

Health Promoting School Effectiveness: Global Perspective

全球學校健康促進計劃發展與前瞻

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澳門學校衛生與健康促進研討會 **School Health Symposium 28 June, 2010**

澳門教育暨青年局、衛生局



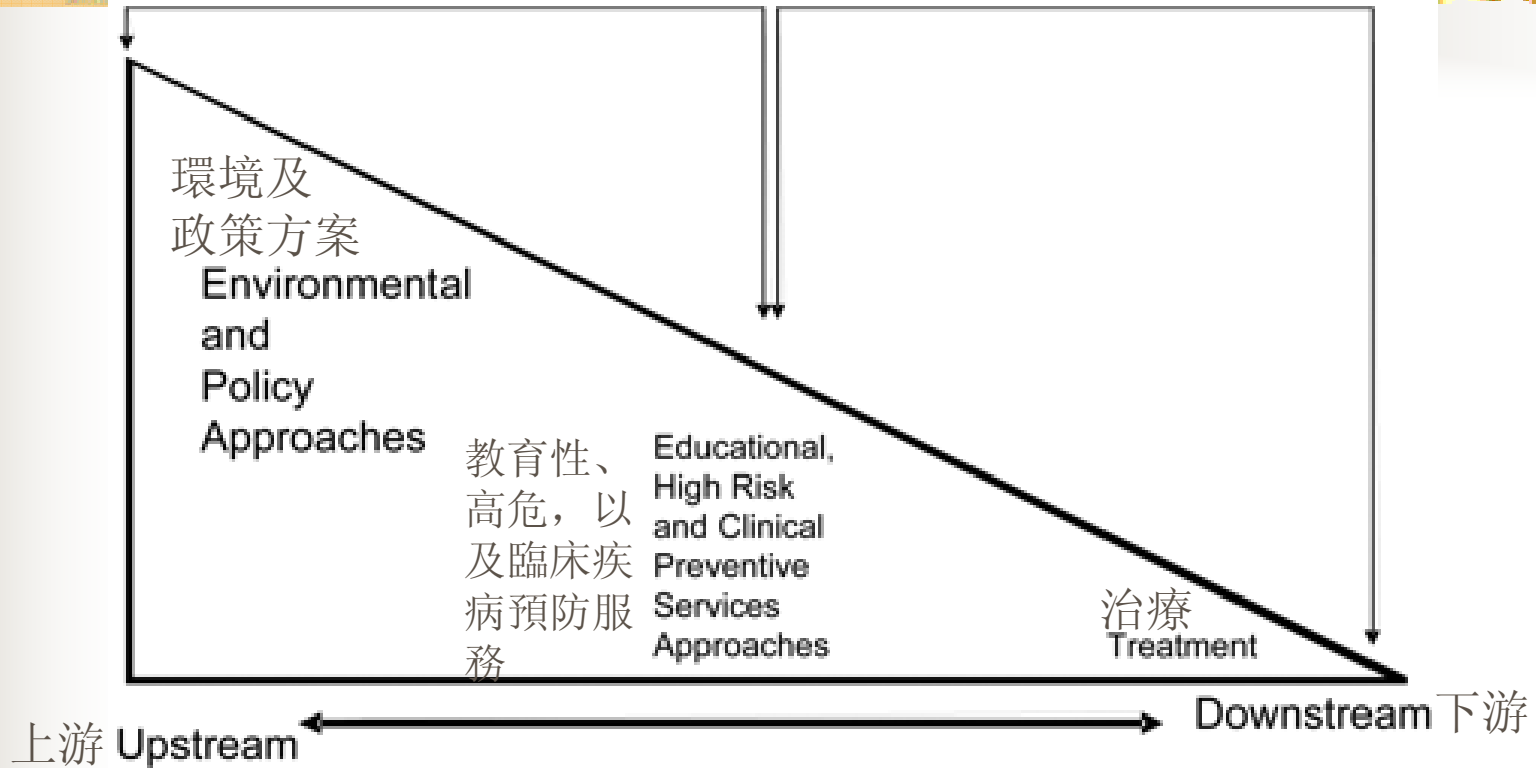
Education for Health 教育健康

- Disease orientated approach is negative 以針對疾病為本的方法是消極的方法。
- It ignores the holistic perceptions that encompass culture, environment and socio-political determinants 缺乏對文化、環境，以至社會政治等因素的全面考慮。
- Health orientated approaches aim to enhance positive health and prevent ill health through the recognition of physical, psychological and social components. 以健康為本的方法旨在通過生理、心理及社會因素推動建立正面的健康生活態度及預防疾病。

Challenges for Promoting School Health

- Needs good data to reflect the determinants of health as well as health status 需要全面的數據協助反思影響健康的決定因素，以及兒童和青少年的健康狀況。
- Using setting approach to promote health rather than information giving 需要全面的數據協助反思影響健康的決定因素，以及兒童和青少年的健康狀況。
- Evaluation measures in boarder perspectives 以更廣泛的角度進行評估。

人口導向 *Population-oriented* *Individually-oriented* 個人導向



Relative emphasis on population-oriented and individually oriented interventions along the prevention-to-treatment continuum. 沿著“預防到治療”的醫療服務連續過程，逐步強調人口導向和個人導向的干預

Daniels SR et al. *Circulation* 2005; 111: 1999-2012.

What is School Health Policy?

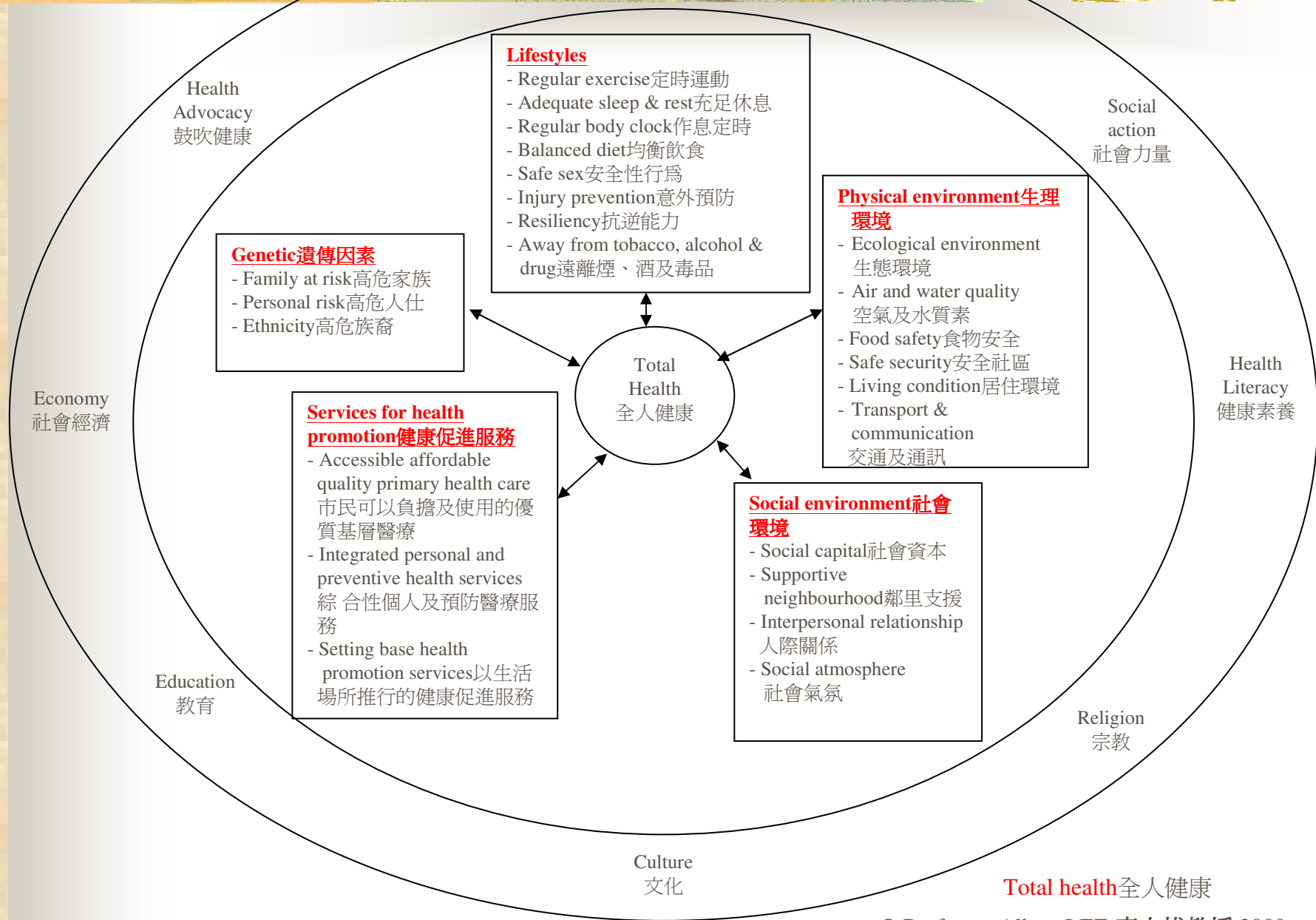
What is Healthy School Policy?

