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Scholarship 2025

Health and Physical Education 93501

SCHOLARSHIP EXEMPLAR

Standing Tall: A Critical Analysis of Tall Poppy Syndrome and Youth Wellbeing in New Zealand

In New Zealand, youth mental health is in crisis. The Overview of Youth Health Briefing¹ identifies that "the area of greatest health need for young people is mental health. Although many young people experience good mental health, recent evidence shows that mental health of young people has declined rapidly over the past decade." Despite increased investment in wellbeing initiatives, rates of distress, anxiety and depression continue to rise among rangatahi (younger people), with 48% of mental illnesses emerging before age 18¹. The briefing¹ identifies cultural and social determinants of health as contributors to this trend, yet one key cultural force remains under recognised: Tall Poppy Syndrome (TPS). TPS refers to a social phenomenon where individuals who stand out, whether through achievement, or difference are 'cut down' by others. In New Zealand, TPS is often framed as an insignificant cultural trait, but its impact of youth wellbeing is far from benign. This paper argues that TPS is a culturally embedded barrier to youth mental health that is amplified by social media and that it disproportionately affects alienated groups.

TPS operates through informal social mechanisms: ridicule, exclusion, envy and backlash. These actions punish visibility and success, particularly in youth, a stage of life where identity and peer approval are vital. Erikson's theory of psychosocial development identifies "identity vs role confusion" as the central challenge of adolescence². TPS disrupts this process by discouraging expression and achievement, leading to self-shame, silencing and anxiety. Bandura's concept of self-

¹ <https://www.health.govt.nz/system/files/2024-08/h2024036868-briefing-overview-of-youth-health.pdf>

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https://books.google.co.nz/books/about/Identity_Youth_and_Crisis.html?id=nGqc6JxV0aQC&redir_esc=y

efficacy (the belief in one's ability to succeed) is also undermined when young people learn that standing out invites aggression rather than support³. In this way, TPS acts as a cultural inhibitor of resilience and self-worth.

The impacts of TPS are not limited to an individual's psychology, as they ripple across all pillars of Hauora in Dr Mason Durie's Te Whara Tapa Wha, the Maori model of all-round wellbeing⁴. TPS damages taha hinengaro (mental and emotional wellbeing) by fostering anxiety and self-doubt. It undermines taha wairua (spiritual wellbeing) by destroying purpose and identity. It hurts taha whanau (family and social wellbeing) by disrupting relationships and the sense of belonging. Even taha tinana (physical wellbeing) can be affected, as young people could withdraw from sport and other public activities to avoid scrutiny. TPS is not just a social irritant, but a systemic force that compromises youth wellbeing.

Social media intensifies the reach and impact of TPS. Apps like Instagram, TikTok, Snapchat and Facebook reward presence and visibility, but also expose young people to increased scrutiny. A single story or post can create immense praise or criticism, changing how youth see themselves and how they are seen by others. TPS thrives in this environment, as visibility becomes more of a risk than a reward. Symbolic interactionism helps explain this. Young people forge their identities through interactions with others and social media expands this and makes feedback quantifiable⁵. Cancel culture and cyberbullying are extreme contemporary expressions of TPS, often targeting people who show different opinions, exhibit success and deviate from the norm.

³ https://books.google.co.nz/books/about/Self_Efficacy.html?id=eJ-PN9g_o-EC&redir_esc=y

⁴ <https://www.health.govt.nz/maori-health/maori-health-models/te-whare-tapa-wha>

⁵ <https://www.simplypsychology.org/symbolic-interaction-theory.html>

TPS also interacts with equity and discrimination. Marginalized youth such as Māori, Pacific, rainbow, disabled or neurodiverse groups face a double barrier. When these young people succeed or share their identities, they are often met with even higher scrutiny and backlash. TPS acts as a mechanism to reinforce 'normal' people and actions, while punishing difference. Intersectionality theory helps enlighten this dynamic, as a Māori student who excels in academics may face TPS for breaking stereotypes as well as for their achievement⁶. A 2025 Scoop News Report highlights that marginalized youth are disproportionately targeted by online hate, compounding the effect of TPS for these rangatahi⁷.

This paper is structured as follows. Sections one to three investigate the impact of TPS on youth mental health, how social media amplifies this and how TPS enforces inequity. Section four explores the historical context of TPS, differing views on this issue and potential solutions. Finally, section five provides a summary of the report and a future focus.

Section One: Youth Mental Health

The Overview of Youth Health Briefing¹ identifies mental health as the area of greatest need for young people in New Zealand. However, TPS remains underexamined as a cause for this. By using psychological theory, neuroscience, personal experience and other Health and Physical Education (HPE) frameworks, this section critically evaluates how TPS undermines youth mental health by

⁶ <https://oxford-review.com/the-oxford-review-dei-diversity-equity-and-inclusion-dictionary/intersectionality-theory-definition-and-explanation/>

⁷ <https://www.scoop.co.nz/stories/AK2312/S00407/netsafes-research-reveals-new-zealanders-escalating-negative-online-experiences-for-2023.htm>

disrupting self-efficacy, triggering maladaptive neuroplasticity and eroding holistic wellbeing⁸.

