ASEAN University Network

Health Promotion Network

AUN Healthy University Framework

AUN-Health Promotion Network
Mahidol University, Thailand

2023

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PREFACE

Health promotion has become a main public health priority since the development and dissemination of the Ottawa Charter in 1986. Much development has been observed both at the global and country levels throughout the world. A series of international conferences on health promotion were organized to express the concerns of global communities with regard to the need to improve health of the world population in order to reduce the morbidity and mortality from preventable illnesses. Nevertheless, the success of health promotion has not been clearly observed, particularly among developing countries. There has been a significant discrepancy with regard to the incidence of chronic non-communicable diseases and life expectancy at birth among countries around the world. In a high level meeting of the General Assembly of the United Nations in September 2012, the Assembly had produced a political declaration on the prevention and control of non-communicable diseases (NCD). It was a demonstration of global commitment to address the high incidence and mortality of various NCDs of which majority are preventable. Such commitment should be translated into actions by all organizations and institutions in every country.

Universities are leading institutions in the society as they have an important role in building capacity of people through various academic programmes. Universities can be suitable and acceptable social leaders to promote health of the population through the integration of health promotion in all aspects of academic and administration functions of these high level educational institutions.

Various healthy university initiatives have been implemented in some high level education institutions. In 1998, the World Health Organization (WHO) published a book entitled "Health Promoting Universities: Concept, Experience and Framework for Action" which built upon the experiences from Lancaster University, England. The book provides a broad concept and practical approaches for any university to integrate health promotion programme into the institution. Similar reports were produced by some universities to demonstrate the feasibility of the implementation of healthy university programme. However, long-term actions experiences in this area are limited.

In August 2016, AUN-Health Promotion Network (AUN-HPN) organized an international meeting in Thailand, gathering experts from AUN university members to develop a more detailed framework of healthy university. Based on the agreement from the meeting, experts were assigned to draft the essential contents of healthy university. The written products were collected and edited to form this comprehensive document: the "AUN Healthy University Framework". It is expected that this book would be widely utilized as a health promotion guideline for all AUN member universities, all ASEAN universities and all high level

AUN-Health Promotion Network

Healthy University Framework

Contents

Appendices

INTRODUCTION

World Health Organization (WHO) defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. Health is created and lived by people within the settings of their everyday life; where they learn, work, play and love. Health is created by caring for oneself and others, by being able to make decisions and take actions that will allow oneself to have control over one's life circumstances, and by ensuring that the society one lives in creates conditions that allow the attainment of health by all its members. Health is, therefore, seen as a resource for living a life in dignity and for the advancement of human and social development.

Health promotion, defined by the World Health Organization (WHO) as "the process of enabling people to increase control over, and to improve, their health" is a critical element in the realization of people's health and well-being. As pointed out by WHO, health promotion involves addressing the social determinants of health, i.e. "the social, economic, cultural and political conditions in which people are born, grow, and live that affect health status". This implies that health promotion is not just a responsibility of the health sector, and not confined to the adoption of healthy lifestyles by individuals.

Health promotion goes beyond health care. It is multi-sectoral necessitating the involvement and mobilization of various sectors, groups in society. It is likewise multidimensional comprising of interrelated activities, namely: communication or awareness raising of the general public; education to empower individuals and groups towards behavior change and actions; policy advocacy and formulation to regulate or mandate activities by organizations and public agencies that encourage healthy decision-making; and environmental and structural changes to make healthy decisions and policies more available to the general public.

Every higher educational institutions (HEIs) should adopt a holistic and comprehensive health promotion policy and programme. Doing so will greatly enhance their potentials and contributions to improving the health and wellbeing of the general population and to adding value in the following ways:

- By protecting the health and promoting the wellbeing of students, staff and the wider community through their policies and practices;
- By increasingly relating health promotion to teaching, learning and research;
- By developing health promotion alliances and outreach into the community;
- By implementing healthy workplace related programs;
- By promoting green technology for sustainability.

Furthermore, having in place health promotion programs and policies will enable HEIs to more effectively and efficiently perform their three interrelated functions, namely: education, research and public service. Their constituents, particularly faculty, students, researchers and staff, will be more prepared and equipped physically, mentally, and psychologically to be actively engaged in knowledge production, dissemination and utilization. They will likewise be in a better position to render service to peoples and communities through policy advocacy and change. The development and mobilization of human resources will be optimized, with each sector performing well their roles, duties and responsibilities based on the institutions' vision, mission and goals.

On the other hand, the advancement of HEIs as Health Promoting Universities would have the added value of projecting a positive public image, acquiring more visibility, improving ranking, and potential benchmarking from other agencies.

Engagement and buy-in from senior management is an essential element in advocating the healthy university initiatives. A healthy university programme is usually comprised of a range of different activities, interventions and projects which will cover the needs of faculty, students, staff, community and relevant stakeholders (see Figures 1 and 2). Healthy Settings programs work towards the improvement of many risk factors simultaneously, thus any program must have an inter-disciplinary and holistic approach to public health improvement to achieve sustained success for examples as below.

Figure 1 Potential Initiatives for Student Wellness

PRE-RECRUITMENT HEALTH SCREENING

INTELLECTUAL

SOCIAL WELL BEING;
- NON-SMOKING
- SAFE DRIVING

STUDENT WELLNESS

EMOTIONAL / SPIRITUAL

PHYSICALY FIT

ENVIRONMENTAL
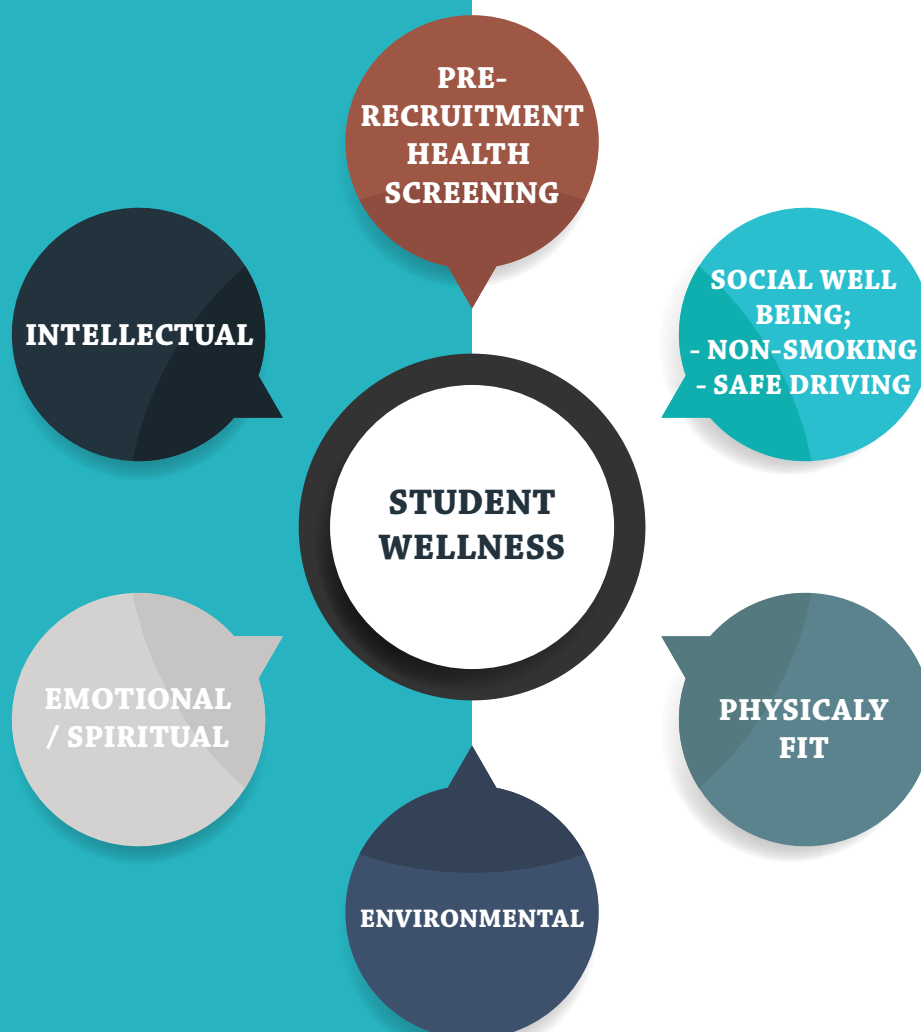
Figure 2 Potential Initiatives for University Staff

