

# Health 2019 v1.2

IA2: Sample assessment instrument

## Examination — extended response (25%) (Elective topic 2: Road safety)

This sample has been compiled by the QCAA to assist and support teachers in planning and developing assessment instruments for individual school settings.

**Student name**

**Student number**

**Teacher**

**Issued**

**Due date**

## Marking summary

Criterion	Marks allocated	Provisional marks
Recognising and comprehending	6	
Analysing, critiquing and organising	8	
Evaluating and reflecting	8	
Communicating	3	
<b>Overall</b>	<b>25</b>	

# Conditions

<b>Technique</b>	Examination — extended response
<b>Unit</b>	Unit 3: Community as a resource for healthy living
<b>Topic/s</b>	Elective topic 2: Road safety
<b>Time</b>	2 hours + 15 minutes planning
<b>Word limit</b>	800–1000 words
<b>Seen/unseen</b>	Unseen question and stimulus
<b>Other</b>	Notes allowed — schools implement authentication strategies that reflect QCAA guidelines for ensuring student authorship of notes pages prior to the examination.

# Instructions

Compose your response in the space provided. The response should include the written, language and genre features of an essay.

## Task

The local council member responsible for the Dartford region's 'Vision zero' road safety strategy has asked you to recommend one road safety innovation to diffuse into their community.

Compose an extended response to the question:

**What is the likely impact and diffusion of the innovation selected for the Dartford region?**

To complete this task, you must:

- **select** your diffusion action strategy innovation, or the alternate innovation presented in the stimulus, to answer the question
- **analyse** and **interpret** the significant features of the setting in the Dartford region to draw conclusions about
  - local or regional features and trends relevant to the selected innovation
  - the most significant barriers to and enablers of the selected innovation
  - existing personal, social and community resources
- **critique** information from the stimulus material, using the community level of influence from the social ecological model, to distinguish the most significant determinants that impact on road safety in the Dartford region and are relevant to the selected innovation
- use two of the RE-AIM steps — (R)each, (E)ffectiveness, (A)doption, (I)mplementation and (M)aintenance — to **evaluate** and **reflect on**
  - the characteristics of the selected innovation that would affect diffusion in the Dartford region
  - the likely impact on innovation uptake
- **justify** one recommendation that mediates, advocates or enables future action in the Dartford region, based on the likely impact and diffusion of the selected innovation.

# Instrument-specific marking guide (IA2): Examination — extended response (25%)

## Criterion: Recognising and comprehending

### Assessment objectives

1. recognise and describe information from primary sources and secondary sources about the chosen topic in an alternate community context
2. comprehend and use the specified approaches, frameworks or resources as they relate to the chosen topic in an alternate community context

The student work has the following characteristics:	Marks
<ul style="list-style-type: none"> <li>• accurate recognition and discerning description of relevant and provided contextual information from primary sources and secondary sources that includes               <ul style="list-style-type: none"> <li>– resources, barriers and enablers for the target group</li> <li>– data trends and the impact on the health status of the target group</li> <li>– determinants</li> </ul> </li> <li>• succinct comprehension and perceptive use of the relevant               <ul style="list-style-type: none"> <li>– overarching health approaches, frameworks or resources</li> <li>– social ecological model level of influence</li> <li>– diffusion process variables.</li> </ul> </li> </ul>	5–6
<ul style="list-style-type: none"> <li>• recognition and appropriate description of some contextual information from primary sources and secondary sources that includes               <ul style="list-style-type: none"> <li>– resources, barriers and enablers for the target group</li> <li>– data trends</li> <li>– determinants</li> </ul> </li> <li>• comprehension and appropriate use of the               <ul style="list-style-type: none"> <li>– overarching health approaches, frameworks or resources</li> <li>– social ecological model level of influence</li> <li>– diffusion process variables.</li> </ul> </li> </ul>	3–4
<ul style="list-style-type: none"> <li>• variable recognition and superficial description of some information about the chosen topic</li> <li>• superficial comprehension and use of aspects of               <ul style="list-style-type: none"> <li>– an overarching health resource</li> <li>– a diffusion of innovations concept.</li> </ul> </li> </ul>	1–2
<ul style="list-style-type: none"> <li>• does not satisfy any of the descriptors above.</li> </ul>	0