School Health Policy 學校衛生政策

- Statutory requirement for health protection, e.g., infection control, good hygienic practice
- Initiated by Health Authority
- Unique standard across all schools
- Based on guidelines and procedures

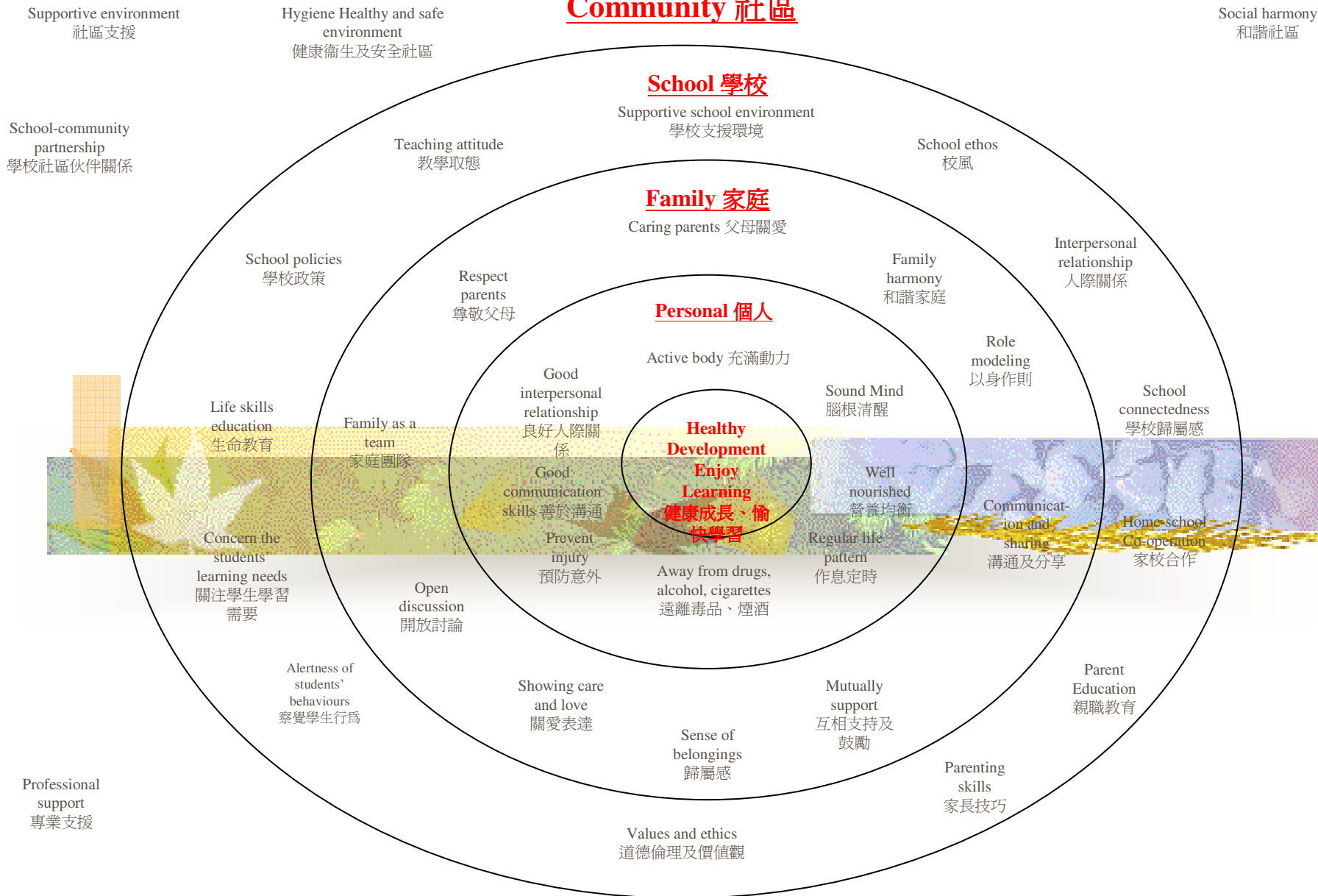
Healthy School Policy 健康學校政策

- Putting health on school agenda
- Promote better health and well being for students and staff
- School based initiatives based on needs of the school
- Comprehensive approach to promote healthy school environment making use of possible means and resources



Total health 全人健康

Community 社區



Holistic community development plan 全面社區發展計劃

© Professor Albert LEE 李大拔教授 2009

Hong Kong Healthy Schools Award Scheme

香港健康學校獎勵計劃



Education Bureau,
HKSAR
香港特別行政區政府
教育局

WHO Western Pacific
Region
世界衛生組織西太平洋
洋區



The Hong Kong
Institute of Education
香港教育學院

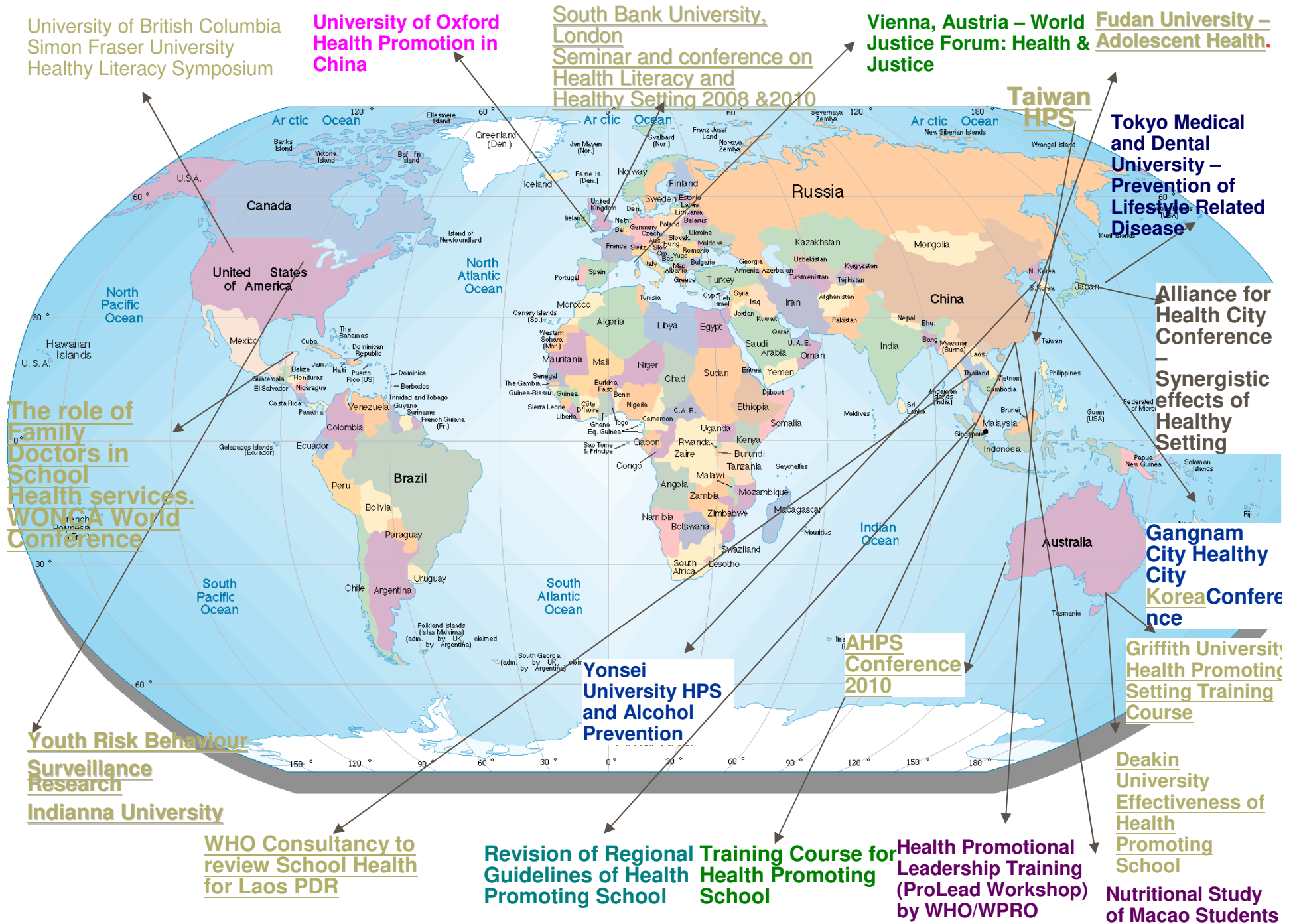


Healthy Schools (Pre-school) Award Scheme

健康幼稚園獎勵計劃

Education Bureau, HKSAR
香港特別行政區政府
教育局

WHO Western Pacific
Region
世界衛生組織西太平洋
洋區





WHO Stakeholders Consultation Meeting to update Regional Guidelines for HPS 3-5 March 2008, Singapore

WHO Western Pacific Regional Office: Health Promoting School Guidelines 2008



Close connection with England, Scotland and Ireland



MB BS (UCL-Middlesex, London)



FFPH(UK)



Visiting Scholar, GP-Section, Edinburgh



FRCP(Irel)





健康素養 (Health- Literacy)



- ✦ 能辨析性思考
Critical Thinking
- ✦ 具解決問題的能力
Problem-solving Ability
- ✦ 負責任及能生產的公民
Be a Responsible and Productive Citizen
- ✦ 會自我導向地學習
Self-oriented Study
- ✦ 有效地溝通
Effective Communication



影響作決定的內、外在因素

家庭因素

朋輩

環境氣氛

模仿對象

(名人、運動員、明星、領袖)



期望 (被接納、被愛)

好奇心

興趣

知識

我知道什麼

事實資訊

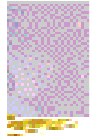
喜惡

社會文化

媒體、廣告

法規

(車速、飲酒年齡、禁煙區)



Health Literacy: Making the most of health

3-day Conference at London South Bank University (London SE1)

24 - 26 February 2010

Join us for this international conference. National and international experts will host a series of seminars to review current knowledge and discuss the importance of Health Literacy (HL) in the UK. Seminars will be interactive, with speakers and the audience reviewing current knowledge and the relevance and importance of HL in UK health, education and society. Sessions will be recorded and proceedings of the conference will be published.

Conference Seminar Topics:

Day 1

- HL and Health Inequalities in the UK
- The Economic costs of low HL
- HL and productive business
- HL and lifestyle choices
- Using HL to support informed lifestyle choices

Day 2

- Concepts and definitions of HL
- Health Literacy and health outcomes
- Assessing the impact of HL

Day 3

- HL and communities
- HL and lifelong learning
- HL and evidence based health, education and social policy

Seminar format

- What is currently known on this topic in the UK and internationally?
- Viewing current knowledge on this topic in the UK context: how does it link with policy?
- Interactive discussion: where to in for this topic in the UK? What do we need to know? What are the research and development questions?

Speakers include

UK: Don Nutbeam *University of Southampton UK*, Gill Rowlands *London South Bank University*, Nicola Gray *University of Nottingham*, Joanne Protheroe *University of Manchester*, Jonathan Berry *Contin You*

International: Rima Rudd *Harvard School of Public Health*, Scott Murray *DataAngel, Canada*, Diane Levin, *Tel Aviv, Israel*, Deborah Begoray *University of Victoria, British Columbia, Canada*, Doris Gillis, *St Francis Xavier University Nova Scotia, Canada*, Anne Marshall, *University of Victoria, British Columbia, Canada*, Albert Lee, *Chinese University, Hong Kong*, Michael Wolf, *NorthWestern University, Chicago, US*.