Self-Efficacy

Albert Bandura's theory of self-efficacy is key to understanding youth mental health⁹. Self-efficacy is an individual's belief in their ability to succeed. For adolescents, self-efficacy is a psychological engine that influences motivation, persistence, emotions and resilience.

Bandura identified four main sources of self-efficacy

- Mastery experiences: Succeeding at a task builds self-efficacy, while failure erodes it.
- Vicarious experiences: Seeing others succeed can build belief in the observer.
- Social persuasion: Encouragement from peers reinforces belief in capability.
- Emotional States: Positive emotion promote self-efficacy while stress and anxiety can lower it.

TPS can undermine all these sources of self-efficacy. Firstly, TPS undermines mastery as achievement is met with ridicule and mastery can become a liability. Rangatahi who succeed are 'cut down' through sarcasm, exclusion or backlash. This teaches them that success invites punishment not pride. Over time, they may avoid challenges, fearing social backlash as well as failure. Secondly, vicarious experience relies on role models and peer success. However, TPS discourages this as high achieving youth downplay their success to avoid scrutiny. Because of this, young people have fewer examples of success as the message becomes don't stand out,

⁸ <https://neuopraxis.com/resource/what-is-maladaptive-neuroplasticity/>

⁹ <https://www.simplypsychology.org/self-efficacy.html>

be average. Thirdly, social persuasion is especially powerful in youth, where peer and teacher feedback can shape identity. TPS reverses this. Instead of encouragement, youth receive sarcasm and ridicule. These messages ruin belief and reinforce self-doubt. Finally, TPS causes anxiety and shame. These are emotional states that sabotage self-efficacy. When visibility becomes a threat, the brain responds with stress. This causes avoidance and withdrawal. Adolescents are especially vulnerable to TPS because their self-efficacy is still forming. Unlike adults, they lack a stable sense of identity and are highly sensitive to social feedback. Research shows that adolescents with low self-efficacy are more likely to develop anxiety and depression¹⁰.

In my own experience, TPS has eroded my self-efficacy. In year 12, I won an award for passing NCEA level 2 with excellence before external exams. After this, several people told me to stop being a “try-hard” and that I should “get a life”. Consequently, I stopped showing my academic success and started pretending to not care. TPS had taught me that being successful was dangerous and socially unacceptable. This was not my failure, but the failure of the culture and environment that I live in. Bandura emphasized that self-efficacy is shaped by context and in New Zealand, that context is hostile to success and growth⁹.

Neuroplasticity and the Brain

Adolescence is a period of immense neuroplasticity, where the brain constantly rewires itself¹¹. Because of this, TPS does not just affect beliefs in youth, but physically reshapes their brains. Neuroplasticity allows for learning, growth and

¹⁰ <https://www.frontiersin.org/journals/psychology/articles/10.3389/fpsyg.2024.1419920/full>

¹¹ <https://pmc.ncbi.nlm.nih.gov/articles/PMC7013153/>

emotional development, but it also makes young people vulnerable to negative experiences like TPS.

Through stress and social rejection, TPS can activate the hypothalamic-pituitary-



adrenal-axis (HPA)¹². This mainly results in the release of cortisol, the stress hormone that prepares the body for danger. While this response can be helpful in short bursts, chronic activation

can lead to disrupted sleep patterns, compromised cognition and lead to anxiety¹³.

Furthermore, stress is known to lower hippocampal volume¹⁴. This is linked to memory and emotional regulation in youth¹⁵. Therefore, young people experiencing TPS may show reduced levels of hippocampal volume, inhibiting their ability to learn. By creating fear of rejection and visibility, TPS can help develop a biochemical environment of stress that can negatively affect the brain health of adolescents.

Social Rejection Sensitivity and Interpretation Bias

The effects of TPS can also be understood through Social Rejection Sensitivity (SRS) and Interpretation Bias Theory (IB). SRS refers to an individual's intense emotional response to being rejected, often developed through repeated negative social experiences¹⁶. Adolescents with high SRS interpret neutral feedback as hostile, where a joke could become a criticism. TPS amplifies SRS by making

¹² <https://www.simplypsychology.org/hypothalamic-pituitary-adrenal-axis.html>

¹³ <https://www.nature.com/articles/nrn2639>

¹⁴ <https://pmc.ncbi.nlm.nih.gov/articles/PMC4561403/>

¹⁵ <https://pmc.ncbi.nlm.nih.gov/articles/PMC9313816/>

¹⁶ <https://www.psychologytoday.com/us/blog/the-psyche-pulse/202407/rejection-sensitivity-signs-causes-and-coping-strategies?msockid=3314b7b3e76562a23725a40fe67b6387>

rejection socially acceptable and encouraged. IB explains how our preexisting beliefs can influence how we interpret information and events around us¹⁷. TPS may cause youth to expect criticism even when it isn't there. This bias may reinforce anxiety and self-exclusion. These psychological frameworks demonstrate how youth expect scrutiny, changing how they view themselves.

The Effect of Tall Poppy Syndrome on Hauora

Even though TPS has the biggest impact on mental health, it can still impact Hauora holistically.

