fitzpatrick, Wells, Tasker, Webber, & Riedel (2018) NZCER.

Activity 1 Self-reflection – skills I have for taking action

Activity 2 Mapping out all of the ways the school (community) promotes student wellbeing

Activity 3 Taking personal action to contribute to student wellbeing at our school



ACTIVITY 1

Self- reflection

Overview

Being able to engage in student-led action requires students to have developed a wide range of personal and interpersonal skills. This activity asks students to reflect on their skills to identify how well they think they have developed them, and which they are yet to learn about and develop.

This is a structured activity that steps students through a succession of tasks, evidence from which can be used as a type of student voice to help inform subsequent lesson and unit planning.

NZC links

Learning intention After identifying their existing personal and interpersonal skills and which skills are yet to be learned and developed, students will show how a range of skills need to be used when responding to situations that impact their wellbeing. (Contributes to 5A1, A4, 5C3)

Key competencies Managing self, using language symbols and text

Resources required

- ▶ Copsheets – provided either in print or digitally.
- ▶ For examples of teaching and learning activities to develop understanding of the many skills listed in this activity, see *Mental health education and hauora: Teaching interpersonal skills, resilience and wellbeing* by Fitzpatrick, Wells, Tasker, Webber, and Reidel (NZCER, 2018). This resource was sent free to all schools and a digital copy can be downloaded from here²⁴.

Teaching and learning process

1. Explain to the students that they are going to carry out a type of audit of their existing personal and interpersonal skills – as they understand them. Check that they have a developing understanding of what is meant by ‘personal’ (things that are particular to me/self) and ‘interpersonal’ (all the things that happen between people as they interact and communicate).
2. Provide access to and explain how to fill out copysheet 1. Stress that it is fine if they say they have never heard of the skill or haven’t developed it as that is useful information for the teacher [you] to help plan other activities. Students are welcome to discuss their ideas to help recall what these skills are and when they might have learned about them. If they have other ideas about skills they could use, add these to the list.
3. Once completed, ask students to file this in a place where they can keep coming back to it and update periodically it as further skills are learned and developed.

4. Provide access to and explain how to fill out copysheet 2: (a) requires students to think of a recent situation from their own life where they had to use several skills together to manage the situation. These skills they document as a short (simple) cartoon with words and pictures. Recommend that activity (b) is completed as a paired activity. They need to choose a scenario (provided) or adapt the list to include other topical issues and events, but not one necessarily experienced by them, to mind map all of the skills needed to manage the situation. Provide opportunity for sharing some of these ideas – between pairs, groups, or with the whole class.

Learning journal entry or learning artefact to use as evidence of learning

File all of the materials produced from these tasks. Over time, encourage students to update their skills sheet as they learn about and develop new skills.

Teacher reflection

In addition to students reflecting on and ‘auditing’ their own skills, Copysheet 1 has been designed to be a form of student voice – evidence collected from students about what they have learned and what they are yet to learn.

Links with higher levels of the curriculum

This skills foundation is essential for senior student-led action. Across years 9&10 make the most of any activity in any context to develop these skills, drawing attention to what the skill is and why it is used in the stated context. Develop the idea that the action (of doing something) becomes a ‘strategy’ when we also focus on the reasons why and how the action is taken in a particular context.

²⁴ <https://healtheducation.org.nz/resources/>

1.1 Copysheet. Reflect on your personal and interpersonal skills to identify skills you already have, and those you are yet to learn about and develop.

SKILL	WELL DEVELOPED	SOMEWHAT DEVELOPED	NOT YET DEVELOPED	DON'T KNOW/ NOT SURE WHAT THIS SKILL IS
Personal / self-management knowledge and skills	Decision making (e.g. filling in a decision making grid)			
	(Own) Problem solving (e.g. completing in a problem solving model)			
	Using positive self-talk or rational thinking			
	Using stress management / relaxation techniques			
	Critical thinking - being able to			
	▶ ask questions to help understand a situation			
	▶ perspective taking - seeing a situation through someone else's eyes			
	▶ analyse, reflect and evaluate e.g. by, challenging situations of unfairness, challenging assumptions, or looking below the surface of a situation			
	Identify misinformation or fake news			
	Time management			
	Being organised			
Help seeking				
Other				
Interpersonal skills for communication and interacting with others (including online)	Effective listening e.g using paraphrasing, reflecting feelings, using minimal encouragers or non-verbal feedback, etc			
	Effective communication e.g. speaking in a way that meaning is understood by other people - expressing feelings, using I statements, etc			
	Being assertive			
	Communicate respectfully			
	Giving and receiving compliments			
	Giving and receiving constructive feedback			
	Showing empathy			
	Joint problem solving			
	Conflict resolution			
	Compromise and negotiation			
Others				
Advocacy skills	Being an upstander			
	Letter or report writing (to request a change)			
	Finding and using evidence to support a point of view			
	Others			

1.2 Copsheet. Reflect on your use of skills to identify how and why several skills need to be used in combination to manage a situation.

Skills in practice

(a) Think about the use of your skills in a situation you experienced recently – one where you had to use several skills in combination. Represent each of these skills in a comic strip graphic – use words and images. State what each of these skills added to the way you managed the situation.

1.	2.
3.	4.
5.	6.

(b) Select ONE of the scenarios below. Make a mind map (or use another form of graphic organiser) to map out all of the skills the young person in the scenario would need to use to manage their own wellbeing, as well as support the wellbeing of everyone else in the situation.

1. Being sent a hurtful or rude message online or by text by someone known to you.
2. Being caught between friends who were in conflict with each other.
3. Being pressured into doing something that you didn't entirely want to do e.g. go to a party (which you do want to do) and to bring alcohol to share (which you don't want to do).
4. Or choose a situation of your own based on recent events in your school community.





ACTIVITY 2

Promoting school wellbeing

Overview

Whether or not students identify school-based events, practices, processes, and procedures as types of actions to promote wellbeing will depend on how they have been framed and presented to the student body. This activity encourages students to consider how many school-based practices can be seen as forms of wellbeing promotion.

Initially working in groups students map out all the ways the school promotes student wellbeing. These ideas are combined to create a whole class graphic. Once completed, students conduct a type of class survey in the form of a 'speed-dating' activity to ascertain what the class think about how well the school is doing promoting the wellbeing of students, and what the school could do better.

NZC links

Learning intention Students will investigate ways their school promotes the wellbeing of students and evaluate how well they think their school is doing (5D2, 5D4)

Key competencies Relating to others, Participating and contributing

Resources required

- ▶ Digital or paper-based way to collect all students ideas (class map of support).
- ▶ Card to write questions on and a summary sheet (digital or paper-based) for recording brief answers (speed dating survey).

Teaching and learning process

1. Assign groups the task of brainstorming all of the ways they can think of that the school promotes student wellbeing. Use a digital app or a large sheet of paper to curate their ideas. Prompt students to think of the obvious and less obvious ways the school promotes wellbeing from having a counsellor and a nurse, awareness raising events or days as part of public or nationwide events, the provision of a diversity of cultural and sports activities, inclusive and safe school policies and practices, the school values, the ways of communicating and relating that are promoted as part of a whole school approach to showing respect ... and so on.