PRE-RECRUITMENT HEALTH SCREENING

OUT REACH PROGRAMME

FITNESS PROGRAMME

NCD MONITORING & RISK REDUCTION

PROMOTING NON-SMOKING

HEALTH/ SOCIAL COUNSELING
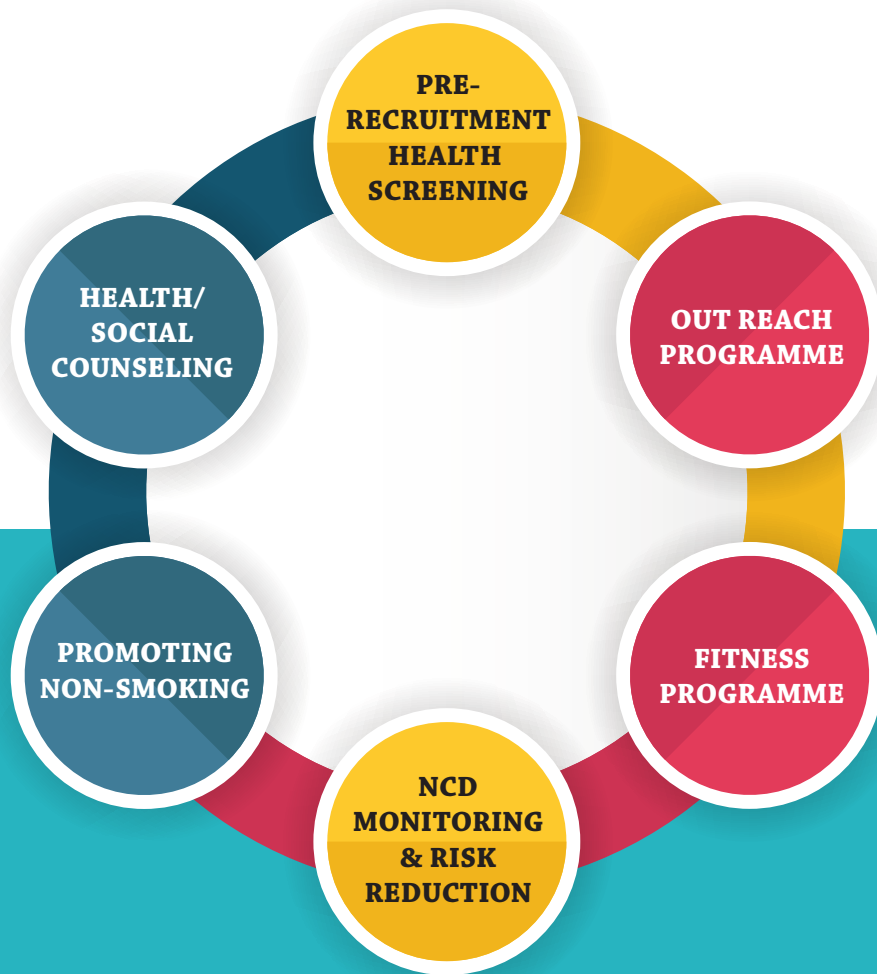
Giving Back to Community

Healthy university initiative is considered to be a beneficial programme for all university constituents --- faculty, students and staff, and also the surrounding communities (Figure 3). The benefits will be multidirectional. Leadership role of universities can influence national policy development in various areas, and health promotion is a critical area that will help countries be successful in attaining long-term health for all.

"A Healthy University aspires to create a learning environment and organizational culture that enhances the health, wellbeing and sustainability of its community and enables people to achieve their full potential."

Source: University of Central Lancashire and Manchester Metropolitan University.

Figure 3 Healthy Universities and the Community
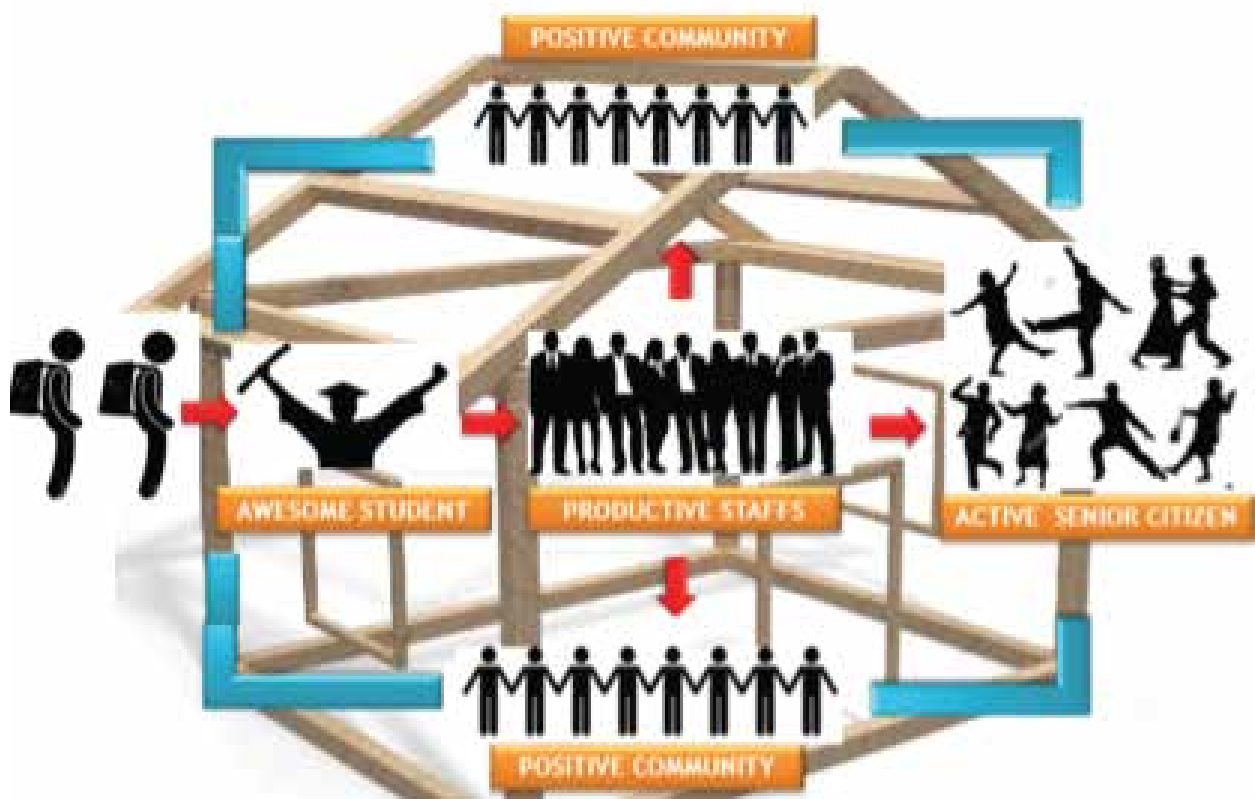
Why health promotion?