Cost: £50 (\$84) per day (or £120 (\$200) for all 3 days)

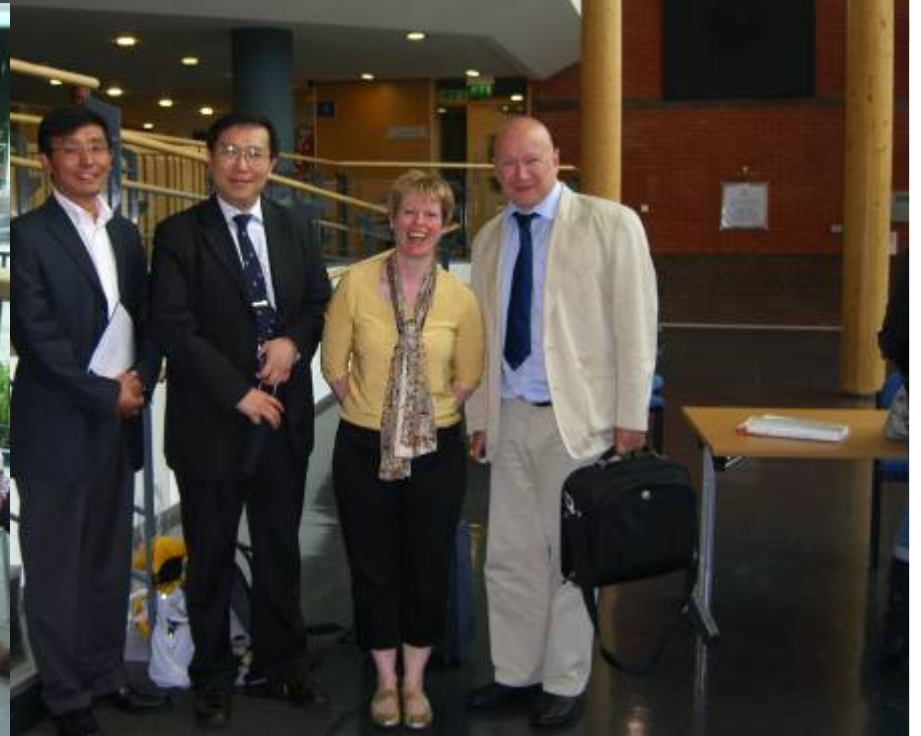
For more information, directions and a booking form: email Alison or Safron on info.esu@lsbu.ac.uk tel: 020 7815 6934/44 or visit our website: www.lsbu.ac.uk/enterprise

SAPC

The Society for Academic Primary Care

Food and Drink
Federation
FDF
Making a real difference

DH Department
of Health



Social Environment 校風人際

- Interpersonal skills 共處能力
- Communication skills 溝通能力
- Emotional and social development 情緒及社交培育

Healthy School Policy 健康學校政策

- Positioning resources allocation, consultation and dissemination, monitoring and evaluation.
資源分佈、搜集專業意見及徵詢有關人士監察及評估。

Physical Environment 學校環境

- Learning through real life experience (e.g. Green School, Safe School, Healthy Canteen)
實地研習（綠色校園、安全校園、健康膳食）

Personal Health Skills 個人健康生活技能

- Learning in diversity 多元化學習
- Life skills training 生活技能
- Experiential learning 探索學習 (Life wide learning)全方位學習

School Health Literacy
學校健康素養

Community Link 社區協作

- Sharing of knowledge and skills
分享經驗及專討
- Empowerment of school and community
強化學校及社區能力

Health Protection and Health Promotion Services 校本健康促進服務

- Health service provision beyond routine screening 深層次的體檢
- Integration of personalised and preventive health services
綜合個人及預防性健康服務

Albert Lee (2008)

Health-Promoting Schools

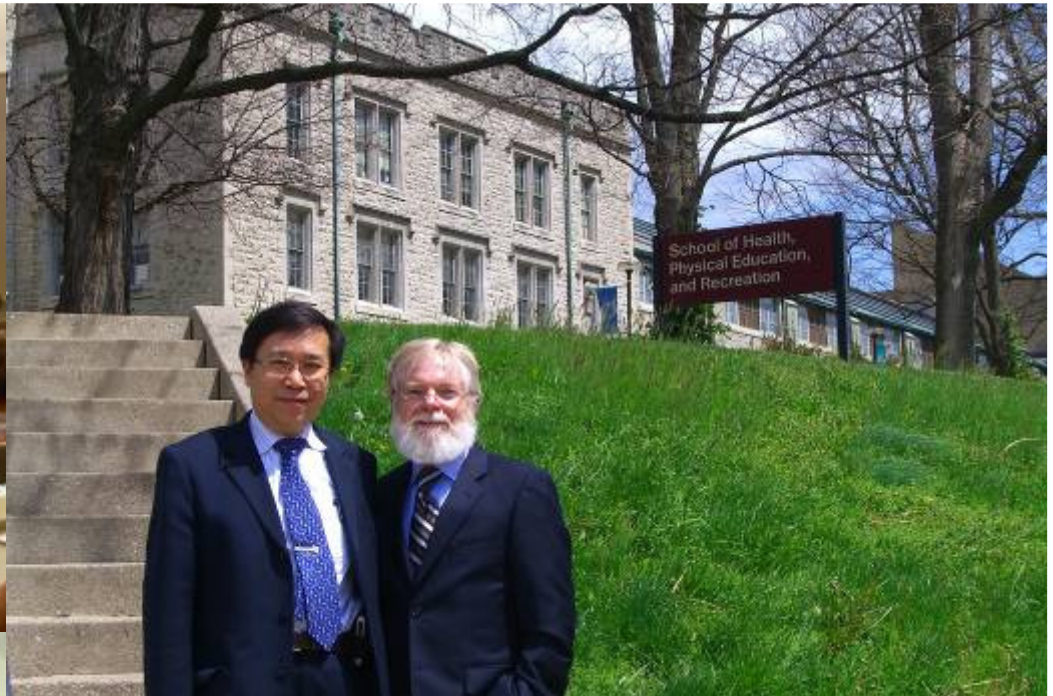
Evidence for a Holistic Approach to Promoting Health and Improving Health Literacy

Albert Lee

Centre for Health Education and Health Promotion, Faculty of Medicine, The Chinese University of
Hong Kong, Shatin, Hong Kong

Abstract

Chronic diseases are now the major causes of death and disability worldwide, and non-communicable diseases (NCD) account for the majority of the global health burden. About half of premature deaths are related to health-risking behaviours that are often established during youth and extend to adulthood. While these diseases might not be curable, they are preventable. Prevention is possible when sustained actions are directed at individuals and families, as well as at the broader social, economic and cultural determinants of NCD. A 'life-course' approach to promoting healthy behaviour should begin early in life. The aim of this article is to discuss the impact of the 'health-promoting school' (HPS) on improvements in youth health.



Youth health needs in Hong Kong

Lee A., et al. Youth Risk Behaviour Surveillance in HK. *Public Health* 2004; 118(2): 88-95

➤ The youth health surveys in 1999, 2001 and 2003 both revealed that substantial high proportion of our young people **DID NOT** have a **healthy eating habit, not performing exercise regularly** and also **emotionally disturbed**. The 2001 survey found correlation of youth health compromising behaviors with emotional disturbance and life satisfaction.

➤ 於 1999 年、2001 年及 2003 年進行的調查，均反映出大部分青少年都沒有健康的飲食習慣、沒有定期運動，而且受情緒困擾。據 1999 年的調查顯示，少於一半的受訪者有進行定期的身體檢查。而 2001 年的調查又發現青少年的健康狀況與情緒困擾及對生活的滿意程度有關。



Risk Behaviors by Grade

Body Weight, Dietary Habits & Physical Activity

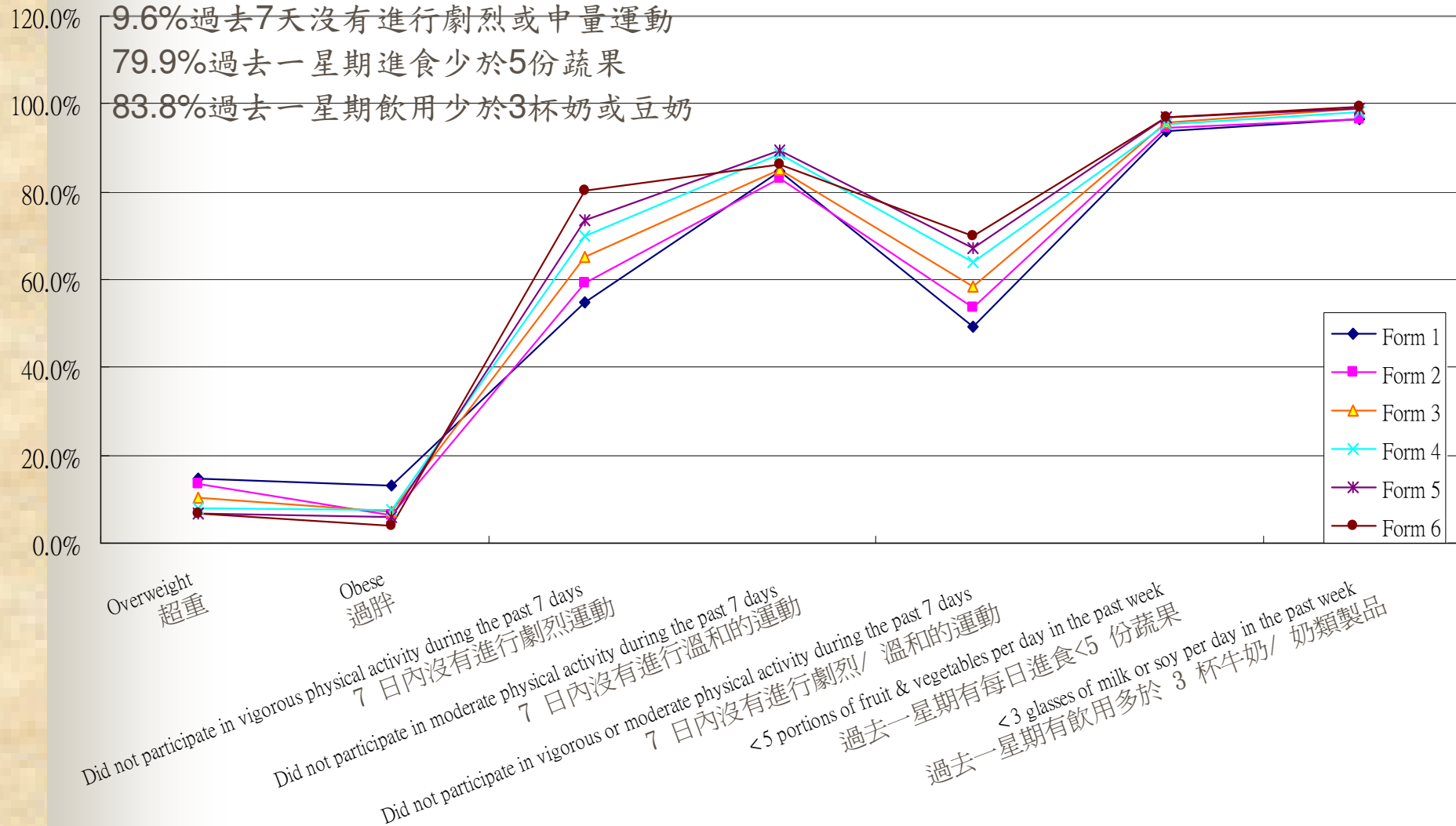
(Lee A et al. *Journal of Primary Care and Health Promotion* 2005; Special Issue.)

