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Helping schools to promote healthy educational environments as new initiatives for school based management: the Hong Kong Healthy Schools Award Scheme

As early as 1950, the World Health Organization (WHO) noted that "to learn effectively, children need good health" (WHO, 1995a). Health is defined as a state of complete physical, mental and social well-being and not merely the absence of disease. There is abundant evidence to demonstrate that the health of children and adolescents constitutes a major factor affecting their capacity to learn (Allensworth, 1997), and students with health compromising behaviour are more likely to feel alienated from school and to value continued education less than their peers (Nutbeam, 1993). The school environment has a direct impact on the self-esteem, educational achievement and health of its pupils and staff (Hopkins, 1987; Sammons, 1994). The future health of school children and late adulthood is critically linked to the health-related behaviours that they choose to adopt early on in life, and the leading causes of death, particularly premature death, are closely linked to these behaviours. Hence, 50% of risk factors leading to premature death can be prevented. From a financial investment perspective, we can save a lot of societal cost if we can strengthen health education to promote positive choices and health behaviours before damaging behaviours are initiated or become ingrained.

It has been suggested that the traditional, knowledge-based approach alone is insufficient to help make healthy choices and change behaviours (Kishchuk, 1990; Bellew, 1991; Klepp, 1994). A school

Prof. Albert Lee Director, Centre for Health Education and Health Promotion The Chinese University of Hong Kong Email: alee@cuhk.edu.hk health education programme must combine health education with other health-promoting initiatives in school, and involve parents and families (Seffrin, 1990; Young, 1993; Tannahill, 1993, Denman, 1994) and the community at large (Aaro, 1983; Tambini, 1985). Its target should cover a comprehensive, co-ordinated, cross-curricular programme throughout the school career (Denman, 1994); and encourage young people to be involved in all decision-making processes relating to health (WHO, 1993; Thomas, 1998). Programme experiences and research findings from all regions in the world (WHO, 1999) suggest that adolescents need accurate information about their health and development, life skills to avoid risk-taking behaviour, counselling, acceptable and affordable health services, and safe and supportive environment.

The concept of health promoting school was first identified at a World Health Organization conference in the early eighties and has been advocated as an effective approach to promote health in schools (Young, 1989; Smith, 1992; Nutbeam, 1987). It embodies a holistic, whole school approach to personal and community health promotion in which a broad health education curriculum is supported by the environment and ethos of the school (Parsons, 1996). Such a comprehensive approach has been widely accepted by school health professionals as an effective and important method of implementing school health (Kolbe, 1986; Pigg, 1989; Seffrin, 1992; Nutbeam, 1992). It has been suggested that well developed school health promotion programmes are more effective in encouraging children to adopt health enhancing behaviours and in reducing health compromising behaviours (Hawkins, 1990; McKane, 1990; Green, 1991). Rothman found that the overall cost-benefit ratio of an exemplary Health Promoting School

Programme to be 13.8, which compares very favourably with adult-based programmes, 3.4, and other programmes for children of a more biomedical nature, e.g. 11.1 for whooping cough vaccination (1994). Promoting health during adolescence is one of the most important investments that any society can make.

Health promoting schools practices and school based management

School Based Management (SBM) is an essential feature in local education reform. Many schools are adopting SBM to enhance productivity and learning (Cohen, 1988; David, 1989). It requires the involvement of all the six segments of a school's community: the headmaster, teachers, support staff, parents, students and other community members. This will enable developing educational programmes and initiatives to meet the needs of students.

The concept of the Health Promoting School as a new initiative in school based management would move beyond individual behavioural change to consider organisational structural change such as improving the school's physical and social environment, its curricula, teaching and learning methods. This will enable school effectiveness to include consideration of social/affective outcomes such as attitudes and behaviours of students rather than just focusing on academic achievement (Mortimore et al., 1988). Therefore, the initiatives will create an effective school generally (Beare, 1989).

To promote and implement the concept of health promoting school, Healthy Schools Award schemes are very popular among European countries (Rogers, 1998). They provide a structured framework for development as well as a system for monitoring progress and recognition of achievement (Rogers, 1998). Positive changes shown to have been achieved through award schemes include children's health related behaviour and the culture and organisation of the school (Moon, 1999).

In Hong Kong, the concept of the health promoting school has only been adopted by a few schools, and is making progress with many challenges (Lee et al., 2000, Lee et al., 2001). The Centre for Health Education and Health Promotion at The Chinese University of Hong Kong (CUHK) has offered a training course in the format of University Professional Diploma in Health Promotion and Health Education. Encouraging schools in Hong Kong to adopt a comprehensive approach to health promotion is still not easy given the current climate of overemphasis on public examination results. The gap between practice and "what ought to be" is greater for health education than for most other areas in the school curriculum (Seffrin, 1992). The proposed scheme is the first comprehensive programme to facilitate the development of school-based management and health promoting school practices. The scheme has gained the endorsement from the World Health Organization (WHO) Western Pacific Region. The WHO and Education Department together with the Centre for Health Education and Health Promotion of The Chinese University of Hong Kong will be the awarding bodies. This is the first territory wide "Healthy Schools" movement to have gained recognition from the WHO Western Pacific Region.