Healthy people are assets of the nation. Sound mind and sound body are essential resources for people to learn and live, and take actions for their development and that of their societies and communities. Health can be varied depending on individual factors and environments. Currently, evidences show unhealthy behaviors play portal role in the development of chronic illness such as heart disease, diabetes mellitus, and chronic kidney disease. However, these diseases are preventable and health promotion is a crucial strategy to produce good outcomes of health and increase quality of life. As stated in the Ottawa Charter, health can be maintained and improved; and health promotion is a process of enabling people to increase control over and to improve health. To engage in health promotion, not only should health care providers be mobilized in health promoting activities. All constituents and sectors of the university should take responsibility and be engaged in promoting and maintaining their own lifelong optimal health.

Role of health promotion in universities

University settings are places where many people spend a big part of their lives. Activities on university campuses such as teaching-learning, research, and community/public service can be performed more effectively and efficiently if the various groups and sectors are physically, mentally and psychologically fit and able. Not to mention that the three interrelated functions of universities (education, research and public service) are the most suitable means to strengthen the 5 health promotion directions proposed in the Ottawa Charter, namely:

   (1) build healthy public policy,
   (2) create supportive environments,
   (3) strengthen community actions,
   (4) develop personal skills, and
   (5) reorient health services.

It should be pointed out that the health promotion roles are not limited to medical or health related faculties of any university. As health belongs to every individual in the society; and it should be the roles and responsibility of all categories of university to promote health and wellbeing of the people.

Adolescents and young adults are major groups on campuses. Numerous literatures reveal that adolescents and younger adults tend to ignore their health because they overlook health threats and potential chronic illnesses in the future lives. Moreover, the teaching and support staff suffer from various forms of health conditions caused by unhealthy eating habits, stressful and sedentary lifestyles, smoking, and polluted environment. Therefore, health promotion notion and experiences will be important for students to improve and attain their optimal health as well as develop good habits. Every individual on campus should engage in promoting health activities and controlling over university environments.

Health promotion programs on campus are critical in creating healthy universities composed of constituents who are productive in the discovery, dissemination and utilization of knowledge and skills for human and societal advancement.

Chapter 2

Initiatives to Promote Health and Wellness in ASEAN Universities

University health promotion policies should be developed corresponding to university setting. Concepts related to health promotion should be integrated in curricular and other university programs. Environment support should be created to support health promotion activities such as green and clean environment, exercise place, and healthy food choices. Administrators and instructors should be good role models of health promotion.

Vision

ASEAN Universities are leading institutions in promoting health within universities and beyond
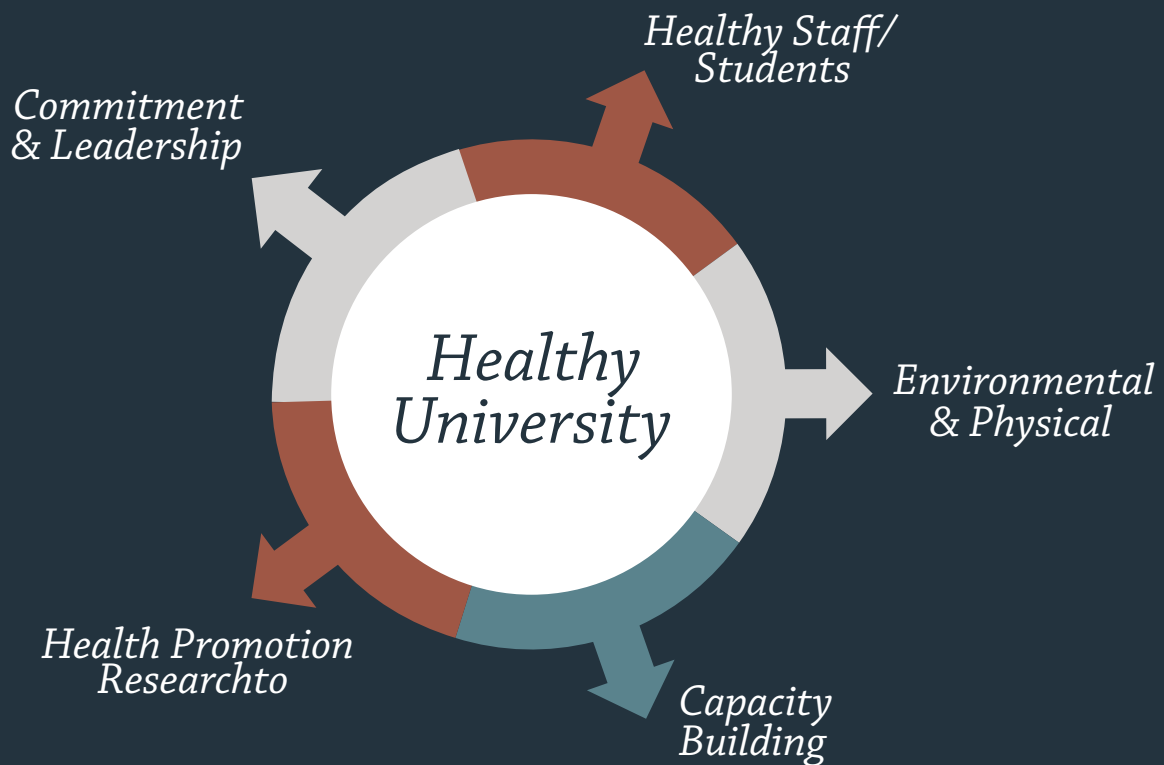
Objectives

1. To set standards for health promotion universities in the ASEAN region;
2. To put to task various sectors of universities in the ASEAN region to address the threats of unhealthy behaviors and poor environment that impact health of university personnel, students and the society as a whole;
3. To promote the role of AUN member universities in the area of health promotion within and outside the universities;
4. To scale-up health promotion activities in all ASEAN universities.

Conceptual Framework for Health Promotion

Theoretically, there are many areas that constitute a healthy university (Figure 4). Based on a document entitled "Health promoting universities: concept, experience and framework for action" developed by WHO Regional Office for Europe, a health promoting university can integrate health promotion activities and various academic and administrative work. The Figure 5 provides a clear frame for the scope of health promotion in a higher educational institution.