2005年美國學童健康行為調查 (YRBS) :

9.6%過去7天沒有進行劇烈或中量運動

79.9%過去一星期進食少於5份蔬果

83.8%過去一星期飲用少於3杯奶或豆奶



Overweight
超重

Obese
過胖

Did not participate in vigorous physical activity during the past 7 days
7 日內沒有進行劇烈運動

Did not participate in moderate physical activity during the past 7 days
7 日內沒有進行溫和的運動

Did not participate in vigorous or moderate physical activity during the past 7 days
過去一星期有每日進食 < 5 份蔬果

< 5 portions of fruit & vegetables per day in the past week
過去一星期有飲用多於 3 杯牛奶/ 奶類製品

Preliminary prevalence (%) of health promotive dietary behaviours in Youth Risk Behaviour Survey (2003) among secondary school students in selected cities

©Lee A., Kolbe L., Huang SY., Chan S., Ji CY et al

不同城市的中學生的飲食習慣 – 流行率的初步數據 (青少年高危行爲調查, 2003年)

Item 項目	Beijing 北京	Jinan 濟南	Taipei 臺北	Macao 澳門	Hong Kong 香港	Los Angeles 洛杉磯
Fruit (≥ 2 /day) 水果 (≥ 2 /天)	18.0	11.4	13.7	15.9	11.2	16.2
Vegetable (≥ 2 /day) 蔬菜 (≥ 2 /天)	36.6	30.6	28.0	36.8	26.8	Green salad + potato + carrot + other vege 綠色沙拉 + 馬鈴薯 + 蘿卜 + 其他蔬菜
Dairy product or soymilk (≥ 1 /day) 奶制品或豆漿 (≥ 1 /天)	52.8	42.7	35.0	21.1	25.7	33.8
Had breakfast 吃早餐	68.2	73.7 for everyday vs. 4.6 never had 73.7 (每天都吃); 4.6 (從不吃)	9.4 skipped on the day of survey 9.4 (做調查當天沒有吃)	15.9 skipped on the day of survey 15.9 (做調查當天沒有吃)	21.4 skipped on the day of survey 21.4 (做調查當天沒有吃)	N/A

A YRBS Survey of Youth Risk Behaviors at Alternative High Schools and Mainstream High Schools in Hong Kong

主流中學及非主流中學之青少年危害健康行為調查

Journal of School Health 2001; 71(9): 443-447

- Health risk behaviors of the prevocational schools (PVS) or known to be alternate high school students were compared with main stream schools with adjustment of the demographic factors.

以人口統計學的方法比較職業先修學校（PVS）及其他高校學生與主流中學學生的健康行為。

- It was found the PVS students had at higher risk for most categories of health risk behaviors. The findings suggested that the school environment is an influential factor on lifestyle behavior of the students.

Risk and Protective factors associated with suicidality among the Chinese adolescent in Hong Kong

**與香港青少年自殺問題
相關的危機及預防因素**



**Lee A., Wong SYS, Tsang CKK., Ho G., Wong WCW
Wong, Cheng F.**

***Health Promotion International* 2009, 24(2): 156-165**

影響考慮自殺的因素

(多元邏輯性回歸分析)

考慮自殺

勝算比 (95%信賴區間)

有充足運動	0.67 (0.53, 0.86)	↓
曾輕微傷害自己	3.61 (2.74, 4.76)	↑
較早性經驗	2.64 (1.21, 4.55)	↑
濫用藥物	2.02 (1.26, 3.25)	↑
暴力傾向	1.61 (1.26, 2.05)	↑
性別	1.65 (1.26, 2.12)	↑

McBride N (2000). The Western Australian School Health Project: comparing the effects of intervention intensity on organizational support for school health promotion. Health Education Research, 15(1): 59-72.

西澳州健康學校計劃：比較機構支援對學校健康促進計劃之影響

This study evaluated the changes in school health promotion practice related to two levels of intervention in the Western Australian School Health (WASH) Project:

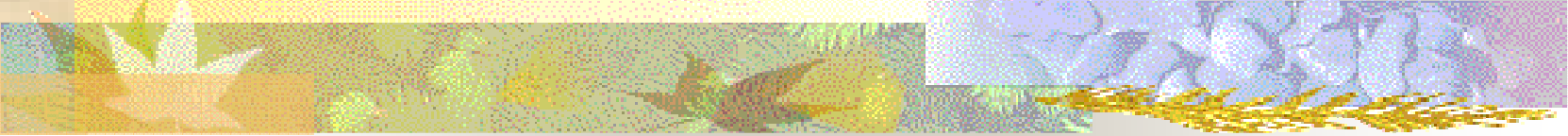
此項研究旨在評估學校之健康促進工作與西澳州學校健康（WASH）計劃之兩個層面的干預：

- a low intensity intervention involving a single mail-out of WASH Project resources

低程度之干預，包括寄送一份WASH計劃之資源。

- a high-intensity intervention involving training, planning time and expert support

高程度之干預，包括培訓、計劃及專家支援。



The results indicate that a high-intensity intervention with provision of training to a critical mass of school community members for each school, ongoing access to experts in the field as well as dedicated planning time, is able to increase the comprehensiveness and quality of health strategic planning by schools. The low-intensity mail-out intervention is no more successful in initiating change than providing no intervention at all.

研究結果顯示，接受高程度干預的小組，大部分學校成員接受培訓，並且得到專家的指導，制定完善的計劃，讓學校發展健康策略計劃的更全面。接受低程度干預的小組，只獲得計劃的資源硬件，與沒有接受任何干預之小組相比，兩者於改變學校健康狀況方面沒有顯著分別。

Australian Health Promotion School Association Conference 2010-05-24 Health Promoting School Workshop Wednesday October 6 2010 (Burswood on Swan)

Never ending health challenges in schools: Health Promoting Schools in addressing student wellbeing.

Main goal of the workshop

To explore how the principles and practice of Health Promoting Schools could help students face new social and emotional health challenges and enhance teaching through healthy school policies, building active competencies, developing personal health skills, building supportive environments (physical and social), and improving community linkages and services for health promotion.

Key objectives

At the conclusion of the workshop participants will be able to;

Make use of the different components of the Health Promoting Schools toolkit to manage emerging health issues within schools

Use the concept of Health Promoting Schools to enrich health curriculum

Program outline

Timing Outline Facilitator
8:30 Registration, tea and coffee
8:45 – 8:55 Introduction and housekeeping Danielle Maloney
8:55 – 9:15 Setting the scene – an introduction to student wellbeing - issues facing young Australians TBA Neil Guard
Commission on mental health?? Suggestions?
9:15 – 10:20 Using the six key areas of the Health Promoting School to change health behaviour. In this session, participants will apply theories of behaviour change to the Health Promoting Schools framework Albert Lee Professor (Clinical) and Director of Centre for Health Education and Health Promotion, The Chinese University of Hong Kong; Consultant in Family Medicine
10:20 – 10:50 MORNING TEA
10:50 – 11:45 Teenagers, brain development and bullying behaviours Dr Dooley's area of expertise is childhood aggression, bullying, violence and technology. In addition he has a strong background in neuropsychology; particularly the relationship of brain development and implications for bullying will interest teachers and other educators. Dr Julian Dooley Senior Research Fellow
Scientific Director Cyber Bullying
ECU Child Health Promotion Research Centre
11:45 – 12:45 The importance of leadership in Health Promoting Schools
1. Helping school personnel to develop Health Promoting School
1. Dr Robin Cheung Principal HK
2. Local Principal (TBA) Daniel Lynch Parnngurr school? Or other
12:45 – 1:45 LUNCH BREAK (incorporating cooking demonstrations from students Cyril Jackson Senior College) And Involvement of the Youth
Empowerment students into the break activities?
1:45 – 2:00 Enhancing social and emotional wellbeing for CALD groups Deb Fitzsimons and Cath McDougal (Cyril Jackson)
2:15 – 2:15 Youth Empowerment – a showcase of some of the initiatives undertaken by the students Margaret Maassen (Catholic Education Office and students from Corpus Christi and 2 other schools)
2:30 – 3:30 Workshop session – discussion in four groups
NEEDS AN OUTLINE or Case studies for discussion
1. How would Health Promoting School links up with other Healthy Setting to prevent obesity amongst children
Facilitators: 1. Professor Albert Lee 2. Dr Julian Dooley 3. Danielle Maloney 4. Dr Robin Cheung
Educators from HK
3:30 – 4:00 Sharing and conclusion Danielle Maloney



**Kitchen-Garden
Project, Melbourne,
Australia**



Kitchen-Garden Project





Korea

Health Plan 2010:健康計劃2010年：

- Defines the purpose of school education界定的目的學校教育
- Organisation establishment組織編制
- Encourage health promotion activities: decrease suicidal attempts, increase hygiene activities鼓勵健康促進活動：減少自殺企圖，增加生活動

Problems in Health Promotion

- Legal 法律
- Institutional體制
- Implementation執行
- Awareness意識

Under School Health Act, Community relationship and social environment are two weak components 根據學校衛生法，社會關係和社會環境，是兩個薄弱零件

Source: Professor Donhyun AHN, Hanyang University School Health Research Centre, Korea. Health Promoting School Symposium, Seoul, Korea, 5th October, 2007.