## Criterion: Analysing, critiquing and organising

### Assessment objectives

3. analyse and interpret information from primary sources and secondary sources about the chosen health-related topic and issues in an alternate community context
4. critique information to distinguish determinants that influence health status in an alternate community context
5. organise information about a chosen issue for a particular purpose

The student work has the following characteristics:	Marks
<ul style="list-style-type: none"> <li>• insightful analysis and interpretation of relevant and provided contextual information related to implemented action from primary sources and secondary sources to draw conclusions about:               <ul style="list-style-type: none"> <li>– data trends</li> <li>– barriers and enablers</li> <li>– personal, social and community resources</li> </ul> </li> <li>• insightful critique of relevant contextual information using the social ecological model to distinguish the significant determinants that influence health in the alternate community context</li> <li>• coherent and effective organisation of information to achieve a particular purpose.</li> </ul>	7–8
<ul style="list-style-type: none"> <li>• purposeful analysis and interpretation of relevant and provided contextual information related to implemented action from primary sources and secondary sources to draw conclusions about:               <ul style="list-style-type: none"> <li>– data trends</li> <li>– barriers and enablers</li> <li>– personal, social or community resources</li> </ul> </li> <li>• purposeful critique of relevant contextual information using the social ecological model to distinguish the determinants that influence health in the alternate community context</li> <li>• effective organisation of information to achieve a particular purpose.</li> </ul>	5–6
<ul style="list-style-type: none"> <li>• appropriate analysis and interpretation of contextual information related to implemented action from relevant and/or provided primary sources and/or secondary sources to draw conclusions about:               <ul style="list-style-type: none"> <li>– data trends</li> <li>– barriers or enablers</li> <li>– personal, social or community resources</li> </ul> </li> <li>• appropriate critique of contextual information to distinguish the determinants that influence health</li> <li>• appropriate organisation of information to achieve a particular purpose.</li> </ul>	3–4
<ul style="list-style-type: none"> <li>• superficial analysis and interpretation of aspects of information about implemented action from sources</li> <li>• identification of determinants that influence health</li> <li>• organisation of aspects of information.</li> </ul>	1–2
<ul style="list-style-type: none"> <li>• does not satisfy any of the descriptors above.</li> </ul>	0

## Criterion: Evaluating and reflecting

### Assessment objectives

7. evaluate and reflect on an implemented diffusion action strategy for a chosen issue using RE-AIM and justify recommendations that mediate, advocate and enable innovation uptake in a community health context

The student work has the following characteristics:	Marks
<ul style="list-style-type: none"><li>critical evaluation and insightful reflection on the innovation impact, methodology and resources using two relevant steps of RE-AIM</li><li>discerning justification of recommendations for future action that mediates, advocates or enables innovation uptake in an alternate community health context using the diffusion of innovations model.</li></ul>	7–8
<ul style="list-style-type: none"><li>considered evaluation and purposeful reflection on the innovation impact, methodology and resources using RE-AIM</li><li>effective justification of recommendations for future action in an alternate community health context using the diffusion of innovations model.</li></ul>	5–6
<ul style="list-style-type: none"><li>feasible evaluation and reflection on the innovation using RE-AIM</li><li>feasible justification of recommendations for future action in a community health context.</li></ul>	3–4
<ul style="list-style-type: none"><li>superficial evaluation and reflection on aspects of the innovation</li><li>superficial or partial recommendations for future action.</li></ul>	1–2
<ul style="list-style-type: none"><li>does not satisfy any of the descriptors above.</li></ul>	0

## Criterion: Communicating

### Assessment objectives

8. make decisions about and use mode-appropriate features, language and conventions for a particular purpose

