

NCEA Health Education - comparison of Achievement Standard results 2014-2015

With the release of the finalised 2015 NCEA results in April 2016, the following summary, and comparison with 2014, has been prepared. Ideas for the way teachers may use these data are provided at the end of the document.

Prepared for NZHEA, May 2016.

Overall: Across 2014 and 2015 there have been small increases in participation in some Achievement Standards and small decreases in others. Overall, the total number of Health Education Standards completed has decreased very slightly at Level 1 (a difference of just 20 standards), while Level 2 and 3 have increased slightly with 383 more Level 2 standards and 1088 more Level 3 standards being completed (keeping in mind most students each complete about four standards or 18-20 credits in a year-long learning programme).

Table 1. & Graph 1. Overall rates of participation in Health Education Achievement Standards 2014-2015

Ach Std #	Health Ed ref	Assessment mode	2014 total numbers	2015 total numbers
90971	1.1	Internal	5858	6037
90972	1.2	External	1918	1732
90973	1.4	Internal	3593	3572
90974	1.5	Internal	5782	5846
90975	1.6	External	2970	2894
91097	1.3	Internal	3705	3725
Total number of Level 1 standards completed			23826	23806
91235	2.1	External	2036	1898
91236	2.2	Internal	2945	3221
91237	2.3	Internal	3020	3022
91238	2.4	External	1054	1133
91239	2.5	Internal	3137	3301
Total number of Level 2 standards completed			12192	12575
91461	3.1	Internal	2624	2988
91462	3.2	External	1652	1705
91463	3.3	Internal	2368	2746
91464	3.4	Internal	2174	2514
91465	3.5	External	332	285
Total number of Level 3 standards completed			9150	10238

See Table 6 for Achievement Standard titles

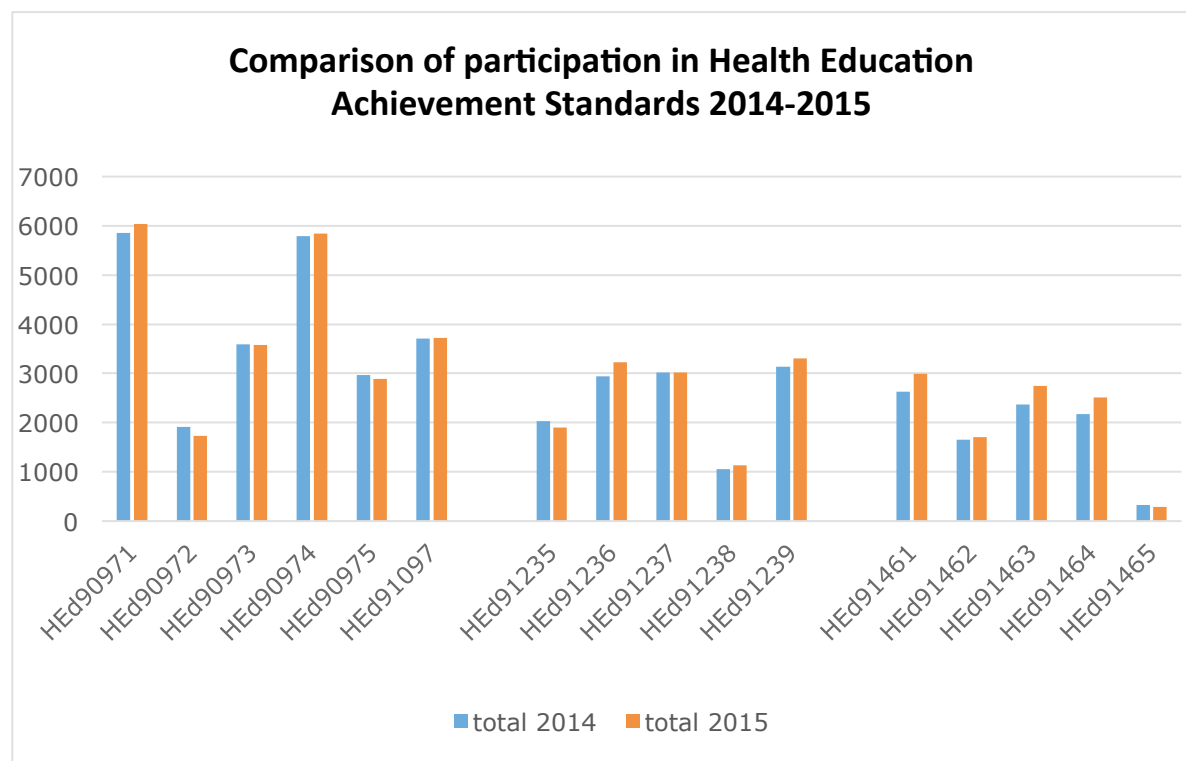


Table 2. Health Education Level 1 N/A/M/E comparison 2014-2015

Across all Levels 1-3, and across NAME, there is relatively little change in rates of achievement with only minor improvements in some standards and a small degree of slippage in others. In others (mainly the external assessments) the variation is greater with rates of Achievement and Merit in particular swinging up and down.