- Taha hinegaro (mental and emotional wellbeing): TPS fosters anxiety and self-doubt because young people learn that success invites ridicule. This causes them to conceal their thoughts, mute their achievements and internalise shame, compromising emotional health and contributing to chronic stress.
- Taha wairua (spiritual wellbeing): Adolescents who feel punished for standing out may question their values, lose their passion and lose sight of their personal meaning, eroding purpose and identity.
- Taha whanau (social wellbeing): Through peer envy and ridicule, TPS can create mistrust between friends and groups. Due to this, young people may withdraw from friendships and avoid group activities causing isolation.
- Taha tinana (physical wellbeing): TPS can lead to withdrawal from sport and physical activity due fear of scrutiny. Lower levels of exercise can also damage sleep quality and perception of an individual's body image¹⁸. Over

¹⁷ <https://fiveable.me/key-terms/cognitive-psychology/interpretation-bias>

¹⁸ <https://health.clevelandclinic.org/how-exercise-affects-your-sleep>

time this can contribute to a rise in anxiety and further damage to youth mental health, demonstrating the interdependence of Hauora¹⁹.

The Socio-Ecological Perspective and Health Promotion

One key Health and Physical Education (HPE) concept negatively affected by TPS is the socio-ecological perspective²⁰. The socio-ecological perspective encourages students to understand how personal, interpersonal, community and societal factors influence wellbeing²¹. TPS functions on all four of these levels.



- Personal: TPS leads to self-censorship, internal shame and emotional suppression. Youth may avoid leadership or excellence to protect themselves from backlash.
- Interpersonal: TPS operates through peer exclusion, sarcasm and ridicule. This can

damage relationships and create unsafe social environments, encouraging youth to blend in.

- Community: TPS can discourage youth from participating in local clubs and volunteering for leadership roles, increasing feelings of isolation.
- Societal: TPS is considered normal in New Zealand culture, in effect making humility equal to invisibility. Media and cultural norms reinforce the idea that standing out is arrogant and disruptive.

¹⁹ <https://www.sleepfoundation.org/mental-health/anxiety-and-sleep>

²⁰ <https://www.ebsco.com/research-starters/environmental-sciences/social-ecological-model>

²¹ Graphic representation: <https://www.slideserve.com/coralia/prevention-principles-addressing-risk-and-protective-factors>

TPS is also incompatible with health promotion theories such as the social cognitive theory, which highlights the role of social influences, self-efficacy and observational learning in shaping healthy behaviours²². TPS prevents youth from embracing these behaviours by discouraging visibility, reducing participation and punishing success. This in turn reduces self-efficacy and role models, as explained earlier. TPS is a perfect example of a socio-cultural barrier to wellbeing

Section Summary

TPS is a culturally embedded barrier to youth mental health in New Zealand. It undermines self-efficacy, rewires the brain through neuroplasticity and reshapes emotional development through social rejection sensitivity and interpretation bias. TPS fragments Hauora and contradicts HPE principles.

Section Two: Social Media as an Amplifier of Tall Poppy Syndrome

In the digital age, social media has become the primary source for adolescent identity formation, interaction and public visibility. While platforms like Instagram, TikTok, Snapchat and Facebook create opportunities for connection and expression, they also pose risks, particularly for young people navigating the already fragile life stage of adolescence. The Overview of Youth Health Briefing¹ identifies social media as a key issue facing young people today. This section of the paper argues that social media does not merely reflect TPS but amplifies it and the effect it has on youth wellbeing. Through algorithms, symbolic interaction and cancel culture, social media intensifies the scrutiny, jealousy and backlash of TPS, making it more invasive and psychologically harmful to rangatahi.

²² <https://pressbooks.uwf.edu/populationhealthnursing/chapter/3-2-health-promotion-theories/>

The Algorithm

Social media platforms are built on algorithms that reward visibility. Posts that generate engagement, likes, comments or shares are promoted to more people. For young people, this creates a high stakes environment where visibility is both a risk and a goal. With these platforms, the more visible a young person becomes, the more exposed they are to judgment and backlash. This process aligns with the core concept of TPS which is to punish those who stand out. Offline, TPS is limited to a classroom or social circle. However, online its reach is exponential. A single post has the potential to reach hundreds of thousands of people within hours. This magnifies the opportunity for ridicule and jealousy.

A 2025 report by the Public Health Communication Centre (PHCC) states that social media use is “nearly universal among adolescents in Aotearoa” and that it contributes to “depression, anxiety, psychological distress, sleep disruption and low self-esteem”²³. While the report appreciates some benefits of social media, such as connection with like-minded people, it says that the “benefits are greatly outweighed by the risks for many young people, especially those under 16, who are developmentally more vulnerable.”

Symbolic Interactionism

Symbolic interactionism is a sociological theory that explains how people create and interpret shared meanings and symbols through social interaction²⁴. On social media, every post, like and comment becomes symbolic. Youth design their digital presence in response to how they believe others will perceive them. This aligns with

²³ <https://www.phcc.org.nz/briefing/evidence-supports-need-protect-adolescents-social-media-harms>

²⁴ <https://www.simplypsychology.org/symbolic-interaction-theory.html>

Cooley's concept of 'looking glass self', where we form ourselves based on how we believe others will see us²⁵. On social media, this becomes quantifiable through likes, comments and views indicating approval or rejection. For rangatahi who are still developing their identities, this links their self-worth to online acceptance.