Vision and objectives of the Hong Kong Healthy Schools Award Scheme

The Hong Kong Healthy Schools Award Scheme builds on the concept of health promoting schools to encourage educational achievement, better health and emotional well-being; thereby supporting pupils in improving the quality of their lives. It also aims to promote staff development, parental education, involvement of whole school community, and linkage with different

*These might not be direct consequences of HPS, but they serve to demonstrate the feasibility of new approaches which are applicable to other subjects as well.

stakeholders so as to improve the health and well-being of the pupils, parents and staff, and the community at large.

The objectives of the award scheme add values in a number of ways:

a. For schools

- Improve students' performance in academic and non-academic areas;
- · Positively promotes the school's ethos;
- Changes curriculum content from mono-disciplinary to inter-disciplinary*;
- Pedagogy becomes discovery learning rather than didactic learning*;
- Structure of teaching/learning becomes flexible rather than fixed structural units*;
- Involvement of the whole school community and strengthens links among parents, principals, governors, school staff (teaching and non-teaching), pupils and community partners;
- Greater support and professional development for staff*;
- Teachers become more interdependent (better team-spirit)*;
- Enhance reputation and status through recognition under the Award Scheme;
- Gain opportunities to link with and share good practice with other schools (forming a Quality Circle on Health Promotion and Healthy Habits).

b. For pupils

- Achieve better academic results within a setting that supports their health and well-being;
- More confident, more motivated and creative and have the skills and information to make important life and health choices;
- Gain access to a wide range of support services and adds value to their personal and social development;
- Learn to make decisions in adopting healthy lifestyles, hence assuming greater control of their own future;
- · Opportunities for parental education.

c. For the community

- Work alongside schools in reducing social exclusion, disadvantage and disaffection;
- Grasp the interest and contribution of young people and help them becoming good citizens;
- Form closer ties with the schools to provide support;
- Opportunities for community education.

Methodology

Planning and design

It is planned that initially 50 schools (tentatively 24 secondary, 24 primary and 2 special schools) will participate in the scheme during the period of 2001-2, directly affecting about 40,000 pupils and 1,500 school staff, and 4,000 families. These schools will be mainly selected from those schools with trained school health educators, i.e., graduates/course participants of CUHK Professional Diploma in Health Promotion and Health Education; and strong commitment from school administration. During the period of 2002-2004, another 50 schools will enrol in the scheme. These 50 schools will be a more heterogeneous group aiming to cover different parts of Hong Kong.

The Award Scheme covers six key areas (health policy, physical and social environments, community relationships, personal health skills and health services) adapted from the World Health Organization's Guidelines (WHO, 1995b). Each key area has a number of components with targets for the school to achieve. The components cover school-based changes and initiatives as well as involvement of parents, school management committees and community, and also teacher training.

How schools work towards an award

1. Planning within individual schools A training programme on development planning will be held at the start of the project with two to four representatives from each participating school. This is to help schools appreciate the breadth of possible action covered by the scheme and consolidate their thoughts for appropriate action. In each school, the project team will meet with the co-ordinating group to identify at least ten areas of potential action. The school will then prioritise the areas so that work can begin on a manageable number, usually four to five. Within their plans, they will also be required to estimate the financial cost and resources. The next phase is to find a starting point for each school and develop future evaluation process.

2. Support and working towards the award At the initial stage, training on handling such sensitive issues as working with parents and community and dealing with the media will be provided. A member of the project team will visit each school at least once per term to offer advice and support and to obtain detailed information on each of the activities for evaluation. The amount of support given will vary from area to area according to the needs of the schools. In addition, events will be held to allow participating schools to share ideas and good practice and talk to other schools about emerging issues. Examples of good practice will be put on Hong Kong Education City Net (www.hkedcity.net) and the newsletter to make it accessible to wider audience. Trained school educators (graduates/course participants of the CUHK Professional Diploma Course in Health Education) from other schools not participating in the scheme would have the opportunity to observe and help out for their continuing professional development.

3. The award system

Three levels of award are available -bronze, silver and gold. Each will be obtained by amassing a given number of points. For a particular level of award, the school must have achieved the required number of points on relevant items. Different components will provide different points. Members from the project team will visit the school and validate how far a school has achieved its targets. The targets are mainly health promotion actions and health promotion outcomes, i.e. the process and impact. Once the school demonstrates that it has fulfilled the requirements, the appropriate award will be granted. A school can progress up the levels until finally they achieve the gold award.