2. Organise all of these ideas into one document or format that all students can view. Review the ideas and add to these as additional connections are made with a diversity of school practices.
3. Explain to the students that they are now going to carry out a mini-survey of their peers – as a speed dating exercise. (1) All students will need to work in pairs. Each pair needs to select ONE of the main ideas off the class list to ask questions about – facilitate this to cover as many different ideas as possible across the class. (2) Students need to identify 2-3 main questions to ask their peers – try to have some similarity across these e.g. How useful do you think [selected idea] is for promoting student wellbeing at our school? Why do you say this? What do you think our school could do better in this area? (3) Each pair will need to prepare a simple recording sheet (digital or paper based) for their 3 questions – they will need space for each pair to be interviewed. (Divide the class roll by 4 as one pair will ‘interview’ the other in the speed dating round).
4. Organise the class so that the chairs/tables can accommodate 4 students – 2 pairs at each – and allow space to move between tables. Instruct the students how the speed dating will work. (1) At first 2 pairs will be seated at each table. Each pair will interview the other pair (one of the pair to ask the Q, the other to record answers). Allow time for one pair to complete their questions before the other pairs starts their questions – about 5 minutes. (2) Once both pairs have asked and had answered, their questions, one pair will leave the table and move to the next to repeat the process. Make sure the pair who remain at the table is the same each time.
5. Once the speed dating round is complete, each pair needs to summarise and analyse the data they collected. As far as possible, count up yes/no/sort of/unsure answers. For anything that has been described, look for the more common responses, and the more interesting and insightful ideas (even if these were less common). Provide opportunity to share these summaries with the class.
6. **Debrief** Ask what the students found most surprising or interesting from the data collected? Why was this? What action does the class think they could contribute to in the near future – as a class and/or as individuals as they go about the school or engage in school life? Is there anything particularly concerning that students think should be passed on to school leadership for their consideration? If so what and how will they go about doing this? Signal potential development of many of these ideas in future lessons.

Learning journal entry or learning artefact to use as evidence of learning

Students include a link to the class summary in their learning journal, and a copy of their own data collection.

Teacher reflection

What did this activity reveal about students’ perceptions of the way their school promotes student wellbeing? What will be useful to develop in subsequent lessons/units? Did any of the students ideas identify issues that need to be followed up on with someone in leadership? If so, who is the key person to approach?

Links with higher levels of the curriculum

Having knowledge of the way schools function and are organised, beyond the immediacy and familiarity of the classroom, is vital for future student-led action. So too is ethical data collection from peers to help explore the details of these situations where action to promote wellbeing is warranted. These early developments of such knowledge and skills provide an ever-growing foundation upon which ideas and understanding of processes for taking action can continue to be built.



ACTIVITY 3

Personal Action

Overview

As noted in the overview to this section, having hundreds of junior students all engaging in 'student-led' actions of their own design around the school (community) can present logistical issues. Rather than groups of students each coming up with their own action, what is likely more manageable is that students develop a goal and actions to contribute to a school (or community) action for which all students have responsibility. In essence this activity engages students in a personal action – but one where the action contributes to a greater or common good, rather than focus on an action only for their own wellbeing.

This activity may build on ideas that emerged out of Activities 1&2 where students reflected on personal and interpersonal skills for taking action. That is the skills they already have, and are yet to learn in Activity 1, and where they mapped out the ways their school promoted student wellbeing, and where they thought their school could do better in Activity 2. In this case, students could be contributing to a range of school contexts where student wellbeing is promoted.

An alternative approach to this could be as a result of parent feedback from community consultation e.g. 'parents and whānau endorsed the schools approach to education about vaping or cybersafety or (etc)' or 'parents and whanau recommended strengthening the focus on [a topic e.g. vaping].' This would require all students to focus on the same context. After a series of activities to think critically about [the topic] the students decide upon and undertake a personal goal to make a positive contribution to school policy around use of substances at school [or other topic]. In the context of vaping for example these goals include being assertive when someone is vaping, seeking reliable information about vaping, finding out about how to report vape shops selling to people underage, etc.



Similarly, if the learning was able to coincide with activities and events framed within a whole school approach to the promotion of student wellbeing, this too could require all students to focus on the same context.

Overall, this approach may not fully satisfy a sense of being 'student-led.' Instead it aims to develop knowledge of skills and processes to be able to do this with some autonomy, at subsequent levels of learning.

This activity takes a pared back approach to focus only on the basics of the taking action process. Steps can be added, deleted or amended in response to student learning needs. If required, detailed activities for taking action exist in a range of health education resources. If students are yet to learn about goal setting and action planning, an extended series of activities to develop knowledge of the process can be found in *Alcohol and Other Drugs in the NZC Levels 4-8, Robertson & Dixon (2021)*²⁵

²⁵ <https://healtheducation.org.nz/resources/>

NZC links

Learning intention Students will plan and implement a personal action that contributes to the wellbeing of all students at the school. (5C3 and other achievement objectives depending on context selected)

Key competencies Managing self, Relating to others

Resources required

Template for documenting taking action process. Copysheet 3 provides an example, or use school's own templates in preparation for future levels of learning.

Teaching and learning process

1. Explain to the students they are going to each develop an action they can take to promote student wellbeing at school. The action is not (just) about their own wellbeing but potentially for any and all students. Engage students in a general discussion about the reasons why we all have to take responsibility for our actions and consider the needs of others – drawing on prior learning as much as possible.
2. Explain the approach the class will take - either own choice of context (related to activity 2) or that they are contributing to a context already decided – and if so, making clear why this decision was made.
3. Provide access to Copysheet 3 or provide own action planning template to document the process.
4. Step students through the process to decide and plan the action they will take, and how they need to record their process and progress.
5. Allow a designated time for the action to be implemented – 1-2 weeks is suggested.
6. Complete the evaluation section of the action plan.
7. Provide opportunity to share some realisations about the issue/situation that was the focus for the action, surprises and disappointments, and ideas for next steps.

Learning journal entry or learning artefact to use as evidence of learning

Students keep a record of the process they engage in as they decide, plan, implement and evaluate their action.

Teacher reflection

How readily did students respond to the idea that taking action is an inquiry process? How well were they able to maintain focus and follow through with their planned action? What are the implications of this for future student-led action? What other knowledge and skills will students need to (continue to) develop and learn in order that student-led action is meaningful and effective?

Links with higher levels of the curriculum

As presented this activity could provide a framework for AS90971 (Health 1.1) Take action to enhance an aspect of personal well-being, although further details of the process will need to be added, and also serve as foundation learning leading to AS91237 (Health 2.3) Take action to enhance an aspect of people's well-being within the school or wider community.

3.1 Copsheet. My plan for taking action that contributes to the wellbeing of others in my school or community. Complete the planning template below.

THE WELLBEING SITUATION MY ACTION WILL FOCUS ON:

SKILL

MY ACTION PLAN

Understanding

The wellbeing situation my action will focus on

Why or how does this situation affect student wellbeing?
How do I (or we) know this (above) - what evidence do we have?

Does this situation directly affect your wellbeing, and/ or is it something that impacts other students? Explain.

Vision

What needs to change in this situation to enhance student wellbeing? Think about what the situation will look or sound like if these changes or improvements were made.

Actions

What can I do to contribute to this change or improvement? Describe this like a step-by-step plan with 3-5 steps.

Two or three skills I will need to use as I implement my action.

One skill I will need to develop (or learn to use) as I implement my action.

How I will develop this skill (or how I will learn to use it).

Timing

When will I carry out these steps?

Recording

Briefly describe the situation when you took action. Think about what you did, the impact it had on other people at the time, if you thought your actions 'worked' (and why), and any other thoughts and feelings you had about the situation.

Evaluation

Overall, do you think your actions were effective in contributing to the wellbeing of students at your school? How well do you think you implemented your actions? What effect did your actions have on others? How do you know this?

Next steps

What else do you think needs to be done to promote student wellbeing in this situation? What action do you think you can take to contribute to this?