TPS is massive in this environment. When young people post about their achievements, they are sharing themselves with the public. If their achievements are seen as too successful, it may create a TPS response through sarcastic comments or unfollows. This can damage rangatahi's self-esteem and mental health as discussed in section one.

Social Comparison

Proposed by Leon Festinger, social comparison theory suggests that people assess themselves by evaluating how they compare to others²⁶. Social media intensifies this by providing a constant stream of curated content. Adolescents compare themselves to peers, influencers, celebrities and so-called perfect online personalities. Social media acts as a digital social mirror shaping youth identity, social comparison and viewer feedback. Research shows that adolescents are more likely to engage in social comparison on social media platforms²⁷. This also showed that upwards comparison is a significant risk factor for depressive symptoms. However, lateral and downwards comparisons were much more common.

Cancel Culture

Cancel Culture is an extreme expression of TPS online. It refers to ridicule and removal of support for a particular group or individual whose actions or opinions are

²⁵ <https://www.simplypsychology.org/charles-cooleys-looking-glass-self.html>

²⁶ <https://dictionary.apa.org/social-comparison-theory>

²⁷ <https://link.springer.com/article/10.1007/s42761-024-00240-6>

deemed unacceptable²⁸. While often considered a tool for accountability, cancel culture can also function as a form of digital mobbing especially for adolescents. Teens who are cancelled may experience social isolation, anxiety, depression and a loss of self-worth. Unlike adult cancel culture that targets public figures, youth cancel culture plays out in a more personal way. In my personal experience, when the Palestine-Israel war first broke out, I witnessed the online cancelling and exclusion of my friends who were overly supportive of Palestine. Now, my friends who are overly supportive of Israel are the ones getting cancelled. In both cases, the young people are not just criticised, but they are punished for standing out and being different.

Impacts on Mental Health and Health and Physical Education Concepts.

The psychological impacts of TPS examined in section one are amplified by social media. Adolescents may experience identity anxiety from fear of being either too much or too little on online platforms, leading to constant self-monitoring. They may become exhausted due to the pressure of maintaining a fake personality. The PHCC report found that psychological distress among 18-24 year olds had more than quadrupled between 2011 and 2023²³. "While multiple factors contribute to this trend, mounting research points to social media as a potentially significant driver."

Through all the mechanisms explained in this section, TPS also amplifies the undermining of HPE concepts explained in section one. After online ridicule or backlash, rangatahi are more likely to internalise shame, suppress their emotions or be excluded. Furthermore, online platforms allow their community and general society to 'cut' them down as well as their friends. The New Zealand curriculum also

²⁸<https://www.britannica.com/procon/cancel-culture-debate>

promotes digital literacy which is the ability to evaluate online content²⁹. TPS makes this more difficult by making digital spaces less safe.

Section Summary

Through algorithmic visibility, symbolic interactionism, social comparison and cancel culture, social media intensifies the scrutiny, jealousy and backlash that define TPS on youth. For rangatahi, this makes visibility both valuable and threatening.

Section Three: Equity and Discrimination

This section argues that TPS functions as a discrimination mechanism disproportionately targeting marginalized youth to reinforce norms. Cultural hegemony, intersectionality theory and social norm theory are employed to critically evaluate how TPS affects race, gender, sexuality, disability and neurodiversity inequity

Intersectionality

Intersectionality theory is a framework developed by Kimberle Crenshaw³⁰. It explains how different forms of discrimination such as race, gender, sexuality and disabilities interact and overlap³¹. The interconnection of these factors is what creates privilege and oppression. In relation to this, TPS causes minority youth groups to face a double burden, where they are punished for both their achievement and breaking stereotypes. For example, an Asian athlete excelling at rugby will face TPS backlash for playing a non-Asian sport. This punishes them both for their

²⁹ <https://newzealandcurriculum.tahurangi.education.govt.nz/new-zealand-curriculum/5637175326.p>

³⁰ Graphic representation: <https://diagramfixemirb.z21.web.core.windows.net/intersectionality-venn-diagram-theory.html>

³¹ <https://oxford-review.com/the-oxford-review-dei-diversity-equity-and-inclusion-dictionary/intersectionality-theory-definition-and-explanation/>



success and their failure to conform to traditional norms. Furthermore, a young LGBTQ+ person could be targeted for standing too proud and tall as well as their gender expression. In both examples, TPS

is about pushing conformity not jealousy.

The Overview of Youth Health Briefing¹ confirms that Māori, Pacific, rainbow, disabled and neurodiverse youth experience disproportionately high rates of psychological distress and mental health issues. While the briefing mainly blames systemic inequalities for this, TPS contributes by amplifying scrutiny of these inequalities and further punishing difference.

Cultural Hegemony

TPS also reinforces cultural hegemony, which is the dominance of one culture's values and expectations over others³². In New Zealand this presents itself through Eurocentric standards. TPS is subconsciously used as a tool to maintain European dominance. A personal example of this was seeing my Asian friends stereotyped as "unathletic" and "just good at math". This reinforces the idea that certain spaces and certain types of success belong to certain cultural groups. TPS also affects self-expression. A confident Pasifika student may be seen as "cocky". A young neurodiverse person trying to be better and ask for help could be labelled as "difficult". Through these reactions, TPS reminds people to know their place, supporting cultural hierarchies.