A certificate will be jointly validated by The Chinese University of Hong Kong, The Education Department of Hong Kong SAR Government, and the World Health Organization. For quality control, each school will hold an award for no longer than 3 years at the end of which they will have to be re-assessed.

Expected outcomes

1. Health Promoting School (HPS) pupils will develop better academic achievements, be more creative and self-confident, with increased awareness and knowledge of health issues, and equipped with the skills necessary to practice healthy habits.

- HPS staff will achieve one of their missions of meeting the health needs of the pupils. They will also benefit from keeping their families healthy and happy.
- 3. HPS headmasters and administrators will make health a key consideration in school improvement plans, provide health education to ensure all pupils have the knowledge and skills to lead healthy lives and promote the concept of collaboration and welcome others to work together for the pupils.
- HPS staff will make school site a safe and healthy environment for pleasurable learning and working.
- HPS will have a good ethos which is concerned with quality and provide a good model for others.
- HPS will increase community awareness of how to educate young people e.g. smoking, drug abuse in order to complement other health initiatives.

Evaluation

A combination of quantitative studies and summative assessment will be carried out to capture measurable outcomes as well as monitoring changes in school. The target is to evaluate the process and impact of the Scheme on health education and health promotion activities, organisation and function of the school, learning gains of pupils on health-related knowledge, as well as their attitudes and behaviours.

Implication of the scheme and future development

The scheme can identify methods by which schools can develop as health promoting institutions, and the factors that influence this process, and assess what can be achieved by schools with the use of additional resources. Also the effectiveness of the health promoting school model can encourage the uptake of practices on territory-wide basis. This project is to try out the scheme to form a prototype. Once it has been demonstrated to be feasible and beneficial to the students, it will be promulgated to other schools as a Quality Education Programme. The scheme can be implemented in other areas such as Mainland China leading to the Asian Network of Health Promoting Schools.

The award scheme will provide the opportunity for teachers and school administrators to form a professional learning community, and change the instruction practice (pedagogy and support for learning in the classroom). These initiatives have been shown to affect performance of students (Newmann and Wehlage, 1995). The scheme will promote engagement and rapport between the community and the school, and has been shown to enhance learning of students (Coleman, 1998). The scheme will also enable the participating schools to create a "learning perspective", "community perspective", and "capacity building" environment. It has been shown that school based management enabled schools to proceed more quickly and effectively when these perspectives were evident (Beck and Murphy, 1998).

Therefore promoting health education through the concept of Health Promoting Schools would facilitate the schools creating the environment for enhancement of student learning and effective school management. The implementation of Health Promoting Schools is then added value to schools. The Healthy Schools Award Scheme is building up a solid structure for the Health Promoting School, which will have significant impact on not only better health, but also the educational achievement of students.

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References

Aaro, L. E., Bruland, E., Hauknes, A. and Lochsen, P. M. (1983) Smoking among Norwegian Children 1975-1980 —The effects of anti-smoking campaigns. *Scandinavian Journal of Psychology* 24:277-283.

Allensworth, D. (1997) Improving the health of youth through a co-ordinated school health program. **Promotion & Education.** 1:42-47.

Beare, H., Caldwell, B. J., Millikan, R. H. (1989) *Creating an Excellent School.* London: Routledge.

Beck, L., Murphy, J. (1998). Site based management and school success: Untangling the variables. *School Effectiveness and School Improvement,* 9:358-385.

Bellew, B. and Wayne, D. (1991) Prevention of smoking among school children: A review of research, and recommendations. *Health Education Journal*, 50:3-8.

Cohen, M. (1988) *Restructuring the education system:* agenda for the 1990's.

Washington D.C.: National Governors'Association.

Coleman, P. (1998) *Parent, student and teacher collaboration: The power of three.*Thousand Oaks, CA: Crown Press.

David, J. L. (1989) *Restructuring in progress: lessons from pioneering districts.* Washington D.C.: National Governors'Association.

Denman, S. (1994) Do schools provide an opportunity for meeting the Health of the Nation targets? *Journal of Public Health Medicine*, 10:219-222.

Green, L. W. and Kreuter, M. (1991) *Health promotion planning: an educational and environmental approach.*Mountain View: Mayfield Publishing Company.

Hawkins, J. D. and Catalano, R. F. (1990) Broadening the vision of education: Schools as health promoting environment. *Journal of School Health*, 60:178-181.

Hopkins, D. (1987) *Improving the quality of schooling.* Lewes, England: Falmer Press.

Kishchuk, N., O'Loughlin, J., Sylvain, P., Masson, P. and Sacks-Silver, G. (1990) Illuminating negative results in evaluation of smoking education programmes. *Journal of School Health*, 60:448-451.