Figure 4 Healthy university conceptual framework

Healthy University

- Healthy Staff/ Students
- Commitment & Leadership
- Environmental & Physical
- Health Promotion Researchto
- Capacity Building

The health-promoting university

Curriculum
A university-wide audit to identity opportunities

01

02

Environment
Enhancing teaching and learning facilities,social spaces and access Minimizing waste generation Cycling schemes

Health promotion programmes
Peer led programmes Drugs and HIV education General practitioner registration and access to services

03

04

People
Policies and provision : healthy eating,smoke-free area ,alcohol and drugs,Student induction programmes

Investing in staff
Management training and managing change Minimizing and managing stress Appraisal systems

05

06

Research
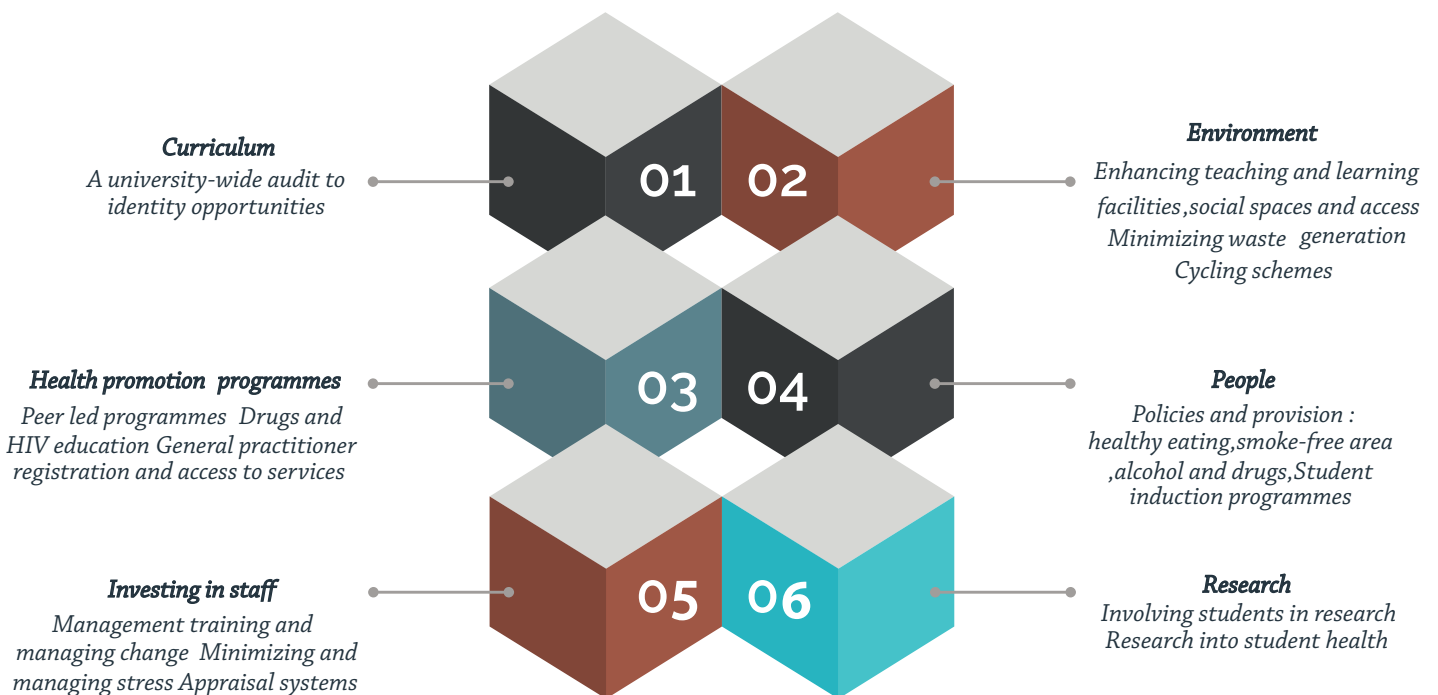*Involving students in research Research into student health*

Figure 5 Areas that should be covered in a health promoting model

The WHO's document also suggests many inter-related issues that could be develop as agenda for action among university administration body (Figure 6). It should be noted that the prerequisite for health university is the policy and commitment of the governing body of the university.
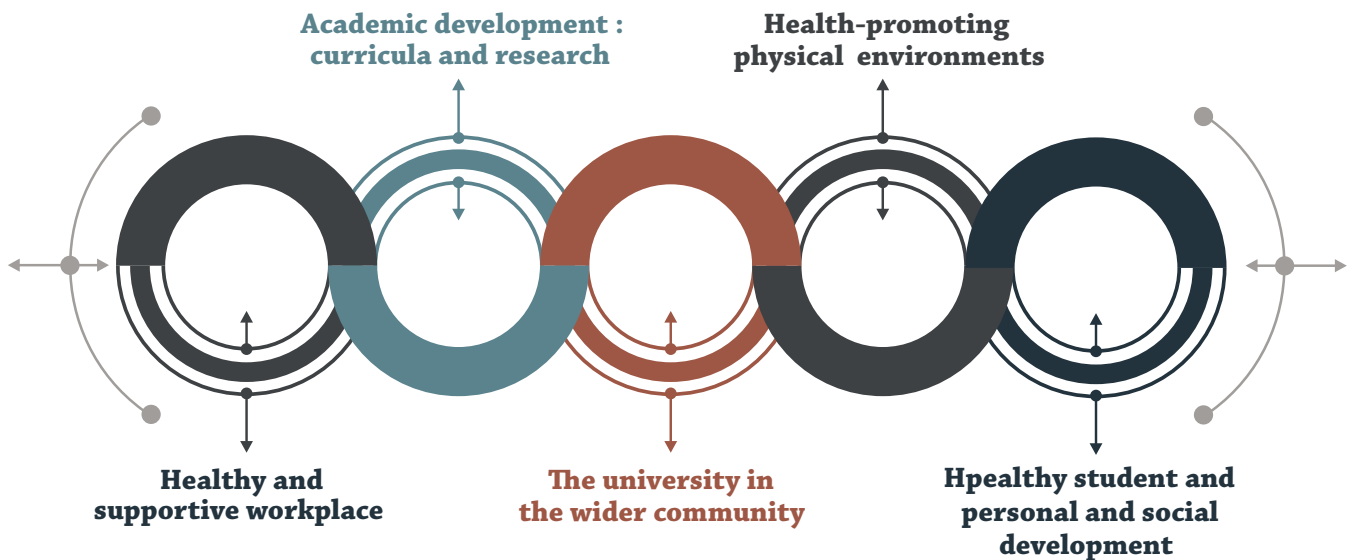
Policy and planning

Academic development :
curricula and research

Health-promoting
physical environments

Healthy and
supportive workplace

The university in
the wider community

Hpealthy student and
personal and social
development

Figure 6 Health-Promoting University: Agenda for Action

Principal determinants of a healthy university

On 29 – 30 August 2016, AUN-HPN organized an international workshop in Bangkok inviting representatives of AUN member universities to participate and develop health university framework. The meeting had agreed on the components of health promotion activities that a university could implement (Table 1, Figure 7). The overall components have become a set of health promotion requirement that should be promoted in order to improve and maintain health status among individuals within the university, near-by communities and the whole society. The details of each component will be described in Chapter 3.