³² <https://oxford-review.com/the-oxford-review-dei-diversity-equity-and-inclusion-dictionary/cultural-hegemony-definition-and-explanation/>

Social Norm Theory

Social norms are informal rules that govern behaviour in society. There are two types of norms, descriptive (what most people do) and injunctive (what most people approve or disapprove of)³³. These norms underline what is considered acceptable behaviour. When someone breaks these rules, by standing out or succeeding they can be socially punished. One of these punishments is TPS, explaining why it is so effective at enforcing conformity to stereotypes and norms.

Marginalized youth face even narrower norms. Disabled kids are often expected to be quiet and grateful, while rainbow youth are only tolerated if they avoid confrontation. When these students express themselves, TPS asserts itself because they are challenging norms. Because of this, marginalized youth learn to self-censor, downplay their achievements and avoid public roles. As discussed in section one, this erodes self-efficacy and contributes to emotional distress. This further reinforces inequity, when only certain groups feel safe standing tall, success becomes categorized by social permission not ability.

Schools as a Breeding Ground

Schools are key locations where TPS interacts with equity. TPS is often embedded in outdated teacher language such as “don’t get a big head”. TPS is also prevalent in peer dynamics through the mocking of high achievers (as discussed in section one) and social rewarding of conformity over creativity and difference. TPS contributes to this by punishing these students for visibility that challenges stereotypes. For

³³ <https://plato.stanford.edu/entries/social-norms/>

example, a Māori student who excels in science may be seen as “showing off”, while an Asian student in Kapa Haka may be told to get “back in their lane”

Internalized Oppression

One of the most subtle effects of TPS is internalised oppression. This occurs when marginalised individuals adopt negative beliefs about themselves due to repeated social messaging³⁴. For youth victims of TPS this could present itself as believing they are not meant to be leaders, feeling guilty for being proud and avoiding success to maintain peer acceptance. This internalisation of negative beliefs is particularly damaging during adolescence when an individual's identity is still forming. Because of this, TPS shapes identity in a way that limits aspiration for marginalized youth, where they choose safety or invisibility over success. The cost of this is lost potential, diminished wellbeing and perpetuated inequity.

TPS is often defended as a way to promote humility and egalitarianism³⁵. But this assumes that all ambition is ego and all success is arrogance. It fails to account for who gets to be visible without punishment. For dominant groups, TPS may be a mild annoyance. However, for marginalised youth, it is a structural barrier. It tells them to mute their success, that ambition is dangerous and that difference must be hidden.

Section Summary

TPS is a mechanism of exclusion, that disproportionately affects marginalized youth by punishing success, visibility and reinforcing stereotypes to maintain the cultural hierarchy. Through intersectionality, cultural hegemony and social norm theory we

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https://www.researchgate.net/publication/281426326_Review_of_Internalized_Oppression_The_Psychology_of_Marginalized_Groups

³⁵ <https://www.britannica.com/topic/egalitarianism>

see how TPS acts as a cultural police that undermines equity, wellbeing and aspiration for minority youth groups. In this section we see how TPS amplifies systemic inequity by targeting those who stand tall while different.

Section Four:

TPS is often described as a harmless quirk of New Zealand culture rooted in achieving humility and egalitarianism. However, this report has shown that TPS has much more significant effects. It is a cultural force and systemic barrier that compromises the mental health of young people, is amplified through social media and disproportionately targets marginalized youth. This section will critically evaluate the historical context of TPS and differing perspectives on the issue. It will also summarize key findings from the report thus far and propose strategies and potential changes to the Overview of Youth Health Briefing¹ document to address the issue of TPS as a cultural determinant of youth wellbeing.

TPS gains its name from ancient Roman literature³⁶. The final king of Rome had to solve the problem of some men standing out above others for their abilities. The king then took these men to his garden and chopped off the heads of all the tallest poppies with his stick.

Institutional, Government and Societal Perspectives

In recent years, New Zealand institutions have begun to recognise the corrosive impact of TPS on youth wellbeing, particularly in the context of “unacceptably high” anxiety, depression and suicide rates (Suicide Prevention Action Plan 2025-2029)³⁷. In response, certain institutions have supported initiatives that aim to shift cultural

³⁶ <https://ahnz.anarkivi.co.nz/tall-poppy-syndrome/>

³⁷ <https://www.health.govt.nz/system/files/2024-09/suicide+prevention+action+plan+for+2025%E2%80%932029-110924.pdf>

narratives away from TPS. A prominent example of this is E Tu Tangata, an initiative that has gained traction in schools and communities across New Zealand³⁸. The programme aims to achieve collective wellbeing and inclusion. Its three core values are “valuing yourself, coming together as a group and helping each other” These three principles directly oppose the isolation of TPS, by encouraging young people to celebrate each other's success rather than compete destructively. E Tu Tangata's integration into schools has increased its effectiveness³⁹. The Education and Innovation Trust (EPIT) collaborates with E Tu Tangata, increasing its reach across multiple sectors⁴⁰. This collaboration allows for the development of digital resources such as video modules for schools. This approach reflects a broader institutional shift towards addressing TPS. Rather than treating TPS as an isolated behavioural issue, the initiative argues that it is a symptom of deeper societal norms that must be unlearned. This strategy reflects a soft approach to social change. Rather than legislating against TPS, the initiative relies on a community led, values-driven movement to shift the national psyche. A strength of this perspective is that it respects the grassroots nature of cultural change. However, it also raises questions about accountability and scalability. Without formal change or mandates, this may be limited to communities already inclined towards positive adaptation. This uneven implementation may lead to an inequitable cultural change, benefiting some youth while others remain in a normalised TPS environments.