Activities for years 11&13

At senior secondary level, students are able to gain NCEA credits for learning associated with taking action to promote wellbeing. Activities to support students' engagement in student-led action leading to NCEA assessment in years 11-13 (NZC levels 6-8) are:

- ▶ **AS90971 (Health 1.1)** Take action to enhance an aspect of personal well-being (Internal assessment).
- ▶ **AS91237 (Health 2.3)** Take action to enhance an aspect of people's well-being within the school or wider community (Internal assessment).
- ▶ **AS91465 (Health 3.5)** Evaluate models for health promotion (External assessment).

A range of resourcing exists to support these standards. For internal assessments²⁶ and for external assessments²⁷.

Note that the review of standards will mean these Achievement Standards numbers and titles will be replaced – Level 1 in 2024, Level 2 in 2025 and Level 3 in 2026. It is anticipated similar standards will be developed but with changes that reflect the broader principles of the NCEA change programme²⁸.

The activities in this section supplement those found in other resources that use the Action Competence Learning Process (ACLP) which is a HPE learning area specific inquiry learning process²⁹.

As discussed in the introductory section on student-led action, the opportunities for this tend to be greater at senior secondary level, once students have developed a range of skills and knowledge to support taking action, as well as the greater autonomy and independence of learning generally experienced by senior students.

The activities in this section aim to complement and extend similar activities provided in other resources.

Unit plan Applying the Action Competence Learning process to a student-led action related to alcohol or other drugs

Activity 4 Collecting data and feedback ethically

Activity 5 The importance of using evidence to inform actions

Activity 6 Using feedback from community consultation to inform student-led action

Activity 7 Evaluating student-led action

²⁶ <https://ncea.tki.org.nz/Resources-for-Internally-Assessed-Achievement-Standards/Health-and-physical-education/Health-education>

²⁷ <https://www.nzqa.govt.nz/ncea/subjects/health/levels/>

²⁸ <https://ncea.education.govt.nz/>

²⁹ <https://hpe.tki.org.nz/professional-learning-support/teaching-approaches/action-competence-learning-process/>



UNIT PLAN

Applying the ACLP

Overview

Taking effective action to promote wellbeing is challenging. Many models and principles of health promotion have been developed since the mid-20th century, the details of which fill health promotion texts. Health education in the New Zealand Curriculum acknowledges a range of these models but gives most support to ecological models because the multi-layered and multi-faceted nature of these is highly consistent with the underlying concepts of the HPE learning area. An understanding of ecological models also includes indigenous models of health promotion.

In education settings, inquiry learning is a popular learning strategy because it enables students to investigate topics that are relevant and meaningful for them.

This unit plan uses the Action Competence Learning Process (ACLP) to map out a process for taking action to promote wellbeing in relation to alcohol or other drugs. It offers a scaffolded approach to student-led action to ensure that the process is primarily a learning approach, where deliberate acts of teaching can be included to support and inform student-led action, and to ensure that the 'messaging' inherent in the inquiry is consistent with curriculum values and practices.

A range of teaching and learning resources, along with assessment materials are available to support the details of this plan.



NZC links

Overall learning intention Students will apply the ACLP to an alcohol or other drug context. (Draws learning from across Strands A, C and D).

Key competencies Thinking critically/creatively, Managing self, Using language, symbols and text, Relating to others, Participating and contributing.

Student safety matters: Selecting the focus or the context for learning and taking action

Schools may wish to focus learning around a named substance or behaviour that is a local and topical wellbeing concern for students e.g. alcohol or behaviours like vaping. However, to take action around named substances in ways that are safe and ethical for students, may be quite limiting, especially around controlled substances with significant legal implications.

An alternative approach, as modelled in the unit plan following, is to shift the focus away from named substances, (although substances will still be named to give context to the learning) to situations related to substance use that have self-evident connections with the type of action it is reasonable and ethical for students to take. For example, thinking critically about substance use in the community leading to a social marketing campaign that causes people to question and challenge the behaviour of self and/or others;

responding to social pressures about substance use leading to the development of a website for students at the school featuring ways to respond to pressure; knowledge of ways to reduce harms from substance use through an awareness raising programme for all students at the school, delivered through health classes and year level assemblies.

With this approach it is also possible to engage with a reputable public NGO or health promotion agency with expertise in the area of alcohol and other drugs e.g. Tūturu, Kaitiaki o Ara (formerly SADD), or a current health promotion campaign related to the topic. This may provide additional scope for extending the student-led action with a curriculum teaching and learning focus, into the whole school space.

Note that AoD = alcohol and other drugs, and refers to a range of substances. Specific substances are named where relevant to do so. A range of activities to support this unit plan can be found in *Alcohol and Other Drugs in the NZC Levels 4-8, Robertson & Dixon (2021)*³⁰.

³⁰ <https://healtheducation.org.nz/resources/>

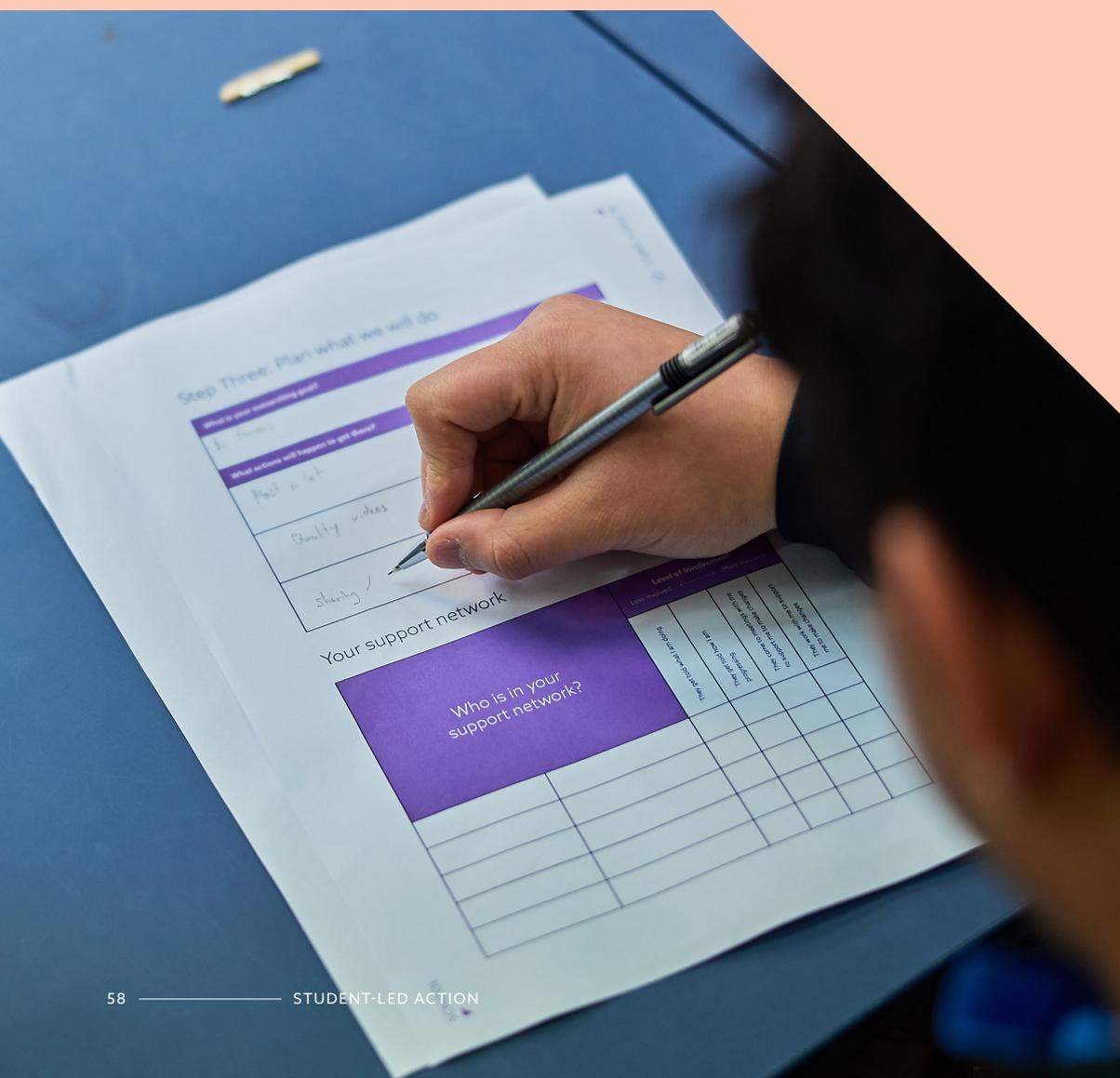
Action Competence Learning Process

Overview

The Action Competence Learning Process (ACLP) is an inquiry learning framework. A diagrammatic representation of the ACLP is available³¹.