Table 1 Principal determinants of a healthy university

Systems and Infrastructure	Thematic Areas
1. Healthy university polices 2. Safe buildings and safe, clean environment, green environments 3. Health promotion services, counseling and advisory support 4. Equal opportunities including disability friendly 5. Health promotion curriculum and co-curriculum 6. Capacity building on health promotion 7. Health promotion research 8. University volunteerism 9. Budgetary support for healthy university programme	**a) Zero tolerance areas** 1. Smoking 2. Alcohol consumption 3. Illicit drug use 4. Gambling 5. Violence, bullying and sexual harassment 6. Road safety violations including helmet use **b) Health promotion areas** 1. Health literacy 2. Mental well-being 3. Social interaction (e.g. social activities such as student clubs) 4. Physical activity and active mobility 5. Healthy diet and balanced nutrition 6. Safe sexual behavior 7. Work life balance (integration) and healthy ageing

Figure 7 Principal determinants of a healthy university

Systems and Infrastructure

1. Healthy university polices

2. Safe buildings and safe, clean environment, green environments

3. Health promotion services, counseling and advisory support

4. Equal opportunities including disability friendly

5. Health promotion curriculum and co-curriculum
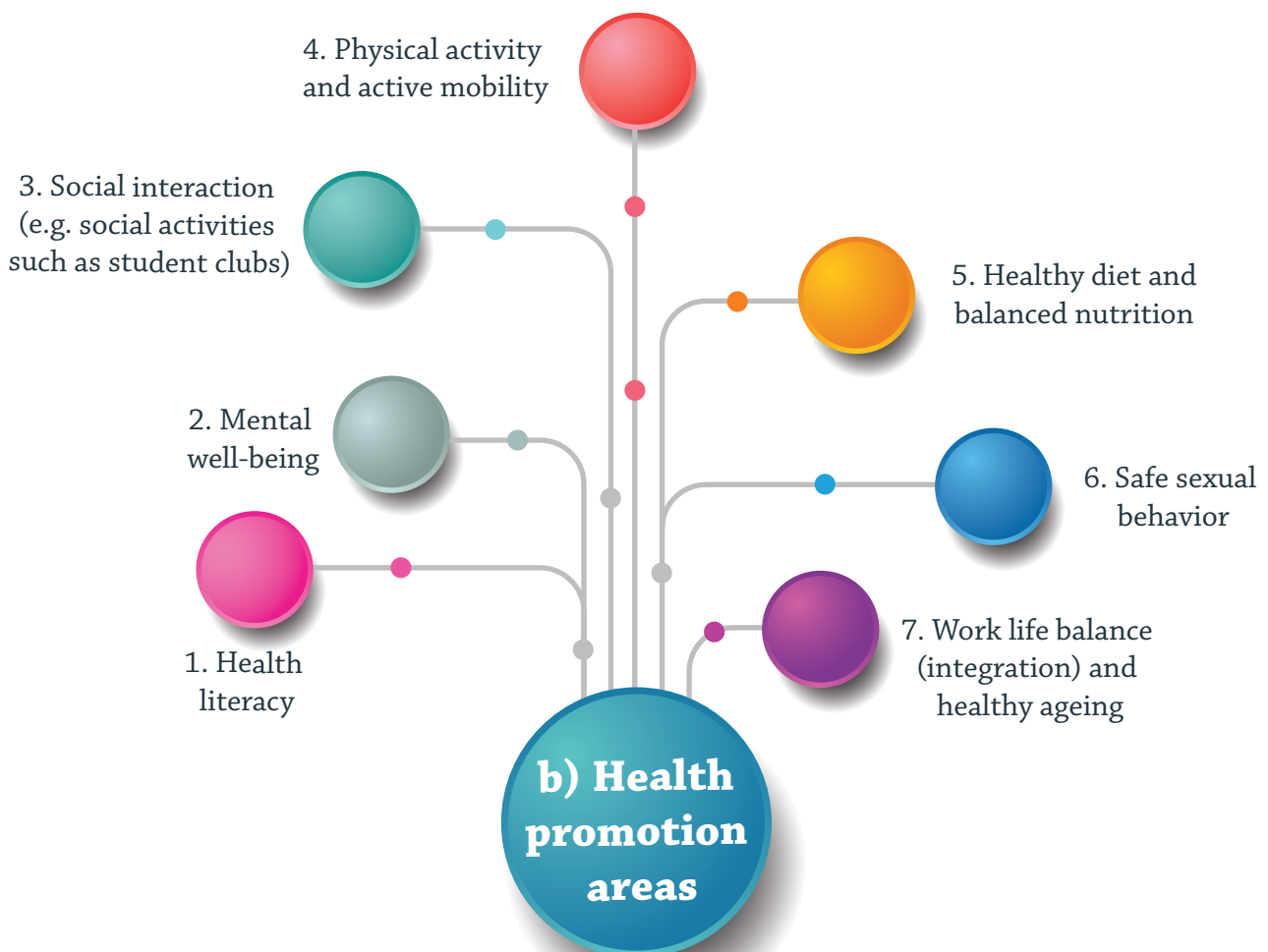
6. Capacity building on health promotion

7. Health promotion research

8. University volunteerism

9. Budgetary support for healthy university programme

Thematic Areas

a) Zero tolerance areas

2 Alcohol consumption

5 Violence, bullying and sexual harassment

1 Smoking

3 Illicit drug use

4 Gambling

6 Road safety violations including helmet use

b) Health promotion areas

1. Health literacy

2. Mental well-being

3. Social interaction (e.g. social activities such as student clubs)

4. Physical activity and active mobility

5. Healthy diet and balanced nutrition

6. Safe sexual behavior

7. Work life balance (integration) and healthy ageing

Chapter 3

Principal Determinants of a Healthy University

As described in the preceding chapter, the Healthy University Framework is comprised of 2 categories of activities: (1) systems and infrastructure areas covering the essential procedures or services required for the implementation of healthy university programme, and (2) thematic areas which are the behaviors or practices that affect health, including the areas that should be avoided (such as smoking or alcoholic drinking) and the areas that should be promoted (physical activity, health diet, etc.).

A. Systems and infrastructure

In order to establish a healthy university, a calibrated system and supporting infrastructure will be needed to serve such purpose. The recommended system and infrastructure is described in the following section.

1. University policies to promote health

The establishment of sound policies has long been acknowledged as a key determinant of success in health promotion. Several successful health promotion programs had policy-level strategies incorporated as part of their driven mechanism. Essential components of the policy are as followed.

Health promotion as a core value

Health promotion should be stated in the written policy of the university as one of the university core value.

Collaboration as a health promotion strategic partnership

Health promotion is a very wide ranging concept that encompasses far more than clinical medicine. Unsurprisingly, alliance from diverse background is required to achieve such a task. On one hand, most of health promotion activities in health-related practices primarily focus on certain aspects of disease prevention. On the other hand, a university that does not explicitly have health promotion in their agenda is unaware of the potential benefits that may be presented to the staff and students. Consequently, we encourage collaborations across different fields of expertise to fill in the gap of practice aiming at a comprehensive health promotion program.

For example, establishing a healthy food market within a campus could lead to collaboration between several sectors. Students from health related faculties can help to regulate types of food to be accepted as healthy ones.

Students from the Business School can be of help when it comes to designing a business financial oriented model versus a social marketing model. Furthermore, students in the field of Architecture and Environmental Study can contribute to the design of the university campus as a whole and to assess the quality and safety of food produce that is available in the university.

Quantitative criteria as a minimal requirement for success

Setting up measurable goal is an important part of long term development. The university must state evidence-based minimal requirement for evaluation of its own health promotion program as a part of their policy. The minimal passing figure must be based on most relevant evidence on the issue as the responsible body of each university which fit and must be describe in details.

Faculty staff and students as change agents in their communities/ family

Staff and students at the university level is irrefutably a current and future leader in their own respective field of practice. As a role model from health promoting university, they should be able to make health change not only for them selves but also for their family and surrounding community.