TPS is still notably absent from government language, suggesting a gap between institutions and policy makers. This is a significant gap as the main cause of youth mental distress is TPS, as discussed earlier in the report. If so, addressing it should

³⁸ <https://www.etutangata.nz/>

³⁹ <https://www.etutangata.nz/schools-section>

⁴⁰ <https://www.epit.org.nz/projects/addressing-tall-poppy-syndrome---e-tu-tangata>

be central to any national wellbeing strategy. Current solutions only target the effect (anxiety or depression) and not the root cause of TPS.

From a societal perspective, many view TPS as a harmful force that undermines youth mental health and ambition, some see it as harmless, or even a positive trait that preserves humility. This tension reflects the societal question, is TPS a social disease or a safeguard? Some celebrate TPS as part of the Kiwi way, that prevents hierarchy and individual elitism. People argue this idea creates a cultural flattening effect where success is only tolerated if it is modest and communal. In this perspective, TPS is not bullying or a barrier but balance. It prevents ego driven behaviour and reinforces social cohesion⁴¹. However, this perspective often overlooks the psychological toll TPS takes on young people. In high pressure environments such as schools, sports and social media, TPS presents itself in peer criticism, exclusion and internalised self-doubt. Youth who excel may downplay their achievements to avoid being targeted. This self-silencing is especially damaging during adolescence, as discussed through sections one to three. A 2022 University of Auckland study found that TPS contributed to increased rates of anxiety and depression⁴². A study by Jo Kirkwood and Lorraine Warren found that 10 of 11 entrepreneurs have experienced TPS⁴³. This shows how TPS is a national disease that disrupts innovation and punishes success. Opponents of TPS argue that it discourages young New Zealanders from pursuing excellence since excellence requires ambition and pride. They critique the sanitised view of TPS as a harmless

⁴¹ <https://theconversation.com/australia-and-new-zealand-are-plagued-by-tall-poppy-syndrome-but-would-a-cure-be-worse-than-the-disease-245355>

⁴² <https://www.auckland.ac.nz/en/news/2022/07/20/research-tall-poppy-syndrome-negatively-affects-nz-entrepreneurs.html>

⁴³ <https://www.auckland.ac.nz/en/news/2022/07/20/research-tall-poppy-syndrome-negatively-affects-nz-entrepreneurs.html>

trait, rephrasing it as a barrier to both personal growth and national competitiveness. However, this stance is not universally accepted, with some people arguing that this perspective reflects a view that prioritizes individual success over collective wellbeing. They caution against removing TPS without considering whether it may result in a culture of unchecked ego and inequality. They raise the question, can New Zealand celebrate success without losing its social cohesion? Rather than viewing achievement as individual, some movements are beginning to promote collective good and the idea that one person's success can also promote others⁴⁴. While not fully anti-TPS, these movements seek a balance that challenges the underlying concept of TPS that standing out is bad. The social perspective of TPS is far from singular. While some New Zealanders view it as a harmless cultural trait, other see it as a serious threat to youth wellbeing and national progress. This tension requires a deeper conversation about whether New Zealand wants to uphold values of humility or excellence.

The difference between the institutional and societal perspectives highlights the tension between organizational intent and cultural practice. While institutions are beginning to prioritise a future focus, social norms continue to punish visibility. This contradiction limits the success of wellbeing initiatives like E Tu Tangata, because they cannot thrive in a culture that undermines their purpose. Both commitments aim for fairness and inclusion, but they disagree on how these ideals should be expressed. The challenge for New Zealand is to align these opposing ideologies, allowing young people to stand tall together rather than cutting each other down.

Possible Solutions for TPS in New Zealand

⁴⁴ <https://theconversation.com/australia-and-new-zealand-are-plagued-by-tall-poppy-syndrome-but-would-a-cure-be-worse-than-the-disease-245355>

Across sections one to three, TPS has been shown to be more than a neutral cultural trait. It is a systemic barrier that changes youth identity and mental health for the worse, suppresses potential and reinforces cultural hierarchy and exclusion.

Section one shows that TPS contributes to a psychological environment where pride is punished and visibility is dangerous. This erodes youth self-efficacy or the belief in one's ability to succeed, which is key protector of mental health and motivation. TPS does this by undermining the four factors of Bandura's theory of self-efficacy⁹, mastery experiences, vicarious experiences, social persuasion and emotional states. Research confirms that adolescence is a period of intensified neuroplasticity, where repeated negative experiences influence long term brain developments. When internalised, TPS wires the brain towards anxiety and emotional suppression. Furthermore, TPS was shown to fragment Hauora and holistic wellbeing not just mental health.