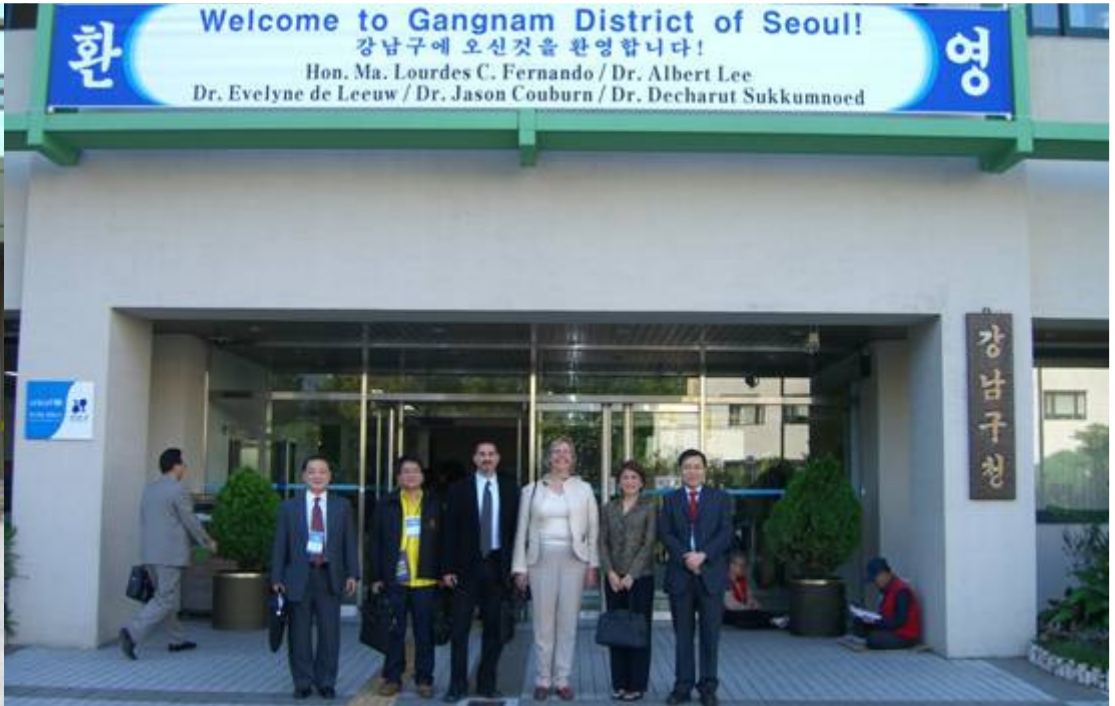
9 Key issues in adolescent health in Korea

¹Yeonkyeng Lee, Ph.D, ² Donghyun An, MD

¹ Division of Chronic Disease Surveillance, Centers for Disease Control & Prevention, Ministry of Health and Welfare, Korea

² Medical School, Hanyang University

- **Poor food habits**
- **Increase the obesity**
- **Decrease physical activity**
- **Poor practices for weight control**
- **Poor oral health**
- **Overstress**
- **Health gap among socio-economic inequalities**
- **Decrease age of smoking and drinking initiation**
- **Increase other health related poor behaviors of smoker and drinker**





Health Promoting Schools in Laos

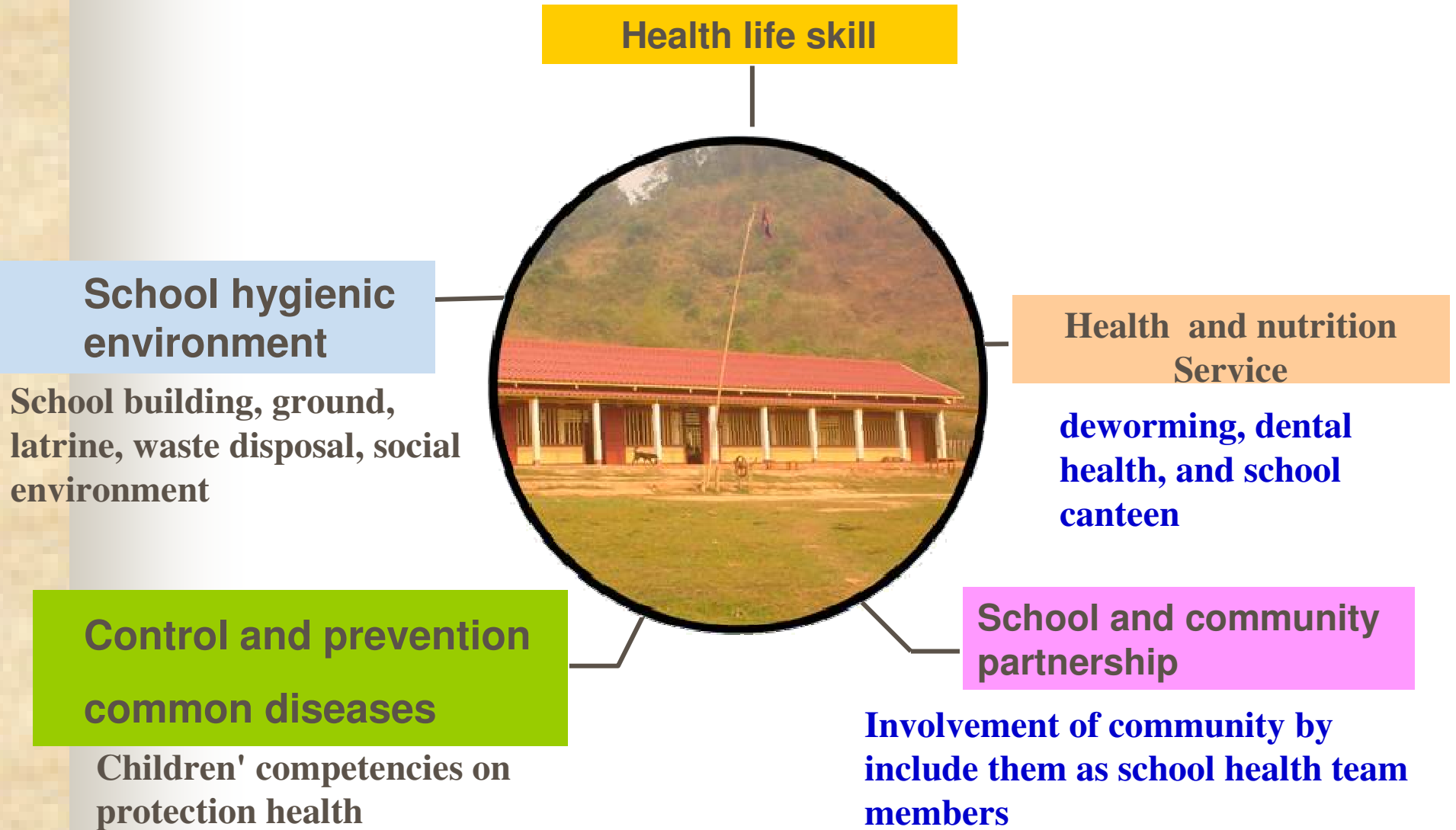


- WHO/WPRO has commissioned the Centre to visit Laos meeting officials of Ministries of Education and Health to further develop health promoting school in Laos in December 2004.



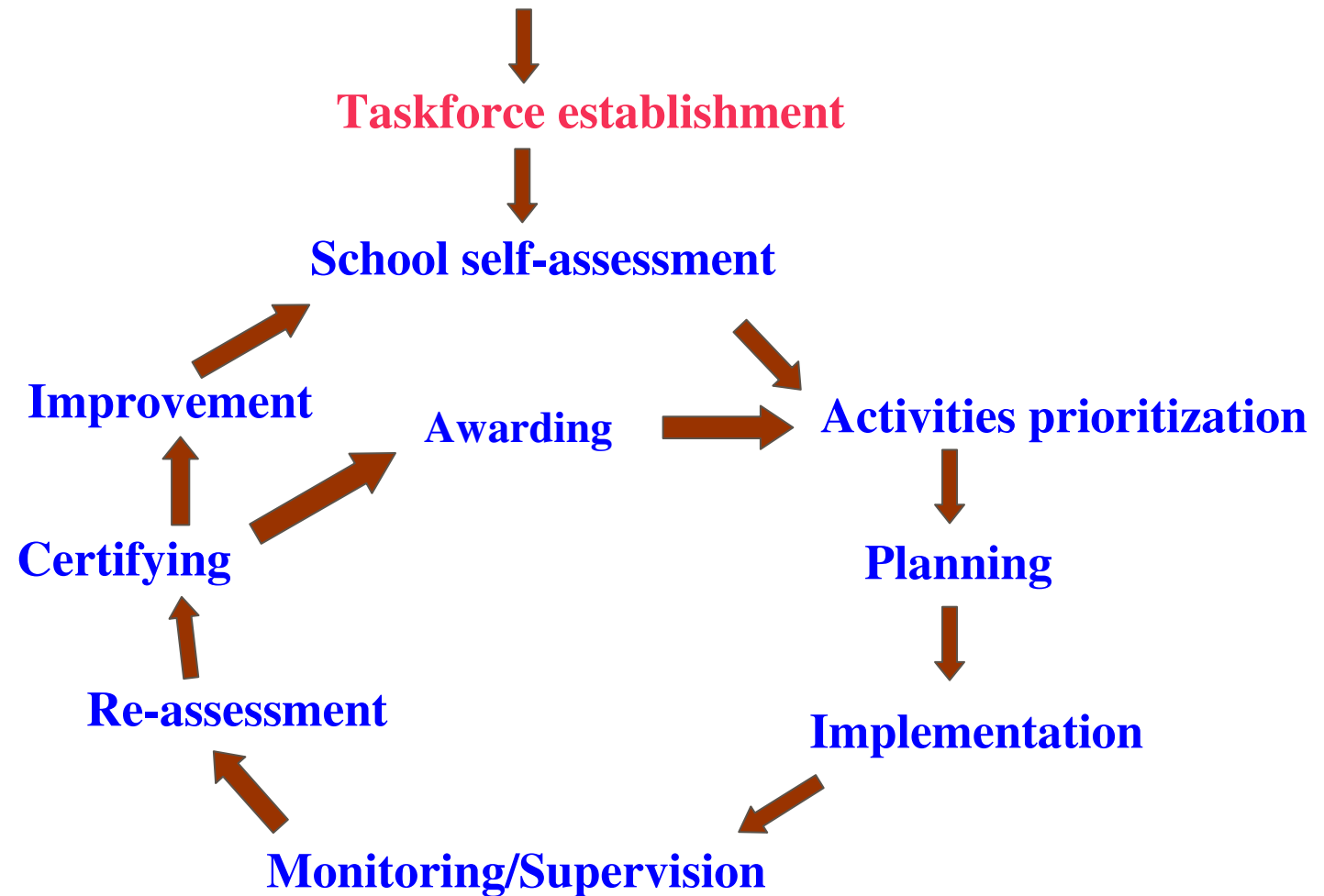
©Dr. Chitsavang CHANTHAVISOUK, School Health Education,
Laos PDR, 2008

Component and key focus:



Implementation process:

Policy, accreditation



Supporting Health Promotion in Schools in the Philippines *The Urbani School Health Kit*. WHO Stakeholders Consultation Meeting to update Regional Guidelines for HPS 3-5 March 2008, Singapore.