Mechanism for community implementation as a part of the long term plan

Since health is the matter of everyone, implementation of university – based project to the community field is a pivotal transition to make an impact to the society. As an initial step, the university must provide or allow their responsible working body to set up or join open forum to share their experience from the work to other sectors and also to communicate risk with other stake holders.

2. Healthy working environment, clean and green environment

2.1 Healthy working environment

Since environmental factors contribute substantially to well-being of our health, workplaces affect health of workers in the very same way. According to WHO documents on healthy workplace, the concept of healthy workplace has been gradually developed to encompass related perspectives on health. Thus, healthy working environment should focus on various perspectives including physical factors (occupational health and safety, ergonomics and biological hazards), health behaviors or lifestyle factors, psychological factors (stress management, workplace organization and culture), and also a link to community of the workers. Also, each of these perspectives should be applied to both health protection and health promotion.

As for university level, common standard for safe infrastructure of each university should be developed and implemented. For specific work site such as laboratories, teaching hospitals and factories, common quality assessment such as walkthrough survey has to be scheduled routinely with evidence of passing acceptable criteria or improvement in subsequent assessment. Also, system for injury prevention and detection has to be clearly organized and documented.

2.2 Clean and Green environment

The concept of environmental friendly has been emphasized in many areas to ensure suitable development. Green environment primarily focuses on environmental aspect of workplace including efficient energy usage, waste management, water conservation and eco-friendly transportation. All of these consequently lead to beneficial effects on health. For university level, regulation of efficient energy usage, waste minimization and recycle, and water-saving strategy should be clearly implemented. Assessment methods for each issue should be stated and progression of each usage periodically should be communicated to university students and faculty members. Use of ecofriendly transportation such as bicycle, tram or electrical car should be promoted as suitable for each campus setting.

3. Health promotion services, counseling and advisory support

In addition to standard medical service, health promotion service should be incorporated into part of medical service of each university and also as separated program for maintaining good health. Since health promotion encircles broader aspect of health more than just medical treatment, adding health promotion service into the system can be done at several levels. A certain responsible body should be assigned to oversee this type of service in each university. For non-health related university, strategic partnership with health related university or training of their own staff with AUN health promotion capacity training program is recommended. Some university may provide routine medical checkup for their faculty members annually. However, the checkup service could be viewed as unnecessary and sometimes harmful without proper counseling on the results of the check up and also health promotion advice on maintenance of healthy lifestyle.

Apart from health promotion service which is added into established medical service, health promotion service could be offered separately as well. For instance, advice on ergonomics could be provided to all office workers especially those who work continuously in front of computers for a long period of time before and occasionally during work to prevent office syndrome.

4. Equal opportunities including disability friendly

Equal opportunity in this setting mainly concern two aspects which are equal opportunity of health promotion in each campus and for disability.

Since universities can have several campuses, every campus in each university must have equal chance of participation in health promotion. At administrative level, all health promotion related policy from the university must be applied to all campuses with suitable strategy for each campus setting. At campus level, any campus should design the health promotion program by taking into account the lifestyle and environment or in another word, the social determinants of health of the staff, student and faculty members accordingly.

Disability friendly should also be taken into account to make sure that people with disability can have access and participate in health promotion activities as well. People with disability may need additional support in certain area of health promotion such as Entrance, exercise equipment, or locker room facilities. Therefore, health promotion policies, activities and services should be publicized throughout the university including the disability group. Moreover, regarding the disabled, community based program could be developed if needed.

5. Health promotion curriculum and co-curriculum

Health promotion must be engraved in the curriculum and endorsed in co-curriculum. For the standard curriculum, health promotion must be covered in general education and also illustrated in related aspect of certain professional. Health promotion itself has been widely taught in health related university as a general knowledge for practice. For non-health-related university, integration of health promotion to each respective professional must be found in the curriculum. For example, engineering students should know issue related to physical aspect of health promoting workplace or law students should know impact of law and regulation on health promotion.

For co-curriculum, health promotion activity should be clearly highlighted as one of the endorsed type of activity. In addition, co-curriculum that falls in the category of health promoting university project should receive support from the university similar to other university projects.

6. Capacity building on health promotion

Capacity building is an integral process to deliver, implement and sustain health promotion. Capacity building is a development in various aspects including knowledge, skills, commitment, structures, system and leadership aiming at facilitating effective health promotion programme. Dealing with complex nature of health promotion, individual training is inefficient to achieve such outcome. Therefore, different levels of training will be provided by AUN as followed.

1.) Policy service and advocacy level
2.) Health service and surveillance level
3.) Support staff and volunteer level

The training will aim at establishment of common knowledge of health promotion practice among different professions. Each respective university will be required to send their staff to attend each training as needed. The trained staff will be held responsible for supporting the development of overall health promotion activity of the university in each region.

7. Health promotion research

Research topic related to health promotion in the university should be emphasized. Since measure of outcome for health promotion intervention could be problematic, different levels of outcome assessment is recommended as followed.

1) Change in psychological aspect: knowledge, attitude and practice
2) Change in behavioral aspect
3) Change in biomedical aspect
4) Change in epidemiological aspect
5) Change in quality of life and economic aspect

8. University volunteerism

Volunteer for health promotion work should be provided. This kind of activity can be either organized within the university or outside the university as part of community-based program. The participant of the program should not include only university students but also faculty members and alumni as well.

9. Budgetary support for healthy university program

Apart from regular support for other projects of each university, budgetary support must be established for any project of healthy university program. The use of this budget should be regulated appropriately with each university setting. The decision upon the support to be either full or partial support can be made from the responsible body of each respective university.

B. Thematic Areas

a) Zero tolerance areas:

The following issued are considered unacceptable in university settings, and thus, they are classified as zero tolerance areas. Universities should take strong action to prevent and control these health damaging behaviors.

1. Smoking

In most countries, cigarette smoking is quite popular particularly among young people despite the various prevention efforts which include the tobacco control law. With the high incidence of illnesses caused by smoking, WHO in 2003 developed the WHO Framework Convention on Tobacco Control (WHO FCTC) to urge countries to put more efforts in response to the globalization of the tobacco epidemic. With the FCTC implementation, the tobacco consumption rate is reported to be slightly declining. However, the overall impact is still limited. NCDs from tobacco use are still increasing among most countries around the world.

Universities have a crucial role in the prevention and control of smoking in education setting; and should present themselves as models for smoke free institutions. Many anti-activities can be performed including the smoke free policy development, banning of smoking with the campuses, education and teaching activities, counseling and smoking cessation services for smokers (both staff and students), etc.

2. Alcohol consumption

Alcohol consumption in education settings should be considered socially inappropriate and unacceptable. Universities should have a policy to prohibit selling of alcohol within the universities and the vicinity. All functions within or supported by universities should be made alcohol-free.

3. Illicit drug use

It is illegal for any individual to traffic or consume narcotic drugs. University programme for drug control is essential. As well, drug counseling services should also be available for staff and students.

4. Gambling

Gambling is generally illegal; and should be strictly prohibited in educational settings. University programme for gambling control should include a strong policy statement as well as a management system for this matter.

### 5. Violence, bullying and sexual harassment

Violence and sexual harassment are not uncommon. A strong policy announcement against such behaviors is essential. A system to monitor any incident of violence or sexual harassment is necessary.

