

Health Promotion

This training standard was developed for the National Training Service (NTS) Alliance in consultation with subject matter experts.

The purpose of this training standard is to provide a benchmark for knowledge and skills that should be included when providing training on health promotion. This is to help ensure consistency in training content and alignment with best practice.

This standard is not designed to be prescriptive of how, when, or in what format training is delivered.

Version 1.1 (August 2017)

Training Standard:

Health Promotion

The following information outlines benchmarks or competencies for those working in health promotion roles. This is not aligned with the promotion of health services but focuses on Health Promotion.

What: The need for Health Promotion standards	Practitioners are required to provide effective health promotion practice, in collaboration with their communities, to enable community members to increase control over their health, prevent ill health, and to improve their health.
Who: The intended audience	Those working in Stop Smoking and Tobacco Control Service roles inside agencies, non-government organisations, and departments who have the opportunity to promote a collaborative approach to health promotion that upholds the values and ethics that guide health promotion action and practice.
Where: The location of services	Health Promotion is conducted throughout New Zealand in various settings and services where Health Promotion practice is required under service contracts, and on a voluntary basis.
When: The time the services are offered	Health Promotion is an integral part of strategies to enhance healthy outcomes, and to prevent negative health in NZ. Health promotion activities occur all over NZ at different times and places throughout the year. It is not a 9.00am to 5.00pm service, but more of an ongoing strategy to address health that some organisations undertake.
How: The way the process is delivered	Health promotion is delivered through a number of mediums, including community, organisational engagement activities, other face to face interactions, digital and other marketing initiatives.

Benchmarks for Knowledge:

The practitioner is able to:

- Describe at least 3 determinants of health underlying a health issue.
- Describe the significance and application of the Ottawa Charter to health promotion practice in Aotearoa.
- Identify the five strands of the Ottawa Charter and provide at least one example of how each can be implemented.
- Describe four differences between health promotion and health education.
- List five health determinants that impact on their communities and describe how they impact on the people in that community.
- Identify the seven key values that are central to health promotion practice in Aotearoa New Zealand.
- Identify six key health promotion strategies.
- Demonstrate effective learning and skills for beginning health promotion practice.
- Define Health Promotion and values and ethics that underpin Health Promotion practice.
- Deliver and measure the knowledge of and the significance of key documents relevant to health Promotion practice in Aotearoa.
- Describe the range of health promotion strategies and key tools necessary for effective practice.
- Advocate that political, economic, social, cultural, environmental, behavioural and biological factors can support health, prevent ill health, or be harmful to it.
- Describe the three approaches to health – the medical, behavioural and socio- environmental approach and give an example for each.
- Describe how health inequalities are created and continue to exist in NZ.
- Describe how colonisation led to increased incidences of infectious diseases, lung cancer, cardiovascular disease (heart disease and stroke), diabetes and suicide amongst Māori.

Benchmarks for Skills:

The practitioner is able to:

- Apply the Ottawa Charter to related health issue.
- Provide Health Promotion practice that relates to the articles of Te Tiriti O Waitangi.
- Advocate for positive change to the determinants of health that underlie health issues.
- Advocate that political, economic, social, cultural, environmental, behavioural and biological factors can support health, prevent ill health, or be harmful to it.
- Utilise the range of health promotion strategies and tools to affect positive change in communities.
- Uphold the key values of health promotion practice in Aotearoa.
- Work with in the ethical guidelines that underpin health promotion practice.
- Promote coordinated 'easy choice' action that leads to health, income and social policies that foster greater equity including joint action identification and removal of obstacles.
- Enable health promotion action for reducing differences in current health status and ensuring equal opportunities and resources to enable all people to achieve their fullest health potential
- Mediate across collaboration partners to ensure a coordinated action by all concerned and ensuring people in all walks of life are involved as individuals, families and communities.
- Develop and adapt health promotion strategies and programmes to the local needs and possibilities of individual regions to take into account differing social, cultural and economic systems.
- Work collaboratively to set priorities, make decisions, plan strategies and implement actions to achieve better health.

**Benchmarks for Skills:
(cont'd)**

- Empower communities - their ownership and control of their own endeavours and destinies.
- Promote self-help and social support, and to develop flexible systems for strengthening public participation in and direction of health matters.
- Ensure there is full and continuous access to information, learning opportunities for health, as well as funding support.
- Work in ways to promote the personal skills required for individuals to enable them to participate and benefit in health promotion activities
- Generate action through educational, professional, commercial and voluntary bodies, and within the institutions themselves to lead a change of attitude which refocus services on the total needs of the individual as a whole person.
- Use monitoring tools to monitor and measure the effectiveness of health promotion activities with:
 - Quarterly checks against baseline measures including:
 - Number of health promotion awareness raising activities and supporting descriptions etc.
 - Percentage aligned with other evidence based policies/strategies and supporting descriptions.
 - Reporting of outcomes achieved by collaborative initiatives.
 - Details of learnings that have occurred through the quarter.

<p>Considerations:</p>	<p>Any training delivered must be focused on measurable results rather than theoretical aspirations.</p> <p>Training delivery needs to align with key documents relevant to Health Promotion practice in Aotearoa.</p> <p>Training must provide Health Promotion practice that relates to the articles of Te Tiriti O Waitangi</p>
<p>Training and assessment consideration:</p>	<p>All training should include measurable learning outcomes and be delivered in a way that best suits the needs to the audience.</p> <p>Attendees should be actively engaged in the learning rather than just sitting listening. This could include, for example, discussion groups, case studies, problem solving card sorts etc where the learner is actively learning rather than passively listening. Trainers may need to take into consideration that many trainees are busy people and need engaging and efficient training options.</p> <p>Any programme should have a mechanism to check the measurable learning outcome was met or provide a reference tool the attendee can use in future.</p> <p>The verb of the learning outcome dictates what the learner is able to do, e.g. <i>Describe three reasons for</i></p> <p>In this case the assessment should have learners each being able to <i>describe the three reasons for ...</i> and this could be achieved in group discussions, a multiple choice quiz (which has the learner identify the three correct descriptions), a take home handy reference card etc.</p> <p>An important aspect to remember is that training has not worked unless learning has been checked.</p>