The student work has the following characteristics:	Marks
<ul style="list-style-type: none"><li>discerning decision-making and accurate use of<ul style="list-style-type: none"><li>written features to achieve a particular purpose</li><li>language for a community context</li><li>referencing and essay genre conventions.</li></ul></li></ul>	3
<ul style="list-style-type: none"><li>appropriate decision-making and use of<ul style="list-style-type: none"><li>written features to achieve a particular purpose</li><li>language for a community context</li><li>referencing and essay genre conventions.</li></ul></li></ul>	2
<ul style="list-style-type: none"><li>variable and/or inappropriate use of<ul style="list-style-type: none"><li>written features</li><li>language</li><li>referencing and/or essay genre conventions.</li></ul></li></ul>	1
<ul style="list-style-type: none"><li>does not satisfy any of the descriptors above.</li></ul>	0

# Stimulus

## Features of the setting — Dartford region (alternate community context)

Figure 1: Dartford region population age structure

Age group	Total no.
Under 4	21 080
5 to 9	19 761
10 to 14	20 896
15 to 19	22 043
20 to 24	24 393
25 to 29	24 793
30 to 34	23 671
35 to 39	25 932
40 to 44	26 143
45 to 49	24 257
50 to 54	22 335
55 to 59	18 975
60 to 64	18 896
65 to 69	12 743
70 to 74	6 971
75 to 79	2 367
80 to 84	1 012
85 and over	368

Total population = 316 636

Figure 2: Dartford region mobile device/smartphone use

Mobile device use	%
Residents who are mobile-only phone users and do not have fixed-line telephone or fixed-line internet services	30%
Residents who have the latest version of their provider's mobile phone	6%
Residents who have iPhone mobile devices	48%
Residents who have Samsung mobile devices	44%
Residents who do not have a smartphone	4%
Residents who update their mobile device apps or operating system as soon as the updates are available	16%

Figure 3: Internet use in the Dartford region

% of households with internet access and summary of access type	%	% of households without internet access and reasons provided	%
Accessed through a desktop or laptop computer	94%	No need for internet access	63%
Accessed via mobile or smartphones	86%	Lack of knowledge or confidence	22%
Accessed via tablets	62%	Cost	16%