©Sheila R. Bonito
Associate Professor.
University of the Philippines
Open University, 2008



An integrated package of materials supporting health education and health promotion in the school setting, targeting 5-9 and 10-12 year-old pupils:

- Principles of Health Promoting School
- Role of teachers in health promotion
- Addressing the different needs of students
- Show cases
- Innovative teaching

© Sheila R. Bonito, Philippine OU, 2008





The Urbani School Health Kit

Objectives

- The Kit exemplifies the **principles of health promoting school**
- The Kit emphasizes the **role of teachers** in promoting health among children
- The Kit considers the **different health needs** of children at different age groups
- The Kit showcases important **health issues**, **health activities and resource materials** for a healthy school program
- The Kit encourages **innovative ways of teaching health**



World Conference on Family Medicine
Cancun, Mexico. 18-23 May 2010
Lee A., Gibbs T. Why Family Doctors
fail to improve student health?

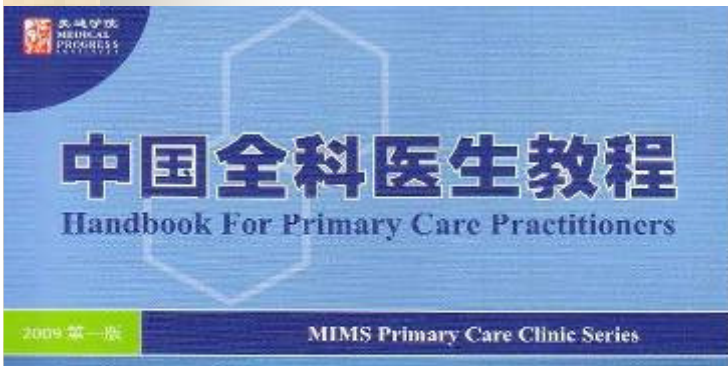


Essential Functions of School Health

Services 學校健康服務的主要功用

- ❖ Screening, diagnostic, treatment, and health counselling
檢查、診斷、治療及健康輔導
- ❖ Referrals and linkage with other community providers
與社區內提供醫療護理服務之組織建立聯繫及轉介
- ❖ Health promotion and disease prevention
健康推廣及預防疾病

Lee A. Common Adolescence Health Problems in Community. In Yang BF, Lee A, Zhu SZ Handbook for Primary Care Practitioners: MIMS Primary Care Clinic Series. CMP Medica Pacific Ltd, 2009. ISSN 2073-8986



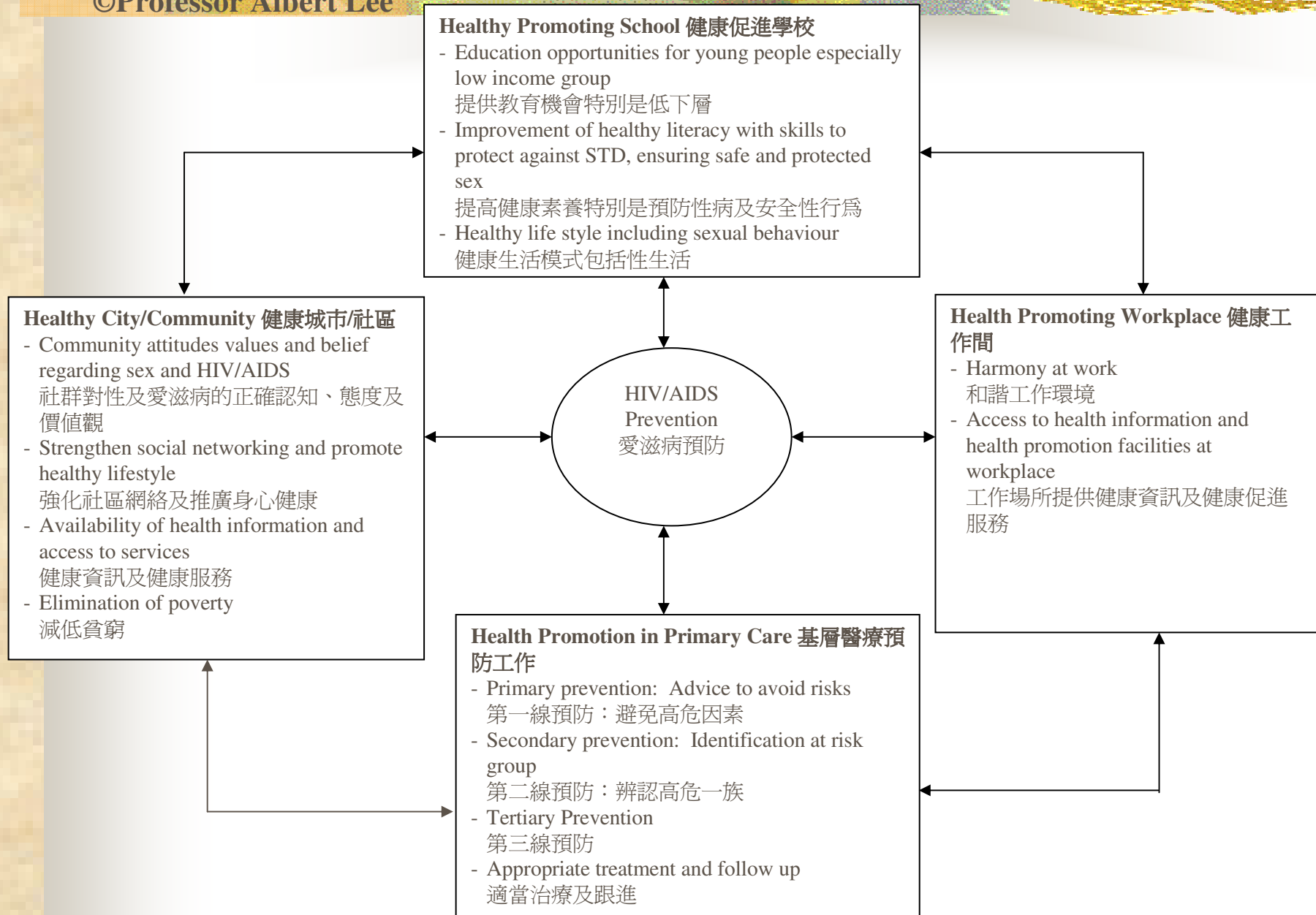
Lee A. Effective Lifestyle Changes. In Wong WCW, Lee A., Lindsay M (Editors). pp 45-57 Clinical Diagnosis in Primary Care: A Practical Approach, The Chinese University Press, 2008.

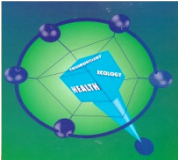
Health Promoting Setting Workshop at Griffiths University



Healthy Setting to Prevent HIV/AIDS 健康場所如何預防愛滋病

©Professor Albert Lee



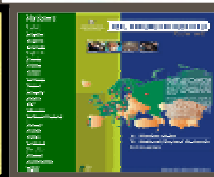
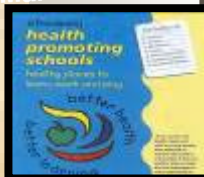


Centre for Environment and Population Health

Workpla



Markets



Health-Promoting Settings

DATE CLAIMER:
Health-Promoting Settings Short Course:
Concepts, methodology and practices
(Module A: 3 days, Module B: 4 days)
At Griffith University, Brisbane, Australia
29 November to 5 December 2009

Critical environment and population health challenges have increasingly broadened the conception of health promotion theories and practices and have led to a recognition that an ecological settings-based partnership approach is an important pathway to a sustainable future. Since the mid-1980s, with the support and leadership from WHO, the health-promoting settings (HPS) approach has become widely adopted by many countries in their health promotion programs. Successful HPS examples integrate health promotion and risk management into planning and governance of settings: cities, communities, schools, workplaces, markets, and hospitals. They have demonstrated multiple benefits and confirmed its significance as an effective means to set a global trend in integrating environment, quality of life, health, humanity and the pursuit of sustainability. In practice, however, there have been uneven results from HPS projects worldwide which highlights the training and support needs for methodology and effective strategies of HPS.

You should attend this course if you are interested in finding out more about the health-promoting settings approach, understanding its application in a range of settings and developing knowledge and skills in key areas relating to needs assessment, program planning and evaluation in the health-promoting setting context.

What past participants have said about the course:

- *the course provided a good mix of theory and practice and application*
- *the course provided a great opportunity to hear the international evidence and perspective*
- *the course provided a rich resource and points participants towards useful resources and guidance material*

The course is delivered in 2 modules – you can participate in either module or both, depending on your training needs.

