

Health 2019 v1.2

IA2 sample assessment instrument

Examination — extended response (25%) (Elective topic 3: Anxiety)

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

Exam date

Marking summary

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

Conditions

Technique	Examination — extended response
Unit	Unit 3: Community as a resource for healthy living
Topic/s	Elective topic 3: Anxiety
Time	2 hours + 15 minutes planning
Word limit	800–1000 words
Seen/Unseen	Unseen question and stimulus
Other	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 community of Dunnart has concerns about its young people's capacity to deal with anxiety. A working committee is investigating the implementation of a specific innovation that can be used as part of the high school's transition program for its Year 11 and Year 12 students.

Compose an extended response to the question:

What is the likely impact and diffusion of the innovation selected for the Dunnart community?

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 Dunnart community 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 anxiety in the Dunnart community 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 Dunnart community
 - the likely impact on innovation uptake
- justify one recommendation that mediates, advocates or enables future action in the Dunnart community, 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"> • 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"> – resources, barriers and enablers for the target group – data trends and the impact on the health status of the target group – determinants • succinct comprehension and perceptive use of the relevant <ul style="list-style-type: none"> – overarching health approaches, frameworks or resources – social ecological model level of influence – diffusion process variables. 	5–6
<ul style="list-style-type: none"> • recognition and appropriate description of some contextual information from primary sources and secondary sources that includes <ul style="list-style-type: none"> – resources, barriers and enablers for the target group – data trends – determinants • comprehension and appropriate use of the <ul style="list-style-type: none"> – overarching health approaches, frameworks or resources – social ecological model level of influence – diffusion process variables. 	3–4
<ul style="list-style-type: none"> • variable recognition and superficial description of some information about the chosen topic • superficial comprehension and use of aspects of <ul style="list-style-type: none"> – an overarching health resource – a diffusion of innovations concept. 	1–2
<ul style="list-style-type: none"> • does not satisfy any of the descriptors above. 	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"> • 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"> – data trends – barriers and enablers – personal, social and community resources • insightful critique of relevant contextual information using the social ecological model to distinguish the significant determinants that influence health in the alternate community context • coherent and effective organisation of information to achieve a particular purpose. 	7–8
<ul style="list-style-type: none"> • 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"> – data trends – barriers and enablers – personal, social or community resources • purposeful critique of relevant contextual information using the social ecological model to distinguish the determinants that influence health in the alternate community context • effective organisation of information to achieve a particular purpose. 	5–6
<ul style="list-style-type: none"> • 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"> – data trends – barriers or enablers – personal, social or community resources • appropriate critique of contextual information to distinguish the determinants that influence health • appropriate organisation of information to achieve a particular purpose. 	3–4
<ul style="list-style-type: none"> • superficial analysis and interpretation of aspects of information about implemented action from sources • identification of determinants that influence health • organisation of aspects of information. 	1–2
<ul style="list-style-type: none"> • does not satisfy any of the descriptors above. 	0

Criterion: Evaluating and reflecting

Assessment objective

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">critical evaluation and insightful reflection on the innovation impact, methodology and resources using two relevant steps of RE-AIMdiscerning 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.	7–8
<ul style="list-style-type: none">considered evaluation and purposeful reflection on the innovation impact, methodology and resources using RE-AIMeffective justification of recommendations for future action in an alternate community health context using the diffusion of innovations model.	5–6
<ul style="list-style-type: none">feasible evaluation and reflection on the innovation using RE-AIMfeasible justification of recommendations for future action in a community health context.	3–4
<ul style="list-style-type: none">superficial evaluation and reflection on aspects of the innovationsuperficial or partial recommendations for future action.	1–2
<ul style="list-style-type: none">does not satisfy any of the descriptors above.	0