³¹ <https://hpe.tki.org.nz/professional-learning-support/teaching-approaches/action-competence-learning-process/>

³² <https://www.youth19.ac.nz/publications/2020/8/12/youth19-rangatahi-smart-survey-initial-findings-substance-use>



Identifying a wellbeing issue

Consider personal, school, community, and societal wellbeing issues.

Developing knowledge and critical insight of the wellbeing issue (critical thinking)

- ▶ How did the wellbeing issue arise? Give consideration to the social determinants of health and the evidence that shows the history of the situation.
- ▶ What is the importance of the issue for people's wellbeing, now and in the future?
- ▶ How are conditions different in other classes, schools, cultures, communities, or societies?
- ▶ Who benefits and who is disadvantaged by the current situation? Why and how? What's the evidence for this?
- ▶ What knowledges have contributed to these insights?
- ▶ How have we assured the use of reliable and reputable evidence to inform our knowledge about the issue?

Defining 'the issue'

Through brainstorm, discussion and an analysis of recent news items about AoD matters and young people in NZ, students identify a range of 'issues' (situations that are 'cause for concern') about AoD.

Consider why or how AoD use by young people is an issue for individuals (ie a personal issue), an issue for people's relationships (family, friends, work or school peers), schools, and for all of 'society'.

Safety considerations *Discuss with students that this learning is not to reinforce stereotypes or stigma that may be associated with substance use, nor to blame individuals whose health and wellbeing may be impacted by substance use. Instead, it is to better understand the wider societal factors that influence AoD use in the first place, and how reducing harms from substance use is a societal issue.*

Understanding AoD issue

1. Engage students in a succession of activities using a diversity of materials to develop understanding of the knowledge and critical insight questions. The following questions expand this list to make use of available evidence about young people's substance use:
 - i. To what extent is substance use a health issue and a wellbeing issue for young people in New Zealand?
 - ii. How are other people impacted by young people's substance use? What is the impact of young people's substance use on New Zealand society?
 - iii. How is the health and wellbeing of young people in New Zealand's indigenous population (and or other ethnic groups) impacted by substance use?
 - iv. How does this evidence help to clarify, or shift the focus of the 'cause for concern' ideas generated from the identifying the wellbeing issue about AoD use previously?

Main information source Youth19 report³²

2. Using ideas generated by students, plus teacher addition of ideas they may not have thought of, assign small groups a mini-investigation to find out about one aspect of AoD use by young people. Examples of investigation questions follow.

These ideas are deliberately broader than the focus for the student-led action that this learning is leading to. This is in order to develop critical insight into how AoD related matters impact young people, often in complex and challenging ways. Only some of these ideas will feature when taking action because some of them won't be accessible or achievable (or ethical) for student-led action.

- i. What factors influence substance use and non-use by young people in New Zealand? Groups select one substance as the focus for their investigation e.g. alcohol, cannabis, party-drugs. Give most focus to those societal factors that impact group and individual substance use behaviours e.g. social norms or 'cultural' attitudes and values, laws and policies, economic factors, wider social factors like in/exclusion and social cohesion, access to health services and education, media and advertising, etc.
- ii. In what ways is [named] substance use an issue for our school and local community?
- iii. How is substance use understood in relation to indigenous (or other ethnic group) knowledge?
- iv. What is the history of substance use (e.g. alcohol) in New Zealand and how has this impacted health and wellbeing over time?
- v. What are students at our school taught about AoD in years 7&8 and then at secondary school in years 9-10?
- vi. Add other ideas emerging from discussion and information sources.

Information sources (examples only, an internet search will provide more sources):

- ▶ **NZ Drug Foundation** - see for example the regular publication "Matters of Substance"³³.
- ▶ **Alcohol.org** website³⁴
- ▶ **Vaping the Facts**³⁵
- ▶ **Māori & Alcohol: A History**. Marten Hutt, (1999) [book]
- ▶ **Māori smoking, alcohol and drugs - tūpeka, waipiro me te tarukino**. Megan Cook (2013), Te Ara - the Encyclopedia of New Zealand³⁶
- ▶ **Ministry of Health drug policy**³⁷

³³ <https://www.drugfoundation.org.nz/matters-of-substance/>

³⁴ <https://www.alcohol.org.nz/>

³⁵ <https://vapingfacts.health.nz/>

³⁶ <http://www.TeAra.govt.nz/en/maori-smoking-alcohol-and-drugs-tupeka-waipiro-me-te-tarukino>

³⁷ <https://www.health.govt.nz/our-work/mental-health-and-addiction/addiction/alcohol-and-other-drug-policy>

Overall, use the ACLP critical insight questions to guide the investigation. Investigation task:

- ▶ In groups, students identify 3-5 sub-questions to be answered by their investigation.
- ▶ In situations where information needs to be sourced, identify reputable sources for finding answers to these questions.
- ▶ If data and information needs to come from students' own collection of evidence, what sort of analysis or survey could be carried out at school/in the local community? [This may lead into the next step of the ACLP.]

Provide opportunity for students to prepare a brief presentation of their findings, and then share and present their learning artefacts produced from their investigation to the class, and if appropriate with the student body or school community. Combine all investigations into a single document for ongoing use.

Developing a strategic vision about what needs to change (Strategic thinking).

- ▶ What does the evidence indicate about the factors that need to change to improve people's wellbeing?
- ▶ What alternatives are there to the wellbeing situation that currently exist?
- ▶ What needs to change to ensure equity and social justice?

Collecting evidence through a school wide survey to develop a strategic vision. Refer to Activity 4 for details on conducting a school survey.

Note that this step of the ACLP will need to go hand in hand with the next step – without data it's difficult to think strategically about what needs to be done, and without a sense of what is strategic it is difficult to know what actions might be needed or possible.

Designing the survey

Using all of the ideas generated from the unit so far, students collaborate to design a school survey to find out more from the wider student body about wellbeing and substance use.

- ▶ The questions need to help identify specifically the action(s) that can be ethically and reasonably taken by students to promote student wellbeing in relation to AoD matters.

As a guide, avoid questions about students' own substance use behaviours (unless this is supported and approved by school leadership in which case the survey needs to be carefully planned and monitored with adult input). Focus questions on students' awareness, knowledge and insight of AoD issues, their attitudes and beliefs, views and opinions about AoD matters, what they think or feel about AoD-related situations in their school community, the extent to which they think it is an issue, what they think can be done to support student wellbeing, etc. Direct students towards questions that will lead to the collection of evidence that will inform a plan of safe and ethical actions.