Presented by a team of world recognised experts in the health-promoting settings field including



Prof Cordia Chu

Director, Centre for Environment and Population Health, Griffith University

Expert in Ecological public health, health-promoting settings methodology, and Health promoting workplaces



Dr Peter Davey

Deputy-Director, Centre for Environment and Population Health, Griffith University

Secretariat Australian Chapter (AC) of the Alliance for Healthy Cities (AFHC)

Expert in Healthy Cities Approaches and Public Health Planning



Prof Karl Kuhn

Chief Scientist in the Federal Institute for Occupational Safety and Health, Dortmund (Germany), Studies of Social Sciences at the Universities of Tübingen, Lund (Sweden), Stockholm Chairman of the

European Network for Workplace Health Promotion;

Expert in Workplace Health and Safety Promotion



Prof Albert Lee

Director, Centre for Health Promotion and Health Education, The Chinese University of Hong Kong, Chair of Award Committee of Alliance for Healthy Cities

Expert in Health promoting Schools and new perspectives of Healthy Cities and Health Promotion in Primary Care



Prof Jurgen Pelikan

Director, WHO-CC for Health Promotion in Hospitals and Health Care, Ludwig Boltzmann Institute for Health Promotion Research, Vienna & University of Vienna, Austria

Expert in Health Promoting Hospitals and Health Care, Quality & sustainable development in hospitals

Program outline

A mixture of lectures, case studies, workshop discussions and field visits will be used to facilitate participant learning throughout the course. The course is structured into two modules:

Module A: Wed 24th – Friday 26th November

Introduction to the health promoting settings approach including: needs assessment methodologies, program planning, evaluation frameworks and indicators of success

Module B: Monday 29th November – Thursday 2nd December:

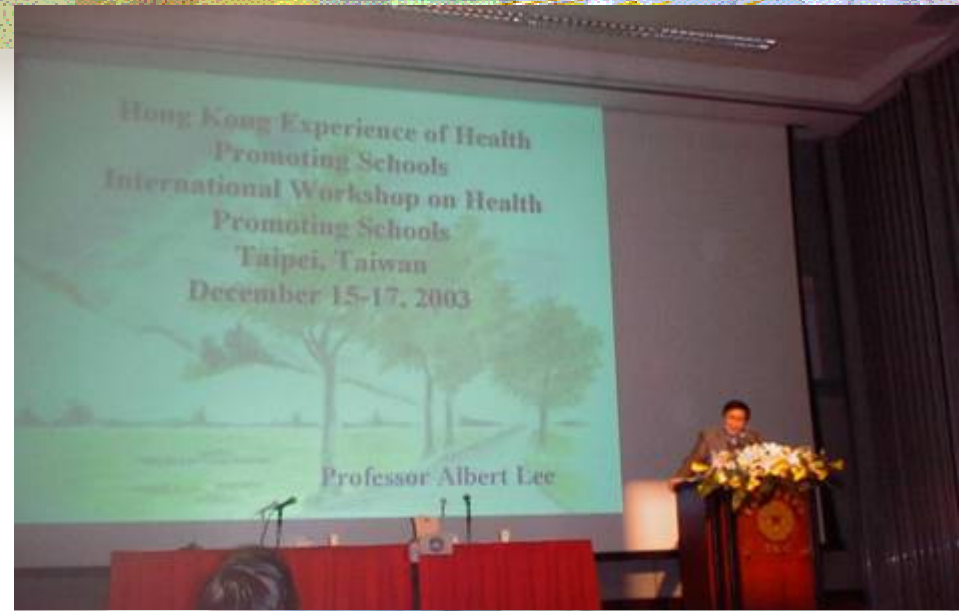
Health promoting settings: using examples and experiences of Healthy Cities/ Communities, Schools, Workplaces and Hospitals to demonstrate how different health promoting settings improve not only health of populations but lead to sustainable development from physical and psycho-social perspectives. The concept of the Health Promoting Setting as an ecological model for health promotion will be analysed and discussed.

There will be **detailed** discussion on development and measurement of success specific to different settings.

A detailed course outline and content will be sent to interested participants.



International Workshop on Health Promoting Schools 2002, 2003 Taiwan



Germany – Sustainable School Health and Education 德國 - 持續健康學校及健康教育發展

Peter Paulus (2009) In Aldringer C., Vince Whitman, Cheryl (Eds). *Case Studies in Global School Health Promotion: From Research to Practice*. Springer, New York, USA, 2009. ISBN: 978-0-387-92268-3.

Self Evaluation in Schools (SEIS) 自評

- Fulfillment of educational tasks 達到教育目標 (Outcome dimension)
- Learning and teaching process 教與學
- Leadership and management process 領導及管理 (Process Dimension)
- Climate/Culture 校風及文化
- Satisfaction 滿意狀況 (Process Dimension)



Fulfillment of Education Tasks 教育目標

- Academic achievement 學術成就
- Social skills 社交技能
- Learning skills 學習技能
- Individual and creative thinking skills 個人及創意技能
- Practical competencies 實踐技能
- Fulfillment of requirements of in-taking schools 完成校本需要
- Fulfillment of requirement of companies 朋輩相處



Learning and Teaching Process 教與

學

- Learning and teaching strategies 教學策略
- Balance in teaching 均衡教學
- Assessment 評估



Leadership and Management Process

領導與管理

- Vision 遠景
- Decision making 決策
- Communication 溝通
- Operational management 執行管理
- Motivation and support 支援
- Planning, implementation and evaluation
策劃、執行及評估
- Staff development 人力培訓



Climate and Culture 校風及文化

- School climate 校風
- Relationships within school 人際關係
- Relationships outside schools 社區關係
- Promoting positive behaviour 健康成長
- Support for students 學生支援



Satisfaction 滿足感

- Fulfillment of students needs 乎合學生需要
(Perspectives of students and parents 學生及
家長角度)
- Teachers' satisfaction with work 教學滿足感

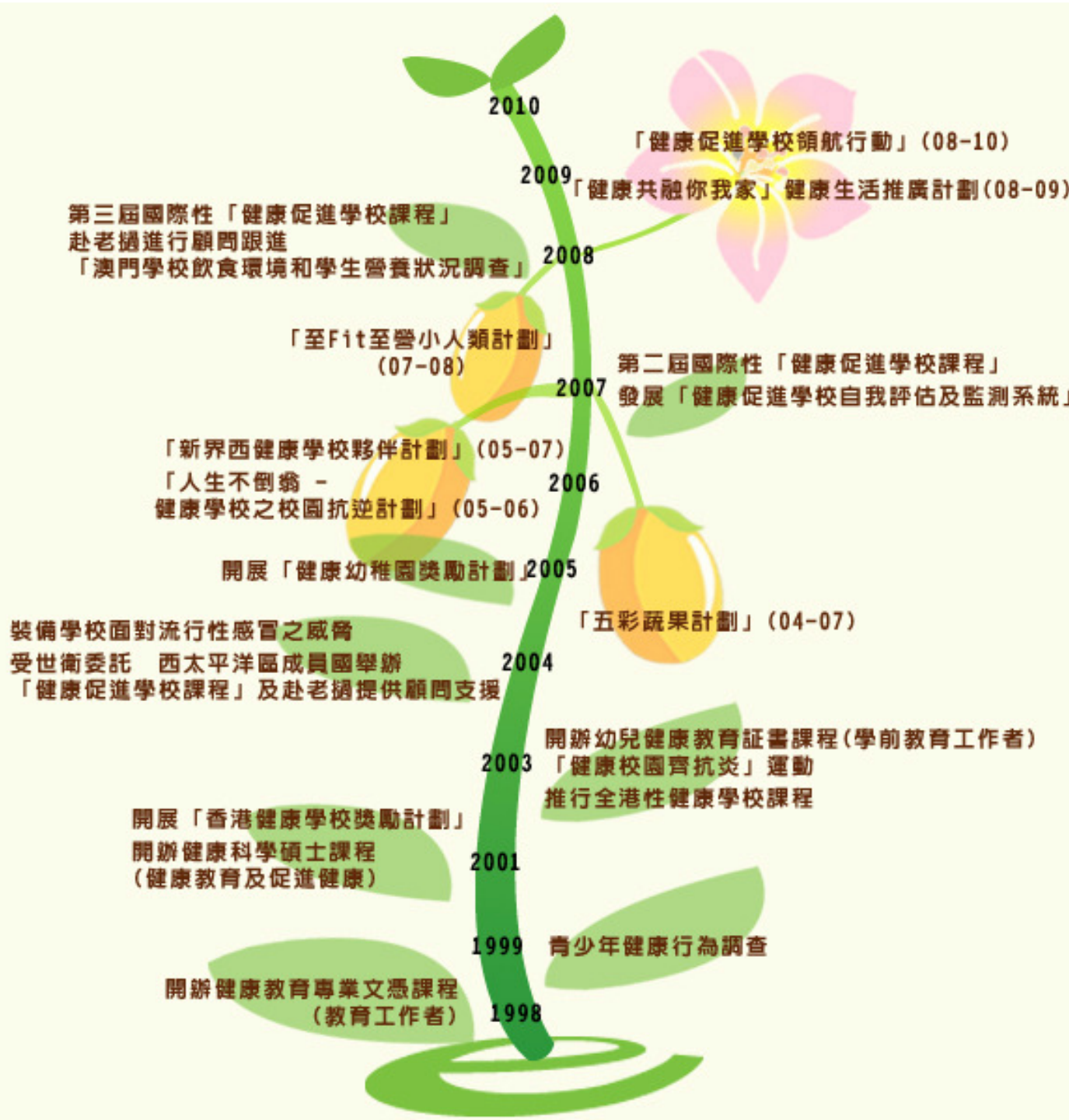
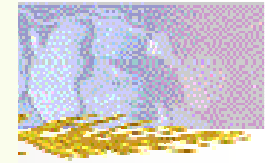
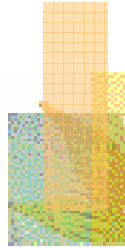
Model of Health Promoting School in Poland

波蘭健康學校模式

Barbara Woynarowska and Marie Sokolowska (2009) *In Aldringer C., Vince Whitman, Cheryl (Eds). Case Studies in Global School Health Promotion: From Research to Practice. Springer, New York, USA, 2009. ISBN: 978-0-387-92268-3.*

Empowerment of School Community for actions
for their own and others health, well-being of school community
優化校園 生化健康行動



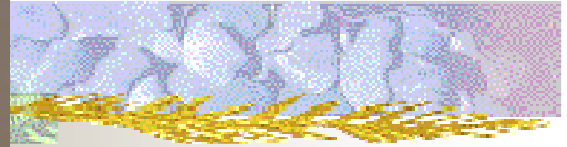


International Short Course on Health Promoting Schools 健康促進學校的國際短期課程

- WHO/WPRO has commissioned the Centre to conduct a short course on Health Promoting Schools to educators and healthcare workers in the Region. 15 participants from 9 countries joined the course in May 2004.
- 世界衛生組織委託本中心為教育人士及保健工作者舉辦健康促進學校的國際短期課程。







Indonesian delegation at
one Gold Award School







Seminars on Health Promoting Schools



HPS workshops for different parts of China Region



WHO/WPRO has commissioned the Centre to conduct HPS workshops to educators and healthcare workers in the Region.