Health Education LEVEL 1		Not achieved %		Achieved %		Merit %		Excellence %	
		2014	2015	2014	2015	2014	2015	2014	2015
90971	Internal	20	20	42	40	24	24	14	15
90972	External	35	37	43	35	16	18	6	10
90973	Internal	17	20	41	36	27	28	15	17
90974	Internal	24	24	41	38	22	24	13	14
90975	External	29	28	40	42	25	25	6	5
91097	Internal	14	13	46	43	27	28	13	16

Table 3. Health Education Level 2 N/A/M/E comparison 2014-2015

Health Education LEVEL 2		Not achieved %		Achieved %		Merit %		Excellence %	
		2014	2015	2014	2015	2014	2015	2014	2015
91235	External	28	33	41	45	24	17	7	6
91236	Internal	22	21	37	39	25	24	16	16
91237	Internal	28	27	34	38	22	22	16	13
91238	External	38	26	43	50	15	18	4	6
91239	Internal	27	29	36	36	22	21	15	14

Table 4. Health Education Level 3 N/A/M/E comparison 2014-2015

Health Education LEVEL 3		Not achieved %		Achieved %		Merit %		Excellence %	
		2014	2015	2014	2015	2014	2015	2014	2015
91461	Internal	27	28	38	37	21	20	14	15
91462	External	38	40	40	36	16	19	5	6
91463	Internal	27	26	36	37	21	20	17	17
91464	Internal	29	29	36	34	20	21	15	16
91465	External	41	43	42	34	12	18	4	6

Table 5. Health Education Achievement Standard data summary of numbers and % - 2014-2015

ALL DATA					2014									2015								
Standard #		Assessment mode	Level	Credits	Not Achieved	%	Achieved	%	Merit	%	Excellent	%	Total	Not Achieved	%	Achieved	%	Merit	%	Excellent	%	Total
Level 1																						
90971	1.1	internal	1	3	1169	20	2455	42	1412	24	822	14	5858	1241	20	2428	40	1467	24	901	15	6037
90972	1.2	external	1	4	679	35	820	43	298	16	121	6	1918	638	37	605	35	315	18	174	10	1732
90973	1.4	internal	1	4	615	17	1470	41	978	27	530	15	3593	711	20	1269	36	997	28	595	17	3572
90974	1.5	internal	1	5	1368	24	2361	41	1283	22	770	13	5782	1403	24	2241	38	1386	24	816	14	5846
90975	1.6	external	1	4	851	29	1185	40	750	25	184	6	2970	796	28	1209	42	731	25	158	5	2894
91097	1.3	internal	1	4	537	14	1693	46	986	27	489	13	3705	473	13	1612	43	1047	28	593	16	3725
Level 2																						
91235	2.1	external	2	5	574	28	840	41	487	24	135	7	2036	621	33	855	45	315	17	107	6	1898
91236	2.2	internal	2	5	651	22	1083	37	747	25	464	16	2945	694	21	1242	39	762	24	523	16	3221
91237	2.3	internal	2	5	852	28	1033	34	661	22	474	16	3020	815	27	1142	38	658	22	407	13	3022
91238	2.4	external	2	4	403	38	454	43	155	15	42	4	1054	297	26	562	50	207	18	67	6	1133
91239	2.5	internal	2	5	838	27	1130	36	695	22	474	15	3137	951	29	1193	36	702	21	455	14	3301
Level 3																						
91461	3.1	internal	3	5	712	27	1004	38	549	21	359	14	2624	851	28	1102	37	596	20	439	15	2988
91462	3.2	external	3	5	635	38	659	40	268	16	90	5	1652	679	40	606	36	325	19	95	6	1705
91463	3.3	internal	3	5	634	27	849	36	492	21	393	17	2368	703	26	1018	37	560	20	465	17	2746
91464	3.4	external	3	4	621	29	786	36	432	20	335	15	2174	720	29	857	34	528	21	409	16	2514
91465	3.5	internal	3	5	137	41	141	42	40	12	14	4	332	122	43	98	34	50	18	15	6	285

Source: <http://www.nzqa.govt.nz/studying-in-new-zealand/secondary-school-and-ncea/find-information-about-a-school/secondary-school-statistics/consolidated-files/>
 (Select year(s) required. Reports for 2004-2015 are available.)

