



BRIEF COMMUNICATIONS

## A “Healthy Schools” Program in Hong Kong: Enhancing Positive Health Behavior for School Children and Teachers

ALBERT LEE, MB BS (Lond) MPH (CUHK) FRACGP (Aust) FRIPHH (UK)<sup>1</sup>, KWONG-KA TSANG, MD (Taiwan) MPhil (Edin)<sup>2</sup>, SHIU-HUNG LEE, MD (HK) FRCP (Lond) FFCM (UK) FRACMA (Aust)<sup>3</sup> & CHO-YEE TO, MA (Washington) PhD (SIII)<sup>4</sup>

<sup>1</sup>Associate Professor and Director of Healthy Schools Program; <sup>2</sup>Deputy Healthy Schools Program Director; <sup>3</sup>Director of the School of Public Health, Chinese University of Hong Kong; and <sup>4</sup>Professor of Education, Chinese University of Hong Kong

### Background

There is substantial evidence indicating that the health of children and young people is a major factor affecting their capacity to learn, and the level of individuals' education also influences their health<sup>1</sup> (WHO, 1997). In most schools, health education has been largely confined to the formal curriculum, ignoring many other influences that shape and enhance students' health status. Health education can be defined as the sum of all influences that collectively determine knowledge, beliefs and behaviors related to maintaining, promoting, and restoring health in individuals and communities. These influences comprise formal and informal education in the family, in the school and in society at large, as well as in the special context of health service activities. This can be achieved through establishing health-promoting schools, as reflected in a World Health Organization document.<sup>2</sup>

For health promotion to become effective, it must engage partners beyond the health sector. For a Comprehensive School Health Education Program to be successful, a variety of health, educational, and social services that can reach

Address for correspondence: Dr. Albert Lee, Associate Professor, Department of Community and Family Medicine, Chinese University of Hong Kong, 4th Floor, Lek Yuen Health Center, Shatin, N.T., Hong Kong, PR China. Tel: (852) 26928783/26933708. Fax: (852) 26063500/26940004. E-mail: alee@cuhk.edu.hk

children and their families should be available in schools (Blindis, 1993). A health-promoting school is a place with structures that promote and protect health and where all members of the school community work together to provide students with integrated and positive experiences. Childhood and adolescence are critical periods of growth and development, so schools can play a most important role in health promotion and health education.

Teachers should be trained in health promotion and health education to ensure that positive changes are sustained. Suitable teacher development and reinforcement in health education has shown to increase teachers' feelings of preparedness to teach specific health topics (Hausman & Ruzek, 1995). It is also important to develop policies, practices and structures that embed the fundamentals of a health-promoting school into a school's operation. Health professionals should find ways to become more effective political advocates for young people and this should be reflected in the education of health professionals and educators, and in the work of agencies and professional organizations (Nutbeam, 1997). Toward these ends, the Chinese University of Hong Kong launched the "Healthy Schools" Program together with the major School Councils in Hong Kong, adopting a multidisciplinary and holistic approach to health. The project is supported by the Education Department, and has received financial support of HK\$15 million (approximately US\$1.9 million) from the Quality Education Fund set up by the Hong Kong Special Administrative Region Government.

Here we summarize the highlights of the early steps we have taken in implementing this ambitious program.

## A "Healthy Schools" Program

The main goals of the program are: (1) developing a part-time University Professional Diploma course for educating teachers in health education and health promotion; (2) establishing a district task force of health educators and promoters; (3) conducting research in health promotion and health education, such as assessing health needs; (4) investigating public health problems concerning children and adolescents; (5) evaluating health education interventions; (6) preparing publications and enriching the health education curriculum; and (7) offering consultancy services in health education and health promotion.

### *Objectives of the Training Course*

The Diploma course is recognized by the Education Department as a staff development course for teachers.

Graduates of the course should have the ability to:

1. read and comprehend health related reports, and find information for basic problem-solving related to school health;

2. take preventive measures and preliminary action against health problems encountered by school children;
3. teach basic concepts in health education; and
4. coordinate health promotion research and curriculum development, and organize health promotion programs in schools and also on a territory-wide or network basis.