Marshall, B., Sheehan, M., Northfield, J., Carlisle, R. and St. Leger, L. (2000) “School-based health promotion across Australia” *Journal of School Health*, 70:6 pp251 – 252.

Lee, A., St Leger, L., Moon, A.S. (2005). Evaluating Health Promotion in Schools meeting the needs for education and health professionals: A case study of developing appropriate indicators and data collection methods in Hong Kong. *Promotion and Education*, 20(2): 177-186.

- Evidence has been gathered extensively about what schools actually do in health promotion using the HPS/CSH frame work. (Lee. St Leger & Moon, 2006; Marshall et al, 2001)
- 近期已有不少實証反映學校如何按健康促進學校/全面性學校衛生模式推動校本健康促進活動。



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.

Lee A., Cheng F., St Leger L (2005a). Evaluating Health Promoting Schools in Hong Kong: The Development of a Framework. *Health Promotion International*, 20(2): 177-186.

- Audit type of evidence has provided schools and health and education authorities with comprehensive maps about what is happening and how comprehensive it is. It can assist schools and authorities to concentrate on the gaps and affirm qualities work in schools through award upstream (Moon et al, 1999; Lec, Cheng & St Leger, 2005)
- 核証式的檢視亦提供不少實証給學校、教育及醫療機構一個全面性的藍圖去推動健康促進學校, 亦可幫助學校及有關機構集中補救不足之處, 透過獎勵計劃亦可以加強發展優質學校。

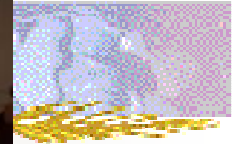
CONCEPTUAL FRAMEWORK for Hong Kong Healthy Schools

Programme 香港健康學校計劃的概念藍本

Strategy in health promotion and health education is to achieve mass shifts in risk factor prevalence and change in policy and organizational practice, rather than just simply focusing on improving personal health literacy and behaviour modification among defined individuals. **Evidence of success would be best built on data deriving from several different sources; making use of qualitative and quantitative information.**

促進健康及健康教育的策略是改善各種危害健康的因素、健康政策及組織架構，而不僅是關注改善個別人士的健康知識及行為。從不同途徑搜集數量及質量的資料數據，以證明有關計劃的成效。

Lee A., Cheng F., St Leger L. Evaluating Health Promoting Schools in Hong Kong: The Development of a Framework. *Health Promotion International* 2005; 20(2): 177-186.



St Leger L., Kobe L.J., Lee A., McCall D., Young I. *School Health: - Achievements, Challenges and Priorities*. In McQueen D., Jones C. *Global Perspective on Health Promotion Effectiveness*. Springer, New York, USA., 2007.



帳戶

學校基本資料

資料輸入

檢視報告

下載文件

使用指引

在

健康促進學校六大範疇學校健康政策

School Health Profile

評估方向 1. 健康教育及健康促進計劃的定位

評估要點 1.1 學校按其需要制定一套全面的健康政策

1.1.1 教職員認為學校按其成員的需要訂立了一套全面的健康政策，以保障他們的健康及安全。 提示 調查結果 備註 1 2 3 4 5 6

1.1.2 家長認為學校按學生的需要訂立了一套全面的健康政策，以保障他們的健康及安全。 提示 調查結果 備註 1 2 3 4 5 6

1.1.3 教職員認同學校推行健康學校的發展方向。 提示 調查結果 備註 1 2 3 4 5 6

1.1.4 學校成員認為推行健康學校能有效促進他們的健康。 提示 調查結果 備註 1 2 3 4 5 6

1.1.5 學校成員認為推行健康學校能促進學校達到全人教育的理念。 提示 調查結果 備註 1 2 3 4 5 6

1.1.6 其他 (請註明) 提示 備註

評估要點1.1評分 1 2 3 4 5 6

這是整個評估要點的綜合評分，可根據學校就制定全面的健康政策方面的表現，並考慮教職員、學生及家長的意見和其他的補充資料，選出一個最能代表學校現況的評分。此項目的評分標準為 1=尚待發展，2=尚待改善，3=達至標準，4=良好表現，5=優異表現，6=卓越表現。

://www2.cuhk.edu.hk/hep/ses/school/sherrs_hct_report.php

Health Education Profile

移至

列印

年度: 2008-2009

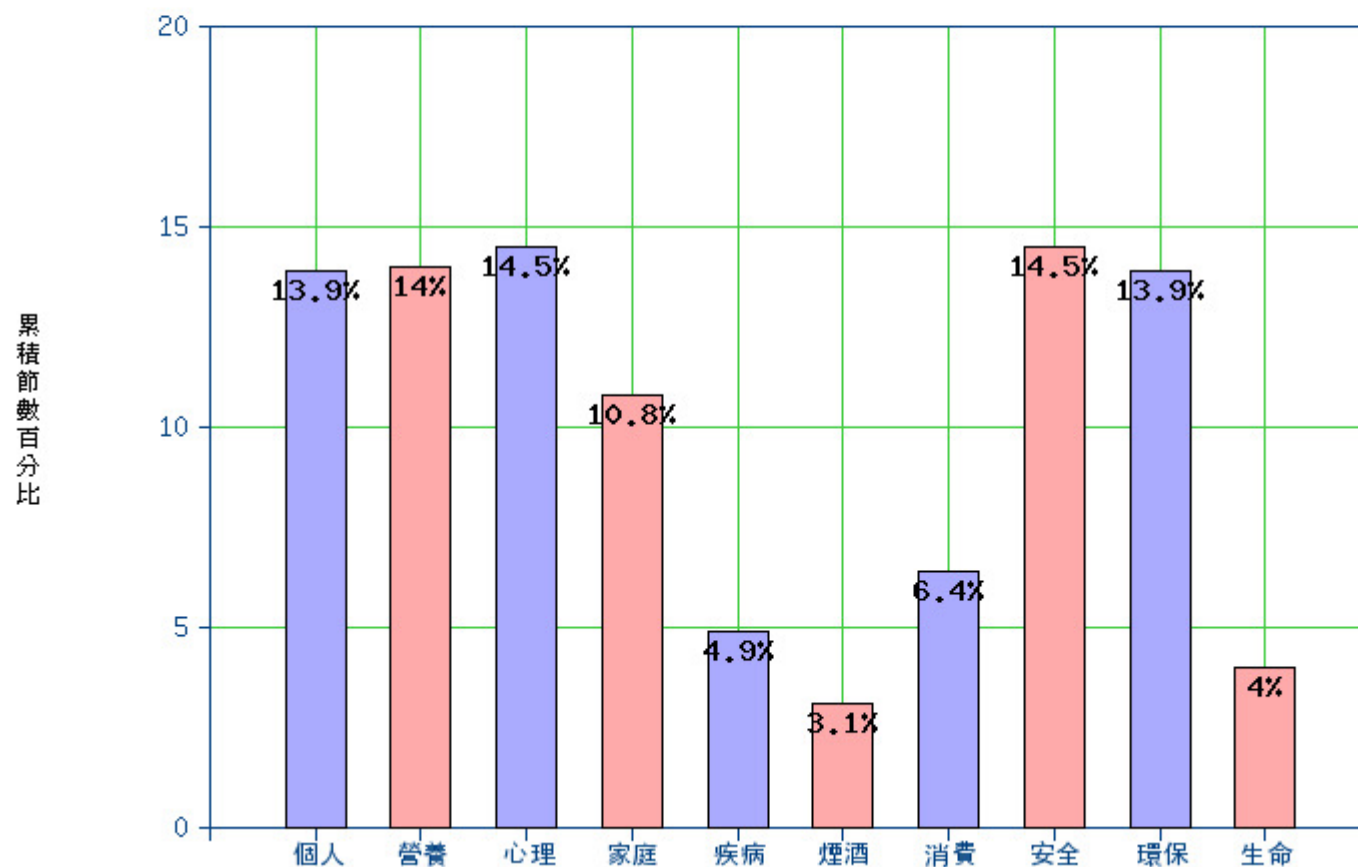
年級: 全校

科目: 所有科目

選擇

總節數: 1913

學校透過課程教授十大健康主題累積時間分佈



Student Health Profile

《例子》

- 例 1 : 你會試過吸煙嗎？
- 從未試過（請跳至第 5 題繼續作答，無須回答第 2-4 題）
 - 曾經

例 2 : 以下問題詢問你對一些句子的感受。這不是測驗，沒有標準的答案。

	非常不同意	不同意	同意	非常同意	不肯定
我喜歡體育課	1 ○	2 ○	3 ○	4 ●	5 ○
嘗試定期做運動對我很重要	1 ○	2 ○	3 ○	4 ○	5 ●

例 3 : 你有沒有接觸過以下藥物呢？

	從來沒有接觸	曾有人邀請你使用，但你拒絕了。	曾經使用	若曾經使用，請問你在過去 30 天內用過多少次？（請填數字）

The scopes of health risk behaviours/attitudes being measured include: body weight perception and weight control behaviours, dietary habit, physical activity, safety, mental health, anti-social behaviours and bullying, sexual behaviour and contraception, tobacco use, alcohol and illicit drug use etc.



Epilogue

- 古人善為醫者，上醫醫**未病之病**，中醫醫欲病之病，下醫醫**已病之病**，若不加心用意，於事混淆，即病者難以救矣。
-千金要方

Excellent practice emphasizes **Primary Prevention**;

Good practice pays attention to **Secondary Prevention**;

The average practice concentrates on the **present illness** only

GOVERNMENT

政府

SCHOOL

學校

Academic

學者

Healthy future generation

健康新一代

PARENTS

家長

PRIVATE SECTOR

私人機構





Thank You! Obrigado! 多謝!