Understanding what actions are possible. (Gathering, analysing and evaluating evidence and ideas.)

- ▶ What changes within ourselves, our classroom, school, community, and/or society are needed to help us realise our vision?
- ▶ What are the possibilities for action to achieve these changes?

Planning to take action

- ▶ What is our wellbeing goal?
- ▶ How do we know we have decided a SMART goal?
- ▶ What action(s) will we initiate and implement?
- ▶ What do our actions aim to achieve?
- ▶ How are our actions aligned with our goal(s)?
- ▶ What are the barriers and enablers in relation to taking action or making a change? How can we best utilise the enablers, and reduce or mitigate the barriers?

Building on the evidence from the survey

Ideas for actions may come from a current AoD campaign or documentary sources.

- ▶ What ideas from the campaign/documentary do you think our school could use? What other ideas for similar or new actions do you have? Why these actions?
- ▶ How will these actions respond to the evidence we have collected? How are we sure that our actions align with our evidence?

Students are supported to

- ▶ Develop a SMART goal(s).
- ▶ Develop an action plan that responds to and aligns with this goal.

Check

- ▶ What is actually 'doable'? What can we achieve given the personnel, time, and resources we have?
- ▶ Are we certain that actions are safe and ethical? How do we know this?
- ▶ How are we thinking about sustainability of those actions that need to keep on happening?

Then

- ▶ Identify barriers to success and how to mitigate these.
- ▶ Identify enablers – people and resources that will help implement the plan.
- ▶ How the implementation of the plan will be monitored – checking that everything is occurring as planned, that everything is on time, no new barriers have been encountered, etc.
- ▶ How the success of the implementation of the plan and the achievement of the goal(s) will be measured – what will success look like? Develop an evaluation plan to ensure suitable data is collected e.g. follow up survey, number of products distributed, informal feedback to a postbox or digital platform, etc. Keep evaluation data collection timely, and closely aligned with the actions taken.



Taking action

- ▶ Individually and collectively as well as ethically, respectfully, and responsibly to implement planned actions.
- ▶ Using a wide range of personal self-management skills, interpersonal communication and support skills, collective action and advocacy skills.

Reflecting and evaluating

- ▶ How effective were our actions? Was our goal achieved? What does evidence show has been the impact of our actions on people's wellbeing?
- ▶ How effective was the process of implementing our actions, based on participant feedback and our observations and reflections?
- ▶ What has been learned?
- ▶ What still needs to be achieved? What could we do better or differently?
- ▶ What are our next steps?

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- ▶ Monitor the implementation of the plan.
 - ▶ Collect evidence that the actions are well received and they are having an impact.

Analyse and interpret evaluation data (much like the survey data)

- ▶ As a class, discuss and respond to the reflecting and evaluating questions.
- ▶ (If included) Which of the broader investigations from the 'understanding AoD issue' part of the ACLP process warrant further investigation and consideration for future actions? Why these?
- ▶ Make a plan for next steps (and start the cycle again).



Activity 4

Collecting data and feedback ethically

Overview

Like all critical action to promote wellbeing, student-led actions need to be premised on good quality evidence of wellbeing need, and what it is that needs to change in order for people's wellbeing to be 'promoted' or improved.

Throughout their schooling students are introduced to a range of ways data can be collected. The learning emphasis at school level is more about the practices and methods for collecting data, not so much the theoretical underpinnings of research methodology befitting university level study.

Examples of ways students can collect data include survey (making use of contemporary digital applications to do this quickly and efficiently), interview or focus groups, or less formal processes that make use of community gatherings (and in community settings) to gather feedback. Inclusion of kaupapa Māori approaches to wānanga or Pacific practices associated with talanoa are encouraged, where appropriate to do so.

An activity for designing a survey is included in the resource Ministry of Education (2022) Taking Action.

The school's biennial community consultation about the health education programme offers opportunity for students to practice data collection methods, and has the potential for providing data that students may be able to use as a source of ideas for informing student-led action. An optional section in this activity considers how students might be involved in the collection of feedback from parents, and other members of the school community, about the school's draft delivery statement and the broad intentions of the health education programme.

The nature and extent of this involvement will need to be negotiated with the board and school leadership in order to ensure that legislative requirements of Section 91 of the Education and Training Act (2020) are met. For example, students could collect feedback about the school's draft delivery statement and the broad intentions of the health education programme (with board or designated staff member guidance on what is needed for the consultation process, and what is to be consulted on) from:

- ▶ Specific groups of peers where data collected in class by teachers may not surface key considerations specific to these groups, or where further data is needed to check on the extent of some matters e.g. information related to health education learning that has relevance for rainbow groups, students with disabilities, or cultural/ethnicity groups – perhaps collected by students who are part of those communities themselves and where cultural protocols for gathering feedback can be observed.
- ▶ Whānau members (e.g. students' own families).
- ▶ Other community members identified by the school with a vested interest in health education.

Note that this collection of data by students is not of itself student-led action suitable for assessment with AS91237 (Health 2.3) Take action to enhance an aspect of people's well-being within the school or wider community. As best it may generate some data that can be used to inform a student-led action to promote student wellbeing – see Activity 6.

NZC links

Learning intention Students will develop understanding of safe and ethical ways to collect wellbeing-related data from peers (and school community members) and to analyse data to use as evidence (to inform actions). (7&8A1)

Key competencies Using language, symbols and text, Relating to others, Participating and contributing.

Resources required

- ▶ Access to a digital application for carrying out a survey.
- ▶ Access to other data recording applications such as Excel.

References

- ▶ **Wānanga (Kia Eke Panuku)**³⁸
- ▶ **Creating the 'talanoa' conversation is all it takes... (CORE Ed)**³⁹
- ▶ **What is Ethics? – Markkula Center for Applied Ethics**⁴⁰
- ▶ **Tūturu community consultation manual and video**⁴¹

Teaching and learning process

- ▶ As relevant to the teaching and learning context, reconnect students with prior learning about different ways of collecting data. Provide access to copysheet 4 (print or digital) and through discussion, identify a range of advantages and disadvantages for each data collection method. Support students to draw conclusions about which method is selected – and that it is about weighing up the logistics and what is possible to do, with what you want to find out.
- ▶ Ask students what they understand is meant by being 'ethical'. Look up dictionary definitions if needed. Develop the idea that "ethics refers to standards and practices that tell us how human beings ought to act

in the many situations in which they find themselves." See Markkula Center material noted in reference list for further information. Then ask, if we are to collect data ethically and safely, what does this mean we do/don't do when asking other people for information in a survey or interview (for example). Brainstorm ideas to cover: not asking people deeply prying, insensitive, hurtful or embarrassing questions; not asking leading questions that presuppose a particular answer in order to skew the data towards a desired result; using language (jargon) that can't be understood by the person being asked or using offensive language like slang or swear words; treating people's answers respectfully or not breaching confidentiality and telling someone else what the person said; etc.

- ▶ Copysheet 5 lists some guidelines for developing a survey, the likes of which students may have already encountered. The task requires students to decide which of these steps still applies to a face to face / kanohi ki te kanohi interview or focus group discussion. Where they think preparation of questions, conducting an interview or focus group, and/or analysis data will differ, state what these differences are.