Figure 4a: Road user crashes

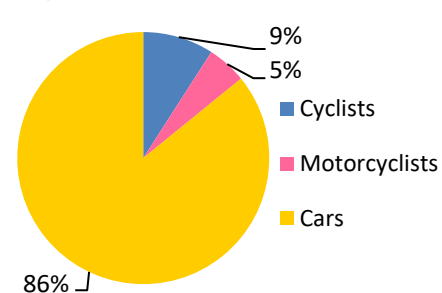


Figure 4b: Crash severity for cyclists, motorcyclists and cars

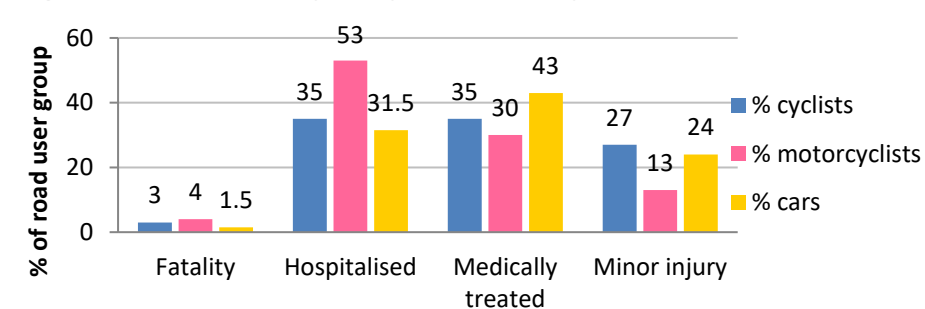


Figure 5a: Helmet and restraint use

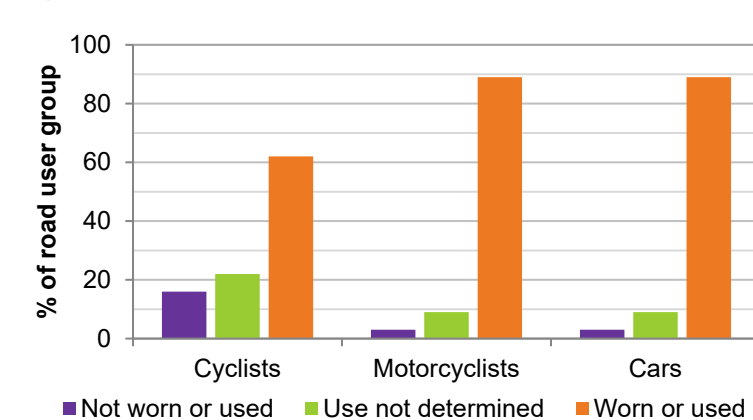


Figure 5b: Mobile phone use while driving/riding in the previous 48 hours

Behaviour	%
Talking on hands-free mobile	46%
Reading text messages	30%
Talking on handheld mobile	27%
Using another mobile function	22%
Sending text message	18%
Never read text messages	69%

Figure 6: Dartford self-reported road behaviours while driving/riding

Self-reported road behaviours	2012	2013	2014	2015	2016
Have driven/ridden over the speed limit mostly or always	31%	32%	32%	34%	34%
Have driven/ridden within three hours of taking recreational drugs	6%	8%	12%	20%	27%
Could have driven/ridden while over the legal blood alcohol concentration (0.05 BAC)	21%	21%	22%	24%	26%
Had moderate to high levels of fatigued driving	42%	46%	45%	44%	45%
Have driven/ridden through red lights regularly	45%	52%	55%	61%	64%
Have not stopped at pedestrian crossings when they should have	2%	3%	4%	5%	7%
Have been involved in a road rage incident	0.5%	1%	1%	1%	2%
Have had a near-miss incident with a cyclist where they were at fault	4%	6%	7%	8%	12%
Have had a near-miss incident with a cyclist where the cyclist was at fault	2%	2%	2%	2%	2%

Figure 7: Dartford region's 'Vision zero' road safety goals and priorities

Safe system factors	In 2021 there will be ...	Short-term priorities:
<b>SAFE ROADS AND ROADSIDES</b>	More forgiving road and roadside infrastructure	<ul style="list-style-type: none"> <li>improved footpath infrastructure for pedestrians</li> <li>school crossing supervisor scheme</li> <li>improved bicycle infrastructure</li> </ul>
<b>SAFE SPEEDS</b>	Safer and more accepted speed limits	<ul style="list-style-type: none"> <li>more targeted and effective enforcement of speed limits</li> <li>support of compliance with speed limits</li> </ul>
<b>SAFE VEHICLES</b>	More community members in safer vehicles	<ul style="list-style-type: none"> <li>support of young drivers and older drivers accessing vehicles with higher safety standards</li> </ul>
<b>SAFE ROAD USERS</b>	More road users alert, compliant and courteous	<ul style="list-style-type: none"> <li>more wearing of seatbelts</li> <li>less drink- and drug-driving, speeding, fatigued driving and distracted driving.</li> </ul>

Source: Department of Transport and Main Roads, 2015, *Safer Roads*, *Safer Queensland: Queensland's Road Safety Strategy 2015–21*, Brisbane. A Creative Commons Attribution 3.0 Generic publication.

## Characteristics of the alternate innovation — SafeDrive app

Figure 8: SafeDrive app innovation



### SafeDrive app trial features and outcomes

#### Features:

- exclusive to one phone carrier on one phone model
- uses rewards, such as tickets to movies and sporting fixtures, along with gamification, to attract young drivers and provide incentives for safe kilometres driven
- disables the device's signal so calls and texts cannot be received
- allows groups of friends to team up to create 'drive teams' and accumulate points together to earn better rewards
- free to download, easy to use and drivers can earn rewards after 50 kilometres of safe driving.

#### Outcomes:

- 17-week pilot trial in the Hunter region in New South Wales from January – April 2014
- the trial aimed to recruit 2500 young drivers
- 6850 people downloaded the app — 72% females and 28% males
- there were 4500 active users for the 17-week period
- 850 users contacted the trial for additional assistance
- over 25 000 rewards were redeemed
- over 3 000 000 safe kilometres were travelled by users
- crashes in the region dropped by 25% and fatalities dropped by 20%
- the region's death toll from car crashes dropped to the lowest since 1936.

**Note:** The service has not been supported by the phone carrier since 31 December 2015.

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