6. Road safety violations including helmet use

Road traffic accident is a common cause of disability and deaths. Most countries have a law to enforce seat-belt use while sitting in a car and wearing helmet for motorcyclist. Efforts should be made to enforce the road safety law in university compounds. In countries where seat-belt and helmet laws are not available, universities should take lead in advocating the safety models and put efforts toward development of the essential laws.

b) Health promotion areas:

In contrast to the prohibition or zero tolerance areas mentioned above, the following areas are proposed to be essential components that should be promoted in order to fulfill the criteria of healthy university.
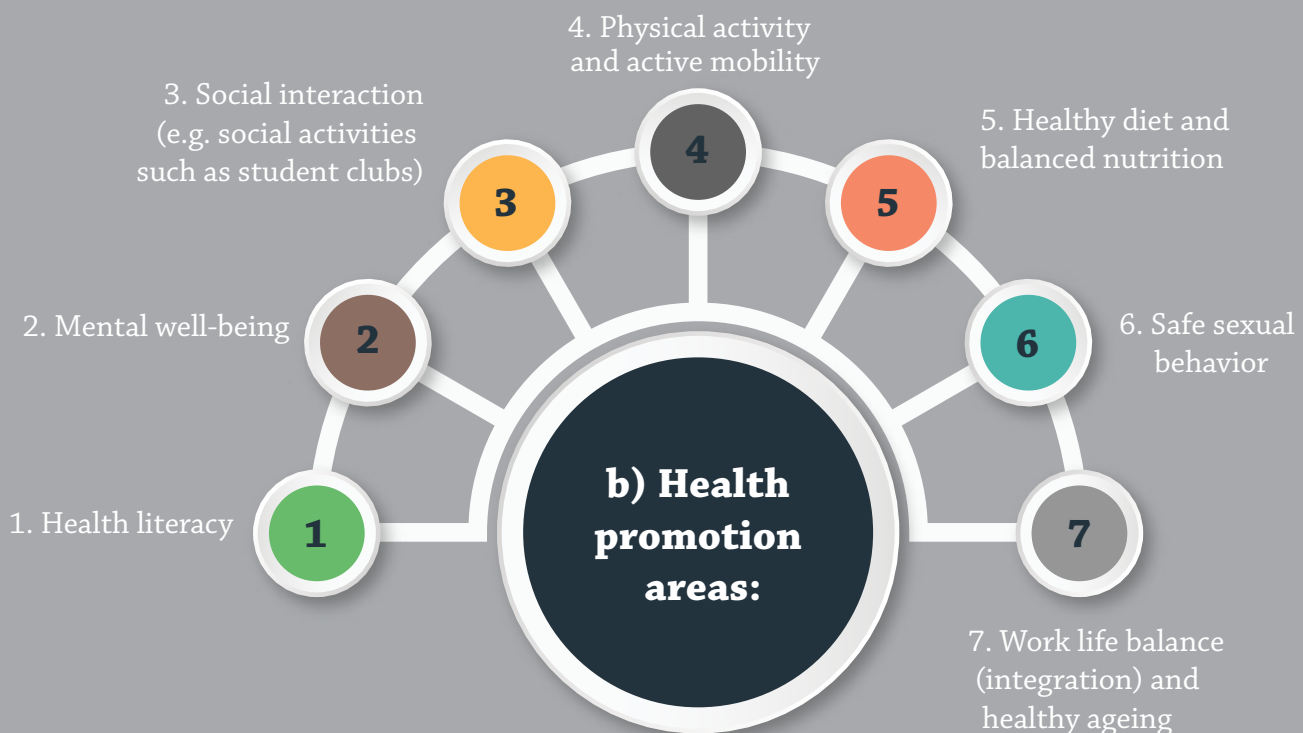
All 7 areas have been proven beneficial for promoting health. For example, the concept of health literacy should be emphasized in all types of universities, and not only in those with medical and health education. All students should be equipped with essential health knowledge so that they would be able to develop healthy behaviors as well as to become health promoters in their future working environment. As for the healthy diet and balanced nutrition, the rapidly increasing trends of obesity is a strong evidence of improper diet consumption making the individuals susceptible to various chronic NCDs in the future. As well, safe sexual behaviors are widely promoted for young people to prevent AIDS, sexually transmitted infections (STI) and unwanted pregnancy. It should be noted that healthy ageing is not aim for students. It is intended for university staff and people in the surrounding communities.

Chapter 4 — Implementation Framework of Healthy University

In order to launch the implementation framework of Healthy University, 4 key areas are identified (see Table 2):

1. Policies

It is important to firstly secure a high level of commitment through leadership and advocacy of senior decision-makers to enable the approval of university policies and documents for the Healthy University Framework. The AUN Secretariat will introduce the draft framework to participating universities for endorsement. These policies are to be embedded into the organizational philosophy and culture so that the responsible announcements or declarations of the policies can be made officially.

2. Awareness and Action

Once these policies are declared, activities and programmes in thematic areas can then be launched, such as:

o Anti-smoking programs
o Alcohol free initiatives
o Enforcement teams
o Road safety violation programs
o Health promotion programs
   - health literacy
   - mental well-being
   - stress management
   - physical activity
   - safe sex education

These programmes should allow and enable a wide-range participation and active involvement of students and staff in planning and delivering actions of such activities.

3. Behaviours

It is important that these activities are outcome-based and that they are evaluated and monitored to ensure that key performance indicators are achieved.

4. Operational Structure

The operational structure shall be made up of the following:

(i) Secretariat: The structure of body representing the University, with the following aims:
- To ensure implementation of the framework (e.g. Wellness Centre)
- To oversee the Advisory Group and Working Group (WG)

(ii) Advisory Group composes of representatives from multi-sectoral groups such as Finance, Human Resource, Estate development, security, Student Union, safety and health, academic affairs etc, with the following aims:
- To assist in the implementation the framework and set the directions
- To supports the ideas/ suggestions of working groups
- To decides on feasibility of WG strategies

(iii) Working Group: compose of representatives from different faculties. The head of each working group would be an expert in a particular thematic area.
The aims of this group are:
- To carry out the implementation of the framework
- To formulate a work plan and identify strategies in thematic areas.
    - Zero tolerance (smoking, alcohol, drugs, gambling, violence, physical & road safety)
    - Health promotion (physical activity, proper nutrition, mental well-being, social integration, safe sex)
- To seek advice from the advisory group upon implementing the operational plan
- To act as an operations team when implementing the strategies finalized by working group
- To recommend the strategies to the Faculty Dean
- To measure activities in staff and student for the purpose of feedback and monitoring

Table 2 Implementation Framework of Healthy University

POLES ➔ AWARENESS & ACTION ➔ BEHAVIOURS

Leadership and Governance	Processes	People	Output and Outcome

● University policies documents
● anncuncements
● responsible body university committec
	Activities and programs in themetic arcas, c.g.
	● antismoking programs
	● alcohol free initiatives
	● enforcement teams
	● road safety violation programs
	● health promotion programs
	  ○ health literacy
	  ○ mental well-being
	  ○ stress management
	  ○ physical activity
	  ○ safe sex education
		● Participation of staff and students in program	● Key Performance indicators
			● Evaluation and Monitoring