Optional: Collecting feedback from community consultation

- ▶ Explain the biennial community consultation requirement to students (see the introductory section of this resource and the Tūturu community consultation resources), and that the class has been invited/has been given permission (as applicable) to contribute to this process. Explain what has been negotiated with the board and school leadership about the students' involvement.
- ▶ Provide structured support to understand the draft delivery statement (and what this statement is intended/not intended to be), the broad overview of the health education programme, and the feedback questions the board requires a response to. The Tūturu manual has a range of ideas for this.
- ▶ Plan with the students who is to be consulted and the process for firstly informing this group/this person/people about the delivery statement and course outline, and how they will collect feedback. This may be in the form an interview, a discussion activity, or the people being consulted may be directed to an online survey to record their ideas. Discuss safety issues and scenarios for dealing with anyone who disagrees, gets angry, displays non-inclusive values and beliefs, or makes the students gathering the feedback data feel unsafe in any way.

Learning journal entry or learning artefact to use as evidence of learning

Keep on record all completed templates from the tasks and use these as part of the evidence for the broader inquiry process that the data collection forms a part of.

Teacher reflection

- ▶ What were students' strengths in relation to the process of planning and administering the survey (or other method of data collection)?
- ▶ Which aspects of the process require ongoing development? Where in the learning programme could this occur?

³⁸ <https://kep.org.nz/assets/resources/site/Voices7-15.Wananga.pdf>

³⁹ <http://blog.core-ed.org/blog/2014/12/creating-the-talanoa-conversation-is-all-it-takes.html>

⁴⁰ <https://www.scu.edu/ethics/ethics-resources/a-framework-for-ethical-decision-making/>

⁴¹ <https://www.tuturu.org.nz/healthconsultation/>

4.1 Copsheet Identify advantages and disadvantages of different data collection methods.

Think about costs, time involved, accessing people, etc., whether or not people are anonymous and the implications of this for what they might say, and analysing all of the information gathered, etc.

	METHODS FOR COLLECTING DATA	ADVANTAGES	DISADVANTAGES
Survey	Using a digital application that provides anonymous responses.		
	Using a digital application that provides responses that identifies people.		
	Paper based (anonymous or known responses).		
Face to face	Interview an individual person using a formally (semi) structured set of questions.		
	Focus group using a formally (semi) structured set of questions.		
	Interview or focus group-type of data collection that uses cultural approaches to discussion and sharing information.		
Informal	Informal ways of gathering data e.g. a feedback postbox at a community meeting or a graffiti sheet next to a display of materials related to a topic.		
	Brainstorm or graffiti sheets used by students in class.		
	Anonymous postbox activity where students are answering questions and 'posting' their responses which are then analysed by class members.		
Other	Name or describe another data collection method.		
Summary	What combination of factors helps to decide which method of data collection will be used when someone is seeking information from other people?		

4.2 Copysheet. Identify ways that conducting an interview or focus group for data collection is similar to carrying out a survey, and what needs to be done differently when interviewing people in person.

GUIDANCE FOR DESIGNING AND CONDUCTING A SURVEY

HOW WILL DESIGNING AN INTERVIEW OR FOCUS GROUP DISCUSSION BE SIMILAR OR DIFFERENT TO DESIGNING A SURVEY?

Survey
Development

Deciding on a balance of open and closed questions to ask.

A survey is quick to fill in (and analyse) when there are lots of tick box scales or yes/no questions, but the rich information you get from questions with uniquely written answers are useful to help understand people's responses.

A digital survey with scales to tick or yes/no answers can be very quick for the survey application to summarise (usually as %), but will it tell you everything you need to know? Written answers are slower to analyse as they need to be read and the main themes decided, but they provide insights beyond what tick box responses can provide.

Balance what is practical to collect and analyse with what is useful to know.

Collecting information ethically includes:

- ▶ Seeking permission and support from school leadership.
- ▶ Not asking people deeply prying, insensitive, hurtful or embarrassing questions.
- ▶ Not asking leading questions that presuppose a particular answer.
- ▶ Not using language (like jargon) that can't be understood.
- ▶ Not using offensive language like slang or swear words.
- ▶ Treating people's answers respectfully.
- ▶ Not breaching confidentiality and telling someone else what the person said (in surveys where the person identifies themselves).

Many surveys are anonymous and participants need to be assured of this. They also need to know how their information will be used, and what will be reported back to them.

Decide what demographic data is needed (if any) and how you intend to use this e.g. age or year level, biological sex, gender identity, ethnicity. If not important for the data analysis then ethically it shouldn't be collected.

4.2 Copsheet (continued) Identify ways that conducting an interview or focus group for data collection is similar to carrying out a survey, and what needs to be done differently when interviewing people in person.

GUIDANCE FOR DESIGNING AND CONDUCTING A SURVEY

HOW WILL DESIGNING AN INTERVIEW OR FOCUS GROUP DISCUSSION BE SIMILAR OR DIFFERENT TO DESIGNING A SURVEY?

Collecting the survey data

The survey will need to be advertised to students (or other community members) in order to ask them to fill it in. Ways for doing this include school social media, posters around school, school notices, school website, notices in classrooms, etc.

Select a digital format and platform for collecting data. Choose one that makes the survey accessible for all students. Decide if other forms of data collection will be necessary e.g. pen and paper with a post box return for people without digital devices.

Analysing the survey data

Decide who will analyse the data and how they will do this. This will require people to have basic data analysis skills and be able to use an Excel spreadsheet.

Summarise all quantitative (number based) data - usually as %.

Summarise the main themes recurring in the qualitative data (written responses).

Interpreting the data to use it as evidence (of what needs to change)

Decide who will interpret the data and how they will do this. The group conducting the survey will need to agree on what the data (the numbers and the themes) suggest needs to change, or what needs to be done differently to promote wellbeing.

Decide which data you are going to take most notice of to use as evidence at this time and to plan a way forward. Be able to justify why this evidence and, if applicable, why you are leaving some data behind at this point.



Activity 5

The importance of using evidence to inform actions

Overview

Using an inquiry process to understand a wellbeing issue, leading to taking some form of action to promote student wellbeing in relation to that issue, firstly requires data to understand the situation (see Activity 4). Taking critical action requires clear alignment between the evidence of the wellbeing need (what needs to change, what needs to improve) with the aims or goals of the planned action, and the selection of actions to be taken.

This alignment of actions to evidence requires careful consideration. Obviously, this alignment is situation specific and makes most sense in context, working with real data, and in a real situation. However, the critical thinking processes needed to achieve a clear alignment of evidence with actions can be practiced with the use of scenarios.

This activity presents students with three scenarios where the evidence, planning and actions don't wholly align. Structured critical thinking questions are provided to guide students' analysis of each scenario to highlight where the alignment got lost, and what should have been done instead.

Teachers could consider redeveloping these scenarios to include locally relevant and topical issues.

NZC links

Learning intention Students will think critically about situations where promoting wellbeing requires careful use of evidence to make decisions about actions to take. (7D2, 8D3)

Key competencies Thinking critically/creatively, Using language, symbols and text.

Resources required

Access to the scenarios in copysheet 6 (print or digital copy).

Teaching and learning process

- ▶ Stress to students the importance of the alignment of each step of an inquiry process with the next. In context of the promotion of student wellbeing this means aligning what the evidence shows needs to change and improve, with the planning and implementation of actions that will lead to these changes and improvements. For example, a student is really stressed because they have let their assessments build up because they have been out socialising with friends, holding down a part time job, and 'putting off' their school work. To cope with the stress of getting behind with their studies they decide to go partying and have a few drinks to take their mind off it. What's wrong with this situation? Will partying and drinking address the student's stress? What do they need to do instead?
- ▶ Provide access to copysheet 6. Explain the process for completing the tasks as much as needed – modelling one example if required. Allocate one or two scenarios per group.
- ▶ Provide opportunity for sharing ideas between groups once the questions with each allocated scenario(s) are complete.