Section two investigated how TPS, symbolic interactionism and cancel culture are amplified through social media and algorithms. Platforms reward visibility through increased engagement and making posts, but this comes at a cost. Rangatahi who stand out on these platforms are more likely to face increased backlash, ridicule and exclusion, exacerbating the effects of TPS on their mental wellbeing. Symbolic interactionism and Cooley's theory of "looking-glass self", explain how adolescents craft their identity through perceived social feedback whether positive or negative. Social media quantifies this feedback.

Section three explored how TPS disproportionately targets marginalized youth, reinforcing dominant norms and cultural hierarchy. This section reveals that TPS applies more pressure to Māori, Pacific, Asian, rainbow, disabled and neurodiverse

youth, aligning with intersectionality theory as overlapping identities shape levels of discrimination. In this way, TPS is a form of cultural gatekeeping, deciding who gets to succeed. This undermines the Overview of Youth Health Briefing¹, which calls for a system that supports all young people to thrive.

To meaningfully address TPS, the Overview of Youth Health Briefing must adapt. Firstly, the document should explicitly name TPS as a cultural determinant of health. TPS should be listed alongside racism and other forms of discrimination as a barrier to youth wellbeing. The current briefing mentions cultural pressures such as education, social (discrimination) and economic influences, demonstrating the relationship between the SPEECH factors and wellbeing. However, it fails to name TPS, a critical weakness given its widespread effect. Naming TPS as a barrier to youth wellbeing would allow schools, health providers and policy makers to address it in the same way as other systemic issues. This amendment would also tell rangatahi that their experiences are valid, shared by others and worthy of support. This would encourage young victims of TPS to seek help, reducing their internalised shame and mitigating the damages of TPS. Furthermore, the briefing discusses social media and peer pressure as some of the “biggest problems”. However, it must go further and address how cultural norms and peer pressures like, TPS, shape identity, wellbeing and create emotional suppression and withdrawal from activities. This is felt most strongly by high-achieving and marginalized youth, who fear being labelled for their actions and should be recognised as a public health concern. Specifically, this strategy recommends expanding the mental distress section to include TPS as a mental stressor, link TPS to emotional suppression, self-censorship and anxiety, and include TPS in national youth wellbeing surveys to collect meaningful data for reports such as the Overview of Youth Health Briefing¹.

Another strategy to address TPS is integrating it into the curriculum. The concept of TPS should be taught in the HPE curriculum as a socio-cultural barrier to wellbeing. This includes embedding the concept of TPS as a barrier to wellbeing into health promotion NCEA standards. Teaching students to recognise TPS and challenge its normalisation, will help to support peers who have been targeted. Including TPS in digital education, especially around cancel culture and social media will allow students to navigate its potential for increasing online harm. Training teachers to recognise signs of TPS and advocate for supportive classroom environments will foster success not suppression. This integration would empower students to detect TPS, resist its impacts and build a new culture of pride and support for success, not aggression. It would also realign the curriculum with the experiences of rangatahi.

A third strategy is to fund research and youth initiatives. The Briefing¹ should recommend TPS related research, especially for minority youth. Funding should also support youth led campaigns that challenge TPS and promote pride. This could include studies on the relationship between TPS and adolescent mental health, local and school youth councils planning anti-TPS strategies and events, and grants for student art and cultural projects that celebrate being proud and standing tall. This strategy helps to kickstart a cultural revolution against TPS from the societal group that is most affected by it. By changing the culture in New Zealand, this strategy will hopefully provide an environment for youth to flourish rather than be 'cut down'.

This strategy can also be implemented to support overall cultural change, through national campaigns. Public awareness groups and campaigns should promote anti-TPS messages, that success and visibility are strengths, not dangers. TPS should be challenged by stories, media and individuals in leadership roles. This could involve promoting youth success and voices in the national media, showcasing more

role models in education, sport and other endeavours, promoting pride as a source of wellbeing not a result of arrogance, and partnering with influencers to challenge and dismantle TPS. This cultural shift is essential otherwise any policy and curriculum reforms will be insignificant and undermined by social beliefs and norms.

Section Five: Summary and Final Thoughts

TPS is more than just a harmless cultural trait or a relic from our past. It is a deeply New Zealand social barrier that punishes success and visibility from 'standing too tall', especially among rangatahi who are still developing their identity and belonging. TPS damages youth development, becomes amplified on social media and pushes inequity by forcing conformity to stereotypes. It undermines self-efficacy, fragments Hauora and contributes to the wellbeing issues laid out in the Overview of Youth Health Briefing¹. While TPS may have originated as a cultural safeguard against arrogance, it now serves as a barrier to youth mental health and equity.

TPS unfairly targets marginalized youth, such as Māori, Pacific, Asian, rainbow, disabled and neurodiverse youth when they succeed in ways that challenge New Zealand's hegemony and expected norms. These individuals are punished both for standing too tall and doing so while being different. TPS has become a form of cultural policing, deciding who has the right to lead, who can succeed and who must stay down. This report has also examined how social media amplifies the effect of TPS especially on youth mental health. Apps that were designed to promote visibility and confidence become dangerous in a TPS culture. Algorithms designed to spread successful posts can create widespread scrutiny and TPS turns into a weaponised form of digital mobbing. For adolescents who are still forming their identity, sense of self and undergoing brain development this creates an online environment of fear,

shame and emotional exhaustion, multiplying the effect these negative emotions have on youth mental health.