Criterion: Communicating

Assessment objective

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">discerning decision-making and accurate use of<ul style="list-style-type: none">written features to achieve a particular purposelanguage for a community contextreferencing and essay genre conventions.	3
<ul style="list-style-type: none">appropriate decision-making and use of<ul style="list-style-type: none">written features to achieve a particular purposelanguage for a community contextreferencing and essay genre conventions.	2
<ul style="list-style-type: none">variable and/or inappropriate use of<ul style="list-style-type: none">written featureslanguagereferencing and/or essay genre conventions.	1
<ul style="list-style-type: none">does not satisfy any of the descriptors above.	0

Stimulus

Features of the setting — Dunnart community (alternate context)

Dunnart community general information

- two primary schools
- one high school
- one special school
- one school-based youth health nurse in each of the primary schools
- one guidance counsellor in the high school also supporting the special school
- one community-based mental health facility with one psychologist and two counsellors located in Wombat Hills (75 kilometres away)
- Unemployment rate of 7.8% in the community, increasing to 9.6% for the 18–24 age bracket.

Dunnart Community High School resilience program information

- The program aims to aims to develop resilience and coping skills into post-schooling pathways.
- Students complete the program in both Year 11 and Year 12.
- Participation is voluntary, with non-participating students attending a study session.
- Program consists of 1 x 60-minute session per week for 10 weeks and is delivered by classroom teachers.

Figure 1: Attendance rate of resilience program

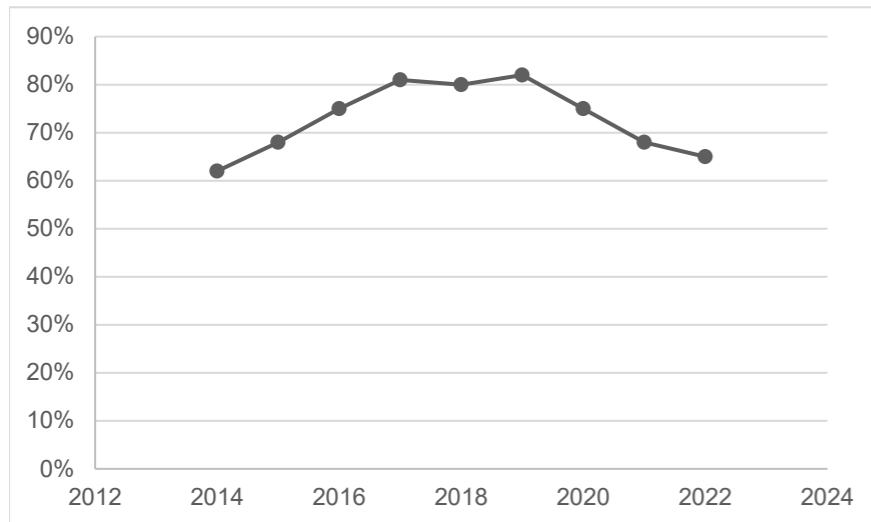


Figure 2: Top concerns of young people aged 15–24

Year level	% who are concerned
Employment	72%
Mental health	54%
Relationships	33%
Money	79%
Global warming	29%

