**Being critical (showing critical thinking) and being perceptive in L3 health**

***Critical thinking***

Evidence of critical thinking will help you reach the higher grades. This sheet is designed to give you some sentence starters or ideas to be critical and incorporate criticality into your writing.

*In no particular order, some possible sentence starters to help you be critical are:*

A common assumption is that…

I question whether…

Those advantaged by this are… because….

Those disadvantaged by this are… because…

This is a misuse of power over others because ...

This is socially unjust because…

People’s beliefs continue to be shaped by…

For the common good of society….

The voices that need to be heard are…

The weight of the evidence suggests that…

After considering the pros and cons…

From this point of view…

Critics of this view would say...

The perception of some people is…

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| Also, connective words such as… however… despite this… although… therefore… this means that… alternatively… on the other hand…  |

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| Notes/thoughts/questions to ask… |

***Being perceptive***

Being perceptive in the Achievement Standards generally means that you will:

* Explore the ‘key’ aspects or ideas for your chosen topic or issue
* Understand how the underlying concepts apply to the topic at hand and respond thoughtfully to these
* Show critical thinking (see above).

**The Underlying Concepts of Health**

To recap, some of the key points you should understand are:

* **Well-being:** At this level, the well-being of society (communities, groups or all of NZ) needs to be emphasised, with less focus on personal well-being. Think about how the health issue, health practices or ethical issue impact on groups within NZ. These impacts can be positive or negative; short-term or long-term and should be supported by evidence.
* **Attitudes and values:** The key idea here is social justice (fairness, inclusiveness, non-discrimination). But the other attitudes and values that make up this concept are:
* Having a positive and responsible attitude to well-being that includes valuing self and others, being willing to reflect on beliefs, integrity, commitment, perseverance, and courage.
* Respect for the rights of other people, for example through acceptance of a range of abilities, acknowledgment of diverse viewpoints, tolerance, rangimarie, and open-mindedness.
* Care and concern for other people in their community and for the environment through cooperation and awhina, applying aroha, manaakitanga, care, compassion, positive involvement and participation.

The attitudes and values can be ‘worked in’ to your writing in various ways. For determinants/implications, the question could be:  What (and how/why) are the A&Vs missing, when these determinants or implications exist? For people’s perspectives on an issue, the question could be:  What A&Vs are evident in this person’s (or group’s) viewpoint?  For strategies, you could consider:  How does taking this action lead to social justice and other A&Vs?

* **Socio-ecological perspective:** The main idea here is that the ‘major’ determinants of health are what influences the well-being of people and communities/society. This means that culture, economic and political factors are most important, with factors such as lifestyle choices taking less of a role in determining the well-being of communities. If we were to focus on lifestyle and personal determinants, then it is easy to fall into the ‘victim-blaming’ trap, and this is not the intent of Health Education. We want to understand the big picture of what is influencing people’s well-being in NZ.
* **Health promotion:** The actions that are taken to improve well-being for communities. We use the word ‘strategy’ at this level, which implies that a number of coordinated actions are involved. Health promotion includes aspects from models such as the Ottawa Charter, and involves Collective Action to address the determinants of health – recognising that for sustainable change, the actions need to fix the factors that led to it in the first place (rather than focus on changing people’s behaviour – victim blaming).

**Being perceptive in AS 91461 (NZ Health Issue):**

* Explain the key determinants of health and implications as supported by NZ evidence.
* Strategies seek to address the determinants I have explained.
* Well-being: Explain implications for society/communities, for people’s relationships and for people individually. These are positive and negative; short-term and long-term.
* Attitudes and values: Explain how the strategies will lead to social justice/equitable health outcomes, explain how the implications show that some of the attitudes and values (see above) are being neglected.
* Refer to models of health promotion in explanation of strategies (e.g. Healthy public policy from the Ottawa Charter, harm minimisation pillars if an alcohol/drug issue). Drawing from real-life strategies already in place in NZ.

**Being perceptive in AS 91463 (Health Practices used in NZ):**

* Use of a range of relevant evidence to support my answers
* Connect the different parts of the work to show interconnections.
* Links to well-being (personal and community) in the explanation and comparison of advantages/disadvantages.
* Attitudes and values: These link to the philosophies (what people believe and why) as well as whether using the practices shows respect for the rights of others, care and concern, a positive and responsible attitude, social justice (etc – see the full list above).
* Explain any connections to health promotion – do the health practices link to health promotion – aspects of the models (e.g. Ottawa Charter – reorienting health services) or as part of health promotion campaigns that exist?

**Being perceptive in AS 91464 (Ethical Issue):**

* Select and explain the attitudes, values and beliefs of the key groups ‘for’ and ‘against’ as supported by NZ evidence (not just individuals, but groups).
* Explain the links to underlying ethical principles for each group’s perspective.
* Explain the key implications (personal, interpersonal and societal) of **current practice** as supported by NZ evidence (positive and negative; short-term and long-term). Depending on the ethical issue chosen, ‘[the slippery slope](http://www.bbc.co.uk/ethics/introduction/slipperyslope.shtml)’ should be explored.
* For the ‘for’ and ‘against’ views and for the implications, make links to the attitudes and values, especially social justice (see the full list above).
* Explain any links to health promotion that arise from the opposing perspectives or the implications of current practice.

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| Notes/thoughts/questions to ask… |