Operational Structure

- ○ *Body or Secretariat (Structure of body representative the University)*
- ○ *Supporting Groups (Secretary,Advisory Group,Working Group)*
- ○ *Strategy and Operation Plan*
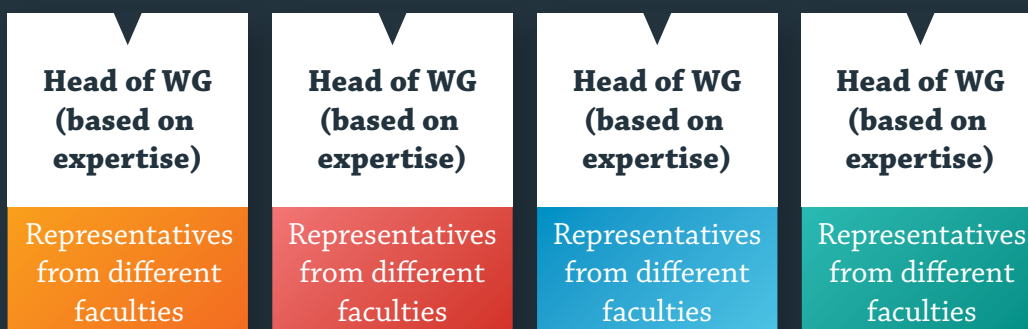
Operational Structure
Top management
Body or Secretariat
Advisory Group (AG)
(Representatives from multi-sectoral groups, Finance, HR, Estate development, security, Student Union, safety and health, academic affairs)
Working Group (WG)

A. systems and infrastructure	B. zero tolerance areas in healthy university	C. promotion of health promotion strategies in healthy university
1. Safe buildings and infrastructure	1. Smoking	1. Health literacy
2. Clean environment	2. Alcohol consumption	2. Mental well-being
3. Green environment	3. Illicit drug use	3. Social stimulation (e.g. social activities such as clubs)
4. Health promotion services	4. Gambling	4. Physical activity & active mobility
5. Counseling services	5. Violence, bullying and sexual harassment	5. Healthy diet and balanced nutrition
6. Advisory support program	6. Road safety violations including helmet use	6. Safe sexual behavior
7. Equal opportunities policy		7. Work life balance and healthy ageing
8. Disability friendly		
9. Health promotion issues integrated in curriculum or co-curriculum		
10. Capacity building on health promotion		
11. Health promotion research		
12. University volunteerism		

Head of WG (based on expertise)	Head of WG (based on expertise)	Head of WG (based on expertise)	Head of WG (based on expertise)
Representatives from different faculties	Representatives from different faculties	Representatives from different faculties	Representatives from different faculties

Chapter 5

Assessment, Monitoring and evaluation of Healthy University

As the implementation framework covers key areas of interests including policies, awareness and action, behaviors and operational structure, the progress of these key areas would be strengthened by monitoring and evaluation of each university according to assessment criteria (quality assurance in the following section). A goal, missions, values, and process of the monitoring and evaluation process should be stated as follows:

Goal

To propose a mechanism for universities to mentor the progress towards healthy university

Mission

To monitor and feedback results of a process of assessment and evaluation according to criteria of healthy university to universities and empower them to have internal mechanisms to response to all challenges.

Values

Core values of the monitoring process are as follows
- Accountability/ transparency
- Stakeholders' participation/engagement
- Responsiveness

Process monitoring and evaluation

A. Internal assessment
Each university sets up a mechanism for self-assessment regarding her level of progression towards healthy university annually.
B. External evaluation
A biannual evaluation form external committee to monitor the progression of each individual university towards healthy university and to compare the results with fellow universities.

Responsiveness mechanism

Based on values of accountability/transparency and stakeholders' participation/ engagement, universities have to set up a procedure of the internal assessment to bring several stakeholders to participate in the assessment. The procedure should be going towards deliberative process that all related information should be provided to participating stakeholders. With relevant information at hand, the stakeholders should have a chance to openly ask, think and discuss before coming up with constructive assessments. The results of the assessments will be reported to the top level policy makers of each university and there should be a process to response to the assessments' challenges.

For external evaluation, a group of 5 -10 delegates from peer universities might come to evaluate fellow universities using quality assurance criteria in the friendly manner. The results of the evaluation would be benchmarked with all universities who commit to develop healthy university.

APPENDIX

AUN-HPN Quality Assurance Checklist

For the effective implementation of healthy university initiative, suitable tools should be developed to assess the progress and identify the gaps so that specific improvement mechanism can be identified and applied. A standard assessment tool can also be used to compare the achievement on health promotion among all participating universities. The following tools are proposed to be used in the evaluation process:

A. Simple healthy university check list of "yes" and "no"
B. Rating scale healthy university check list:

A university can select either the tool A or tool B or both. Effort will be made to develop a unified form to be used for the ASEAN region.

A Healthy University Check list

This set of tool is a qualitative assessment of the health promotion work. It only measure the outcomes in the form of "yes" or "available" and "no" or "not available"

1 Announcement of policy directions and plans to create a good vision for students/staff to get to know and practice health promotion, and monitor, evaluate the development of continuous improvement.

2 Vision, Principles and Practice:
- Is there explicit commitment to Healthy University vision and principles?
- Is there explicit commitment to developing and applying a "whole university" approach to improving health and well-being?

3 The administrators have a good attitude towards health promotion and demonstrate as role models.

4 Leadership, Governance and Support:
- Is there a high-level steering group or other appropriate governance structure able to support and implement a „whole university approach?
- Is there an identified coordinator (or equivalent)?
- Have sufficient resources been identified and committed to support the initiative?

5 Strategic and Operational Planning and Audit
- Is there an overarching strategic commitment to being a healthy university?
- Have mechanisms been established to integrate the initiative into organization development and corporate/strategic planning processes and demonstrate connectedness to core drivers (e.g. recruitment, retention, experience, performance, sustainable development)?
- Is there a commitment to undertaking appropriate operational planning (likely to involve stakeholder mapping/needs assessment; prioritization; action planning; delivery; evaluation/performance review; recognition/celebration)?
- Is there a willingness to develop appropriate infrastructures to support planning and delivery?

6 Working Within and Across Key Focus Areas and Themes:
- Is there evidence of the healthy university initiative working to create or strengthen healthy and sustainable learning, working and living environments?
- Is there evidence of the healthy university initiative working to integrate health and sustainable development as multi-disciplinary cross-cutting themes in curricula, research and knowledge exchange?
- Is there evidence of the healthy university initiative working to contribute to the health, well-being and sustainability of local, regional, national and global communities?
- Is there evidence of the healthy university initiative demonstrating a "whole university approach to theme-based work?

7 Partnership and Networking:
- Is there a demonstrable commitment to multi-sectoral partnership working in relation to the healthy university initiative?
- Is there commitment to participating actively in the national healthy universities network through attending meetings, working in partnership with other universities and providing case-studies for wider dissemination?
- Is there commitment to sharing knowledge and experience, to supporting other universities at an earlier stage in their development of the healthy university approach and/or to participating in peer review?

8 To promote the exchange of knowledge empowerment to personnel and students.

9 Survey and improve the atmospheric landscape architecture, environmental fabric of the building in the area of occupational health, safety food services, and system performance contributing to personnel health promotion activities.

10 Encourage staff and students with campaigns to promote health in various occasions consistently in order to set a good example in health promotion.

11 Fully support community in the field of health promotion services as well as mediators for creating a network of health promotion, community, private organizations, and patient group themselves (Self-help Group).

12 Create values for staff awareness in health promotion.

13 Provide screening system for health risk factors and develop health promotion system for students and staff.