Debrief

Make connections between these alignment ideas and any actual planning students are currently engaged in. Or discuss examples in the (school) community where there seems to be good alignment or a lack of alignment between the evidence of wellbeing need and the actions being taken. What do students think it would take to get these misaligned actions back on track?

Learning journal entry or learning artefact to use as evidence of learning

- ▶ File answers to completed scenarios in the learning journal for ongoing reference.
- ▶ Check any of own action planning for alignment of evidence with actions.

Teacher reflection

How readily were students able to recognise a lack of alignment between evidence, and actions? What are the implications of this when students are planning their own actions?

5.1 Copsheet Aligning evidence of wellbeing need with actions.

Scenario 1 - Bullying at school

WHAT THE DATA SHOWED

A survey about students' experiences of bullying at school and data collected by pastoral leaders like deans showed that the most common form of bullying was teasing, name calling and shaming people about the appearance of their bodies.

BASED ON THIS EVIDENCE, WHAT SORTS OF ACTIONS DO YOU THINK A STUDENT ACTION GROUP COULD TAKE TO PROMOTE THE WELLBEING OF STUDENTS IN THEIR SCHOOL?

WHAT THE STUDENT ACTION GROUP PLANNED

A body-positivity campaign to raise the self-esteem of girls and to help them feel good about their bodies.

WHERE DO YOU THINK THE ALIGNMENT BETWEEN THE EVIDENCE AND THE PLANNING HAS BEEN LOST?

WHAT THE STUDENT ACTION GROUP DID

A multi day to 'celebrate the diversity of who we are and how we like to express ourselves'.

WHERE DO YOU THINK THE ALIGNMENT BETWEEN THE EVIDENCE, THE PLANNING (ABOVE) AND NOW THE ACTIONS HAS BEEN LOST?

GETTING BACK ON TRACK

What would you advise the student action group to do differently in this case? Why do you say this?

5.2 Copsheet Aligning evidence of wellbeing need with actions.

Scenario 2 - Sending nudes

WHAT THE DATA SHOWED

School leaders were dealing with a number of complaints from parents and students about nude pictures of students being resent without the permission of the person who originally sent them.

BASED ON THIS EVIDENCE, WHAT SORTS OF ACTIONS DO YOU THINK A STUDENT ACTION GROUP COULD TAKE TO PROMOTE THE WELLBEING OF STUDENTS IN THEIR SCHOOL?

WHAT THE STUDENT ACTION GROUP PLANNED

A social media campaign using a school social media page to tell everyone not to resend any nude pictures they are sent.

WHERE DO YOU THINK THE ALIGNMENT BETWEEN THE EVIDENCE AND THE PLANNING HAS BEEN LOST?

WHAT THE STUDENT ACTION GROUP DID

Put up posters of examples of nude pictures (found on the internet and not the students) with slogans like 'Is this you? Do you want to be known like this?'

WHERE DO YOU THINK THE ALIGNMENT BETWEEN THE EVIDENCE, THE PLANNING (ABOVE) AND NOW THE ACTIONS HAS BEEN LOST?

GETTING BACK ON TRACK

What would you advise the student action group to do differently in this case? Why do you say this?

5.3 Copsheet Aligning evidence of wellbeing need with actions.

Scenario 3 - Peer pressure to do risky things

WHAT THE DATA SHOWED

It is widely known among students from various social media posts that a number of students are engaging in 'challenges' that are recorded and posted online. One such recent event resulted in serious harm to a group of students and another group are in trouble with the police

BASED ON THIS EVIDENCE, WHAT SORTS OF ACTIONS DO YOU THINK A STUDENT ACTION GROUP COULD TAKE TO PROMOTE THE WELLBEING OF STUDENTS IN THEIR SCHOOL?

WHAT THE STUDENT ACTION GROUP PLANNED

A social marketing campaign called 'how dumb can you be?' This aimed to get people to think twice before they did anything stupid just for getting lots of 'likes' and other feedback on social media.

WHERE DO YOU THINK THE ALIGNMENT BETWEEN THE EVIDENCE AND THE PLANNING HAS BEEN LOST?

WHAT THE STUDENT ACTION GROUP DID

Added comments to social media posts of these challenges using the campaign tag line 'how dumb can you be?'

WHERE DO YOU THINK THE ALIGNMENT BETWEEN THE EVIDENCE, THE PLANNING (ABOVE) AND NOW THE ACTIONS HAS BEEN LOST?

GETTING BACK ON TRACK

What would you advise the student action group to do differently in this case? Why do you say this?



Activity 6

Using community consultation feedback

Overview

This activity looks to the potential of using community consultation data, especially that collected by students (see activity 4).

The legislative purpose of the biennial community consultation about a school's planned health education programme is to enable the board to adopt a statement on the delivery of the health curriculum. The consultation process the school carries out can be done by their own choice of method but must:

- ▶ Inform the school community about the content of the health curriculum; and
- ▶ ascertain the wishes of the school community regarding the way in which the health curriculum should be implemented given the views, beliefs, and customs of the members of that community; [noting that acting on such wishes must still comply with other education and human rights policy] and
- ▶ determine, in broad terms, the health education needs of the students at the school.

In addition to this formally required purpose of the consultation feedback, data collected from this consultation process may also provide some evidence that could be used as part of an inquiry process for student led action (using the ACLP – see the unit plan in the year 11-13 section of this resource). It is noted that this means a repurposing of the feedback data collected, and to think about it in relation to how it could be used to inform student led action.



For example, feedback information could be used to inform student-led action that results in:

- ▶ A newsletter article (or similar) for parents about a contemporary health education topic impacting young people that parents have little understanding of, with links to sources of information for parents e.g. cybersafety.
- ▶ An activity led by the senior students for the junior students on a wellbeing topic that impacts younger students, and which senior students now have deeper understanding of.
- ▶ Advocating to the board for a change to school policy or procedures as part of a school review of wellbeing support systems, as a result of specific (identity/diversity) groups in the school highlighting issues.
- ▶ Providing data for another student action group (e.g. a cultural or diversity group) to inform their actions.

NZC links

Learning intention Students will think critically about evidence when making decisions about actions to take. (7D2, 8D3)

Key competencies Thinking critically, Participating and contributing.

Resources required

Access to copysheet 7 – digital or print.

Teaching and learning process

Note that this activity assumes students have or will support the collection of feedback data for the board's biennial community consultation.

- ▶ Connect students with other learning about using data to inform student-led actions and the need for data when engaging in an inquiry learning process.
- ▶ Connect students with any data collection processes that they may have participated in as part of the board's biennial community consultation.
- ▶ Explain that community consultation data is collected for a specific purpose (note what this is, using material provided previously in this resource), and this activity is to explore how some of this feedback could also be used to inform their student led actions.
- ▶ Provide students with access to copysheet 7 and, working in small groups, assign each group 2-3 scenarios to work through. Model one example if required.
- ▶ Provide opportunity to share ideas between groups and/or with the whole class.
- ▶ Once community consultation data is available: Provide access to a suitable selection of the community consultation data collected by the students. Using a process similar to that in the copysheet, explore which data may be able to be used for student-led action.
- ▶ As planning proceeds, incorporate ideas into the action using inquiry process and NCEA assessment materials.

Learning journal entry or learning artefact to use as evidence of learning

- ▶ Document and file responses to scenarios.
- ▶ File all data and discussion notes in the inquiry portfolio for ongoing use.

Teacher reflection

To what extent did the community consultation data provide a useful source of ideas for student-led action to promote wellbeing? What other data is needed to help students to understanding the situation and plan meaningful actions to promote wellbeing?

6.1 Copsheet Identify the student led actions that could result from community consultation feedback.

SCENARIOS

WHAT STUDENT-LED ACTIONS COULD THIS RESULT IN?