Although this report has answered many questions surrounding TPS, some remain unanswered. How do we preserve the value of humility without punishing pride? How does TPS lead to diminishing work ethic due to lower ambition? Is TPS associated with lower economic gains?

To make a meaningful difference, we must prevent every form of TPS. This requires a cultural shift in how we think about success and identity. While the strategies mentioned above may help to do this, TPS is deeply embedded in New Zealand's culture, and it will take a generational shift to change this. We need to move away from a culture of containment and holding back to a culture of celebration, one that accepts pride and success, one that sees difference as a strength and not a threat.

While some argue that TPS protects social cohesion, keeps egos in check and prevents toxic elitism, it fails to account for the uneven application of TPS and the disproportionate effect it has on marginalized groups. This also ignores the fact that humility, pride and success are not mutually exclusive. It is possible to be proud without being arrogant and egotistical, to succeed without diminishing others and to lead without dominating. The problem is not pride, success and ambition, but a failure to distinguish these from superiority, punishing both indiscriminately. Because TPS is so deeply ingrained in our cultural DNA, progress will be slow. It will require a sustained effort, intergenerational change and a willingness to confront uncomfortable truths about who we silence and why. It will require a shift in how we educate our rangatahi to prevent continued indoctrination into TPS. A focus on early intervention by challenging TPS in the HPE curriculum is crucial. As discussed in the

report', adolescents are the most adaptable people, meaning that these years are when the most significant changes to cultural behaviour can occur. However, because of this adaptability youth are also more likely to embrace TPS.

TPS is not just about tall poppies. It is about the kind of garden we want to grow. Do we want a culture where all people are trimmed to the same height, uniform and safe? Or do we want a culture where excellence is allowed to blossom, where difference is celebrated and where every young person knows they are allowed to grow tall? This is not just a question for institutions and policy makers, it is a question for all of us in the New Zealand garden. TPS operates through informal interactions with peers, families and society, thus we must strive towards a collective goal for a future where pride is protected not punished.

While this report has focused on TPS in the context of youth wellbeing, many of the ideas explored also apply more broadly. However, because adolescence is a critical time for identity formation and because of my personal experiences, I have chosen to focus this report on youth. Furthermore, rangatahi are not only the most vulnerable to TPS, they are also the most powerful individuals to drive change. With collective effort, cultural adaptation and policy change, we can remove the barriers that TPS creates. This will allow us to build a society where standing tall is not a risk, but a right. We can also ensure that every young person in New Zealand, regardless of their background, identity or ambition knows that they are not just allowed to shine but are expected to do so.

Scholarship

Subject: Health and Physical Education

Standard: 93501

Total score: 15

Q	Score	Marker commentary
Application of knowledge	05	The report engages with a wide range of theories and concepts in its critical evaluation of Tall Poppy Syndrome and its impact on youth mental wellbeing. Evidence from the Overview of Youth Health document is used appropriately to support the discussion. While this breadth demonstrates strong awareness of relevant ideas, the inclusion of numerous theories at times limits analytical depth. Key concepts are revisited later in the report, showing developing integration, however, more deliberate selectivity and clearer synthesis of fewer theories would have strengthened the Application of Knowledge. Section Four extends this integration by linking additional and relevant perspectives to concepts introduced earlier. Underlying HPE concepts are generally incorporated coherently, though the analysis would benefit from more explicit reference to evidence rather than reliance on personal reflection. The report concludes with coherent, relevant and informed recommendations for future action. These could be further strengthened through more explicit alignment with health promotion theory to reinforce the justification for the proposed strategies.
Critical thinking	05	Sustained critical thinking is demonstrated in the report's analysis of how Tall Poppy Syndrome influences youth wellbeing. It provides a thoughtful examination of the role of social media in amplifying the issue and considers the resulting implications for young people's mental health. The report also critiques aspects of New Zealand's Tall Poppy culture, offering insight into the development of the issue, its impacts, and potential responses. The discussion shows evidence of synthesising Tall Poppy Syndrome with a range of theoretical perspectives, including core HPE concepts. However, like the pattern identified in Application of Knowledge, the wide scope of ideas occasionally constrains the depth of analysis, with some arguments not fully developed or substantiated. More deliberate selection and clearer linking of evidence to claims, alongside stronger justification of conclusions, would enhance the rigour of the argument.

Communication	05	The selected wellbeing issue for critical evaluation is clearly identified, and the report refers early on to one of the nominated documents. The organisation of the report, supported by sections, headings, and subheadings, provides a clear logical structure. At times, however, the use of multiple subheadings segments the discussion in a way that interrupts the flow of the argument. Concise summaries at the end of each section support coherence by signalling progression through the analysis. Referenced evidence is used throughout to substantiate key points, and personal reflections are integrated in a way that enhances contextual understanding. While the preferred footnoting style has been applied, the footnotes could be more academically formatted. Overall, the report maintains a sustained and coherent focus on Tall Poppy Syndrome and its connection to youth mental wellbeing, ensuring the discussion remains aligned with the selected issue.
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