- Numbers not totalling 100% is due to rounding.
- Where multiple versions of the standard were used for assessment and reported in separate rows in the exported summary sheet (as is the case for several internal assessments), totals for each standard have been combined and reported as the overall total for that standard.

Ideas for teachers and middle leaders making use of national achievement standard data – *consider discussing these points in a department meeting as a part of annual departmental review*

1. How do your students' rates of achievement compare with the national pattern of achievement in the Health Education Achievement standards:

- Across the levels? Across standards? Across NAME?
- Is your school data similar? Higher? Lower?
- Why do you think this is the case? What is your evidence for this?

Use participation based data for comparison but also consider your roll based data.

2. In which standards do your students do better (higher rates of achievement overall as well as merit/excellence)? In which standards do you students tend to do less well?

- Why do you think this is the case? What is your evidence for this?

For example think about:

- *the opportunities for prior learning and the ways your Year 9&10 programme develop students big ideas (eg hauora, interpersonal communication and skills for relationships, the basics of personal, interpersonal and societal aspects of health contexts, understandings of respect and fairness etc), and contextual knowledge (sexuality education, alcohol and other drugs, food and nutrition, change and loss etc).*
- *the way your current senior secondary programme develops the underlying concepts in year by year level steps; how your teaching practice provides opportunities for students to think critically and develop deep understanding of the issues they are studying; how you select relevant contexts that engage students and provide opportunity for development of Health Education ideas; how you support students' subject specific literacy development in your lessons - which includes reading, writing and oral language; how you provide a range of opportunities for gathering evidence to meet internal standard requirements, and practice (and access to exemplars) for sitting external assessments; the way your students are supported to use good quality evidence and examples when investigating issues; etc.*

3. If reviewing your current selection of standards within Health Education (*and drawing also from other subject matrices where these are included in your programme*)

- What do your students' identify as their pathways beyond school (and therefore, what qualifications do they need to gain at school to access these)?
- Does the selection of Health Education (and other) standards to assess the learning programme provide students with a pathway across NZC Levels 6-8/years 11-13 (and NCEA Levels 1-3) or does the selection of standards limit their progression through and beyond the curriculum? What gives you confidence that your department/subject provides students with meaningful pathways that will take them beyond school?
- Does your programme make an equitable contribution to students NCEA level certificates eg at least 16 credits for NCEA Level 1, and 14 credits for NCEA Level 2&3?
- Does your programme provide access to at least one external for students seeking subject/course/NCEA level endorsement? Does your department, or your school discourage external assessments because of perceived ability of students to achieve these? If so, (how) is this limiting their learning and qualification pathway?
- Does your course over-assess? If offering all 24 Health credits at each level, are all students expected to complete all standards, or are they coached to select those most relevant to their learning pathway? If your course offers in excess of 24 credits, what's the justification for this? *How are you ensuring high quality learning that can be built on in subsequent years and result in high quality learning and high levels of achievement?*

Table 6. Health Education Achievement Standard titles – for reference

Level 1		Assessment mode	Credits	Title
90971	1.1	internal	3	Take action to enhance an aspect of personal well-being.
90972	1.2	external	4	Demonstrate understanding of influences on adolescent eating patterns to make health-enhancing recommendations.
90973	1.4	internal	4	Demonstrate understanding of interpersonal skills used to enhance relationships.
90974	1.5	internal	5	Demonstrate understanding of strategies for promoting positive sexuality.
90975	1.6	external	4	Demonstrate understanding of issues to make health-enhancing decisions in drug-related situations.
91097	1.3	internal	4	Demonstrate understanding of ways in which well-being can change and strategies to support well-being.
Level 2				
91235	2.1	external	5	Analyse an adolescent health issue.
91236	2.2	internal	5	Evaluate factors that influence people’s ability to manage change.
91237	2.3	internal	5	Take action to enhance an aspect of people’s well-being within the school or wider community.
91238	2.4	external	4	Analyse an interpersonal issue(s) that places personal safety at risk.
91239	2.5	internal	5	Analyse issues related to sexuality and gender to develop strategies for addressing the issues.
Level 3				
91461	3.1	internal	5	Analyse a New Zealand health issue.
91462	3.2	external	5	Analyse an international health issue.
91463	3.3	internal	5	Evaluate health practices currently used in New Zealand.
91464	3.4	external	4	Analyse a contemporary ethical issue in relation to well-being.
91465	3.5	internal	5	Evaluate models for health promotion.