Whānau members (students' own parents and families) saying they had no understanding of some wellbeing issues and pressures that young people face. They may have heard about it but don't actually know what it is [e.g. gaslighting in a romantic relationship].

Whānau members (students' own parents and families) who thought it was important that students learned much like they did at school. 'Just give them the facts', tell them how it will 'harm them and mess up the rest of their lives', or 'scare them into doing the right thing'!

Whānau members (students' own parents and families) who thought learning about the harms of watching pornography or sending nude pictures by text was not something children like theirs did and it shouldn't be taught at school.

Other community members with a vested interest in health education (e.g. an agency that wanted to deliver a wellbeing programme in the school on a topic like vaping, consent or healthy food choices) thought the school wasn't doing a good enough job because their programme or resource was not being used by the school. (The school had declined the agency access because the programme did not reflect the diversity of students at the school).

A group of students with disabilities who never saw any reference to young people like them in any of their health education lessons.

Rainbow students who heard supportive ideas being taught in class, but in the school grounds and beyond school, were still bullied.

Māori or Pacific students who said teachers and peers assumed they all had extensive cultural knowledge on wellbeing matters that they could share with the class.



Activity 7

Evaluating student-led action

Overview

Inquiry learning requires conclusions to be drawn from the process undertaken. When the inquiry learning process includes taking action to promote wellbeing, as in the Action Competence Learning Process, these actions need to be evaluated. When something is 'evaluated' we are looking to make a judgement about the value, quality or importance of it, often 'weighing things up' to come to that judgement. 'Evaluate' is a verb and therefore it refers to the action of assessing or analysing wellbeing-related information from a particular perspective or position based on ethical, social, cultural and political values relevant to the subject matter.

Evaluation is a learned process and requires a range of skills related to data analysis and interpretation, and critical thinking and reflection. The aspects of the action that will be evaluated needs to be thought about during the planning stages, and build into the action plan.

Ideally, two forms of evaluation data are needed:

- ▶ Impact data is needed to show that the aims or goals has been met and that is, the actions had a positive impact – the actions made a difference, and that something improved. This should relate in some way to the data that showed the wellbeing need in the first place.
- ▶ Process data can indicate what actions were actually done and completed; what it was like for the people delivering and implementing the action; what it was like for the people participating in the action (e.g. did they think the actions were appropriate, culturally responsive, enjoyable, relevant, safe, etc?).



What and how impact and process evaluation data is collected depends on the goal and the nature of the action taken. When planning the evaluation, think about the evidence needed to show that the actions were completed as planned and that they made a difference, and suitable data collection methods for gathering this evidence are included. Also consider what is practical and achievable and reflects the scale of the action (i.e., an enormous data collection process is not really warranted for a small and modestly sized action).

Student safety Collecting impact data about wellbeing can be problematic and encounter ethical issues for students (and teachers), especially when personal information about other students' experiences and wellbeing is required. For example, if there is a goal to reduce bullying, or reduce harms from internet and social media behaviours (see Activity 5) then surveying students to ask who has been bullied or who has sent/ been sent a nude picture since the campaign could be seen as prying, invasive and unethical. Support students to ethically and responsively collect impact data. This may mean using indirect evidence or framing evaluation questions in a way that asks more for student impressions rather than actual behavioural or personal data.

In many cases, students may be limited to collecting only process data. If there is opportunity to support students to collect impact (on wellbeing) data, ensure this is done in a carefully supervised and monitored way. That said, some students may be prepared to offer anecdotal evidence of the impact of the actions on their wellbeing.

The other issue with impact data is a methodological one as complex social issues can be difficult to show cause and effect – that is, that the action taken directly caused an improvement on wellbeing.

This activity provides an evaluation plan template to include with action planning to ensure that evaluation is planned for, and not an afterthought. A series of reflection and evaluation questions suitable for secondary school use is also provided.

NZC links

Learning intention Students will evaluate their actions. (7D2, 8D3)

Key competencies Thinking critically, Managing self.

Resources required

Access to Copysheet 7 – digital or print format.

References For further materials see the Level 2 NCEA materials for Achievement Standard 91327 Take action to enhance an aspect of people’s well-being within the school or wider community⁴².

Teaching and learning process

This is spread over the duration of the action planning, implementation and evaluation process.

- ▶ During action planning: Introduce students to the idea of evaluation, drawing on prior learning and activities where students had to reflect or think back on what they had done and draw conclusion from this. Use the overview text to briefly describe and make a distinction between process and impact evaluation.
- ▶ When timely to include, introduce the evaluation plan template for inclusion in the student-led action plan. See copysheet 7.1.
- ▶ During implementation of the plan: check that any required process and impact evaluation data is being collected.
- ▶ Once the action has been completed: support students to identify key evaluation questions to complete their inquiry process. See copysheet 7.2.

Learning journal entry or learning artefact to use as evidence of learning

Final evaluation statements are added to the documentation/video diary/portfolio providing evidence of that action being planned and implemented.

Teacher reflection

With evaluation needing to be thought about over the period of the planning and implementation of the student-led action, what was realised about the amount and type of learning and support students required to do this well?

⁴² <https://ncea.tki.org.nz/Resources-for-Internally-Assessed-Achievement-Standards/Health-and-physical-education/Health-education/Level-2-Health-education>

7.1 Copsheet Evaluation plan to include when planning the inquiry and student-led action. Identify the data you will need to collect to evaluate the process carried out and the impact of your actions.

PROCESS EVALUATION

Data to show that the actions undertaken were appropriate, acceptable, responsive to diversity etc as relevant for all of those involved

Brief description of the data or evidence that will be collected to show the goal has been achieved (or not) AND the method of data collection.

Who would this data be collected from and why?

What evidence would this show IF we have been successful (examples)?

IMPACT EVALUATION

An impact evaluation tells us whether or not the goal was achieved. The data collected should relate back to the data that showed the nature of the wellbeing need in the first place.

Brief description of the data or evidence that will be collected to show the goal has been achieved (or not) AND the method of data collection.

Who would this data be collected from and why?

What evidence would this show IF we have been successful (examples)?

7.2 Copysheet Evaluation questions to draw conclusions about the success of your actions and decide next steps. Select questions relevant to your inquiry and use evidence from your implemented actions to support your conclusions.

- ▶ Describe the results of the actions. Include a summary of what actually happened, which actions were able to be completed as planned and which were not.
 - ▶ What was it like for the people delivering and implementing the action?
 - ▶ What was it like for the people participating in the action (e.g. did they think the actions were appropriate, culturally responsive, enjoyable, relevant, safe, etc.?)
-

- ▶ Which actions were successfully implemented/carried out/completed?
 - ▶ Which enablers in particular supported the successful implementation of these actions?
 - ▶ Did these actions result in a positive impact on people's well-being as planned? How do you know this?
 - ▶ Did the actions impact all or only some people? What were the reasons for this?
-

- ▶ Which actions were not successful? What are the likely reasons for this? What could have or needed to be done differently?
 - ▶ What barriers were not addressed during planning, or what barriers arose during implementation and why were these not able to be overcome (or to what extent were they overcome)?
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- ▶ Thinking overall, was your goal (and the actions that came from this) actually "SMART". If not, what needed to be planned differently?
 - ▶ What alternative or additional actions are needed to meet the overall goal if this student-led action was continued or repeated? Give reasons why these changes would be needed.
-

- ▶ What steps should be taken now to build upon the positive impacts for well-being achieved by the actions so far?
- ▶ Overall, how valuable do you think the actions were? What else did you come to realise about the way the wellbeing issue or situation impacts your school community?



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