Klepp, K. I., Oygard, L., Tell Grethe, S. and Vellar Odd, D. (1994) Twelve year follow-up of a school-based health education programme.

European Journal of Public Health, 4:195-200.

Kolbe, L. J. (1986) Increasing the impact of school health promotion programs: emerging research perspectives. *Health Education*, 17:47-52 Lee, A., Tsang, K. K., Lee, S. H., To, C. Y. (2000). "Healthy Schools Program" in Hong Kong: Enhancing Positive Health Behaviour for School Children and Teachers. *Special joint issue of Education for Health and Annals of Behaviour Science and Medical Education*, 13(3): 399-403.

Lee, A., Lee, S. H., Tsang, K. K., To, C. Y., Kwan, T. F. (2001). Challenges in development of Health Promoting Schools: Lessons learned in Hong Kong. *Health Education*, 101(2): 83-93.

McKane, P., Loepke, D. and Griffin, G.A. (1990) Minnesota's tobacco free school project 1986-89. In Burston D. and Jamrozik K. (eds.) The Global War. Perth: Organising Committee of the 7th World Congress on tobacco and health.

Moon, A. M., Mullee, M. A., Rogers, L., Thompson, R. L., Speller, V. and Roderick, P. (1999) Helping schools to become health-promoting environments—an evaluation of the Wessex Healthy Schools Award. **Health Promotion International**, 14:111-122.

Mortimore, P., Sammons, P., Stoll, L., Lewis, D., Ecob, R. (1988) *School Matters: The Junior Years.* Wells: Open Books.

Newmann, F., Wehlage, G. (1995) *Successful school restructuring*. Madison, WI: Centre on Organization and Restructuring of Schools.

Nutbeam, D. (1987) The health promoting school: organisation and policy development in Welsh secondary schools. *Health Education*, 46:109-115.

Nutbeam, D. (1992) The health promoting school: Closing the gap between theory and practice. *Health Promotion International*, 7:151-153.

Nutbeam, D., Smith, C., Moore, L., and Baurman, A. (1993) Warning! Schools can damage your health alternation from school and its impact on health behaviour. *Journal of Paediatrics and Child Health*, Vol 29, Supple 1, pp. \$25-30.

Parsons, C., Stears, D. and Thomas, C. (1996) The health promoting school in Europe: Conceptualising and evaluating the change. *Health Education Journal*, 55:311-321.

Pigg, R. M. (1989) The contribution of school health programs to the broader goals of public health: The American experience. *Journal of School Health*, 59:25-30.

Rogers, E., Moon, A.V., Mullee, M.A., Speller, V. M. and Roderick, P. J. (1998) Developing the "health-promoting school" —a national survey of healthy school awards. **Public Health**, 112:37-40. Rothman, M., Ehreth, J., Palmer, C., Collins, J., Reblando, J., and Luce, B. (1994) *The potential benefits* and costs of a comprehensive school health education program. Draft report to WHO, Geneva.

Sammons, P., Hillman, J. and Mortimore, P. (1994) Characteristics of effective schools. London: OFSTED.

Seffrin, J. R. (1990) The comprehensive school health education curriculum: Closing the gap between state-of-the-art and state-of-the-practice. *Journal of School Health*, 60:4.

Seffrin, J. R. (1992) *Why school health education?* In Wallace H.M., Patrick K., Parcel G.S. and Igoe J.B. (eds.) Principles and practice of school health Vol. 2. Oakland, CA: Third Party Publishing Company.

Smith, C. (1992) The health promoting school: progress and future challenges in Welsh secondary schools. *Health Promotion International*, 7:151-152.

Tambini, M. (1985) *Working with parents.* UK: Inner London Education Authority.

Tannahill, A. and Young, I. (1993) Health Promotion in schools (letter). *British Medical Journal,* 306, 20 February.

Thomas, M., Benton, D., Keirle, K. and Pearsall, R. (1998) A review of the health promoting status of secondary schools in Wales and England. *Health Promotion International*, 13:121-129.

World Health Organization (1993) *The health of young people: A challenge and a promise.* Geneva, Switzerland: World Health Organization.

World Health Organization (1995a)

WHO Expert Committee on Comprehensive School Health Education and Promotion, WHO, Geneva.

World Health Organization (1995b) *Regional guidelines: Development of Health-Promoting School —A framework for action.* Manila: World Health Organization.

World Health Organization (1999) Programming for Adolescent Health and Development:
Report of a WHO/UNFPA/UNICEF Study Group on Programming for Adolescent Health.
WHO Technical Report Series, 886. WHO 1999.

Young, I. (1993) Health promoting schools: healthy eating policies in schools —an evaluation of the effects on pupils'knowledge, attitudes and behaviour. *Health Education Journal*, 52:1.

Young, I. and William, T. (1989) *The healthy school.* Edinburgh: SHEG.