Figure 3: Preferred learning approaches of current senior school students

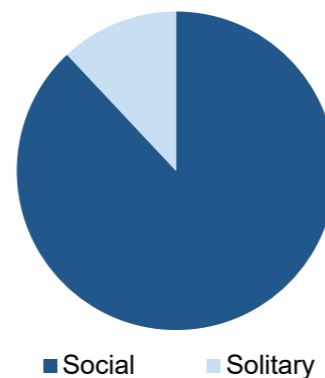
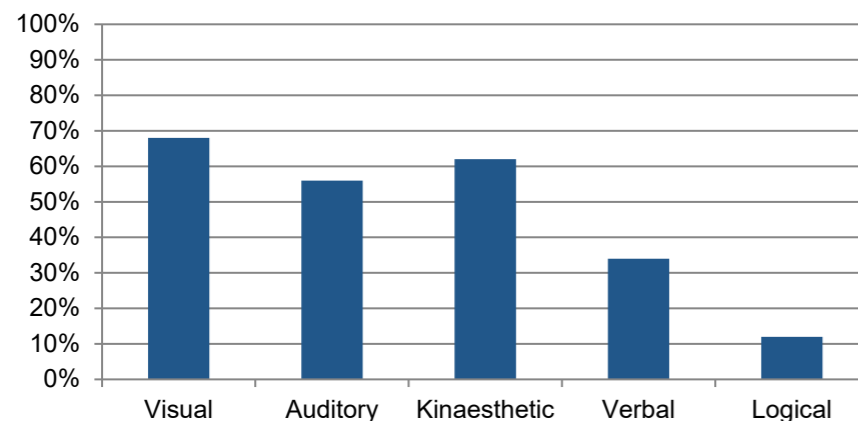


Figure 4: Student access to personal portable devices in Dunnart community

Device type	% of students who have access
Laptop	65%
Tablet	40%
Mobile phone with no internet access	12%
Mobile phone with internet access	70%

Figure 5: Supportive family relationships

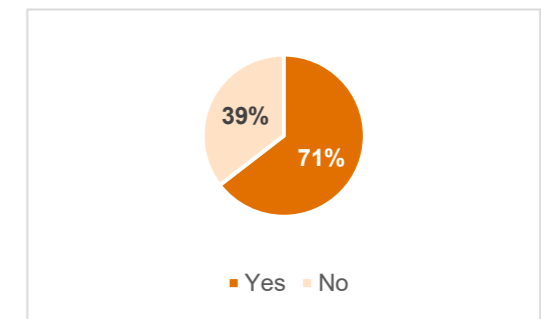


Figure 6: Prevalence of mental health issues in the Dunnart community over previous 5 years

Mental Health Concern	2018	2019	2020	2021	2022
Stress	29%	33%	34%	36%	39%
Depression	21%	22%	22%	24%	24%
Anxiety	32%	35%	36%	41%	45%
Self-Harm	12%	12%	15%	14%	13%

Characteristics of the alternate innovation — Forget Your Fears program

Forget Your Fears program

Forget Your Fears provides over 100 primary programs to develop positive school communities, social and emotional learning, relationships with parents and carers, and mental health capacity. This specific school program has been adapted for high school students and consists of the following:

1. 'Optimistic kids' — 10 sessions that aim to build resilience in students (target ages: 14–17)
2. 'This way up' — six sessions that aim to enable students to recognise personal signs and symptoms of stress and anxiety and to develop strategies to deal with those effectively (target ages: 12–17).

Central Highlands University study of the Forget Your Fears program

- 50 schools were invited to participate in the pilot program, of which 17 accepted the invitation.
- Five of those schools had special education programs.
- 762 students started in the pilot program. Of these, 61 were students with intellectual disability.
- 65% of participants completed the program. For students with intellectual disability, the completion rate was 77%.
- 70% of parents and carers completed the evaluation survey — 54% reported an improved relationship with the school, and 72% reported an increase in conversations at home about resilience and mental health.
- 28% did not engage with the program resources as they did not believe the program related to their child.
- Teachers generally reported that the Forget Your Fears resources enabled them to teach the program effectively; however, parents were not as supportive of the parent resources. Parents typically reported the program did not develop their capacity to help their children with mental health issues.
- At the end of the pilot program, 87% of students could recall signs and symptoms of stress and anxiety; however, only 38% could recall appropriate strategies to deal with stress and anxiety.
- All trial schools reported an increase in students' self-reporting of mental health issues during the implementation of the program. This however decreased over time following implementation and was at lower levels than prior to the program 12 months later.
- The follow-up survey contained questions specific to technology and social media — 90% of respondents identified that their child was engaged in at least one social media platform, and 75% of respondents identified that their child had their own mobile phone with internet access.

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