To fulfill the requirements of the Diploma course participants will be required to complete four core modules and a project, totaling 18 credit units (253 contact hours).<sup>3</sup>

## **Perceptions of Health after Taking the Course**

There were 274 applicants for the first offering of this course, and 119 were accepted. After the participants received instruction in concepts and determinants of health, they were asked to complete a questionnaire on perceptions of health. Their perceptions of the five most important and five least important aspects of being healthy indicate that the course participants recognized that health is more than the absence of disease. They adopted a comprehensive approach to health, taking into account psychological and social well-being.

## **Evaluation of the Course**

After module 1, participants were asked to complete a program evaluation form.<sup>4</sup> Over 70% agreed that the module had deepened their interest in the subject. Also 70% agreed that they would apply what they learned in the class. Over 70% agreed that the module has helped them have a better understanding of the principles and concepts of health promotion. The majority was pleased with the organization. Only a few course participants felt that the course contents were either too simple or too difficult. The written comments state that the program is innovative, interesting and helpful.

## **The Way Ahead**

Our program has made a promising start toward enhancing the concept of health-promoting schools. The program is preparing teachers to be active health promoters and health educators rather than just learning about illness. Once we have a core number of trained teachers as school health educators, dissemination of health information and research can proceed. We aim to create an integrated and mutually reinforcing set of experiences for young people. The networking and consultancy services will help build a public policy for promoting school health. Networking has been demonstrated to be essential for health-promoting

schools (Swart & Reedy, 1999). Our program includes various strategies for youth health promotion. Some studies have shown that community interventions can be helpful in preventing young people from taking up smoking, so effective networking is essential for health promotion programs (Sowden & Arblaster, 2000). It is important to train the trainers at schools, and they will be provided support by networking with related professionals. If every school in Hong Kong has at least one trained teacher in health promotion and health education working closely together, it should not be difficult to implement the Ottawa Charter for Health (WHO, 1986). This can have a significant impact on the health behavior of our young children.

## Acknowledgements

We express our deepest appreciation to the Quality Education Fund of the Hong Kong Special Administrative Region Government for financial support of the program; and the Hong Kong Subsidized Secondary Schools Council, Subsidized Primary Schools Council and Hong Kong Special Schools Council for their active participation in this program.

## Notes

1. See Ziglio, E. (1997). The contribution of the health promoting school to the current role of education in society today. First Conference of the European Network of Health-Promoting Schools, Thessaloniki–Halkidiki, Greece, May 1–5.
2. See World Health Organization Regional Office for the Western Pacific (1996). *Health-Promoting Schools Series 5: regional guidelines. Development of health-promoting schools—a framework for action*. WHO/WPRO (Western Pacific Regional Office).
3. To be sent an outline of this program by return e-mail, please send an e-mail inquiry to <alee@cuhk.edu.hk>.
4. For a copy of this form, please send an e-mail request to <alee@cuhk.edu.hk>.

## References

- BLINDIS, C. (1993). Health policy reform and comprehensive school health education: the need for an effective partnership. *Journal of School Health*, 63, 33–37.
- HAUSMAN, A.J. & RUZEK, S.B. (1995). Implementation of comprehensive school health education in elementary schools: focus on teacher concerns. *Journal of School Health*, 65, 81–86.
- NUTBEAM, D. (1997). Promoting health and preventing disease: an international perspective on young health promotion. *Journal of Adolescent Health*, 20, 396–402.
- SOWDEN, A. & ARBLASTER, L. (2000). Community interventions for preventing smoking in young people (Cochrane Review). In: *The Cochrane Library*, Issue 2. Oxford: Update Software.

- SWART, D. & REEDY, P. (1999). Networks for health-promoting schools in South Africa. *Journal of School Health*, 69, 47–50.
- WORLD HEALTH ORGANIZATION (1986). *The Ottawa Charter for Health Promotion*. Geneva: WHO.
- WORLD HEALTH ORGANIZATION (1997). Promoting health through schools. Report of a WHO Expert Committee on Comprehensive School Health Education and Promotion. World Health Organization Technical Report Series, Vol. 870, pp. i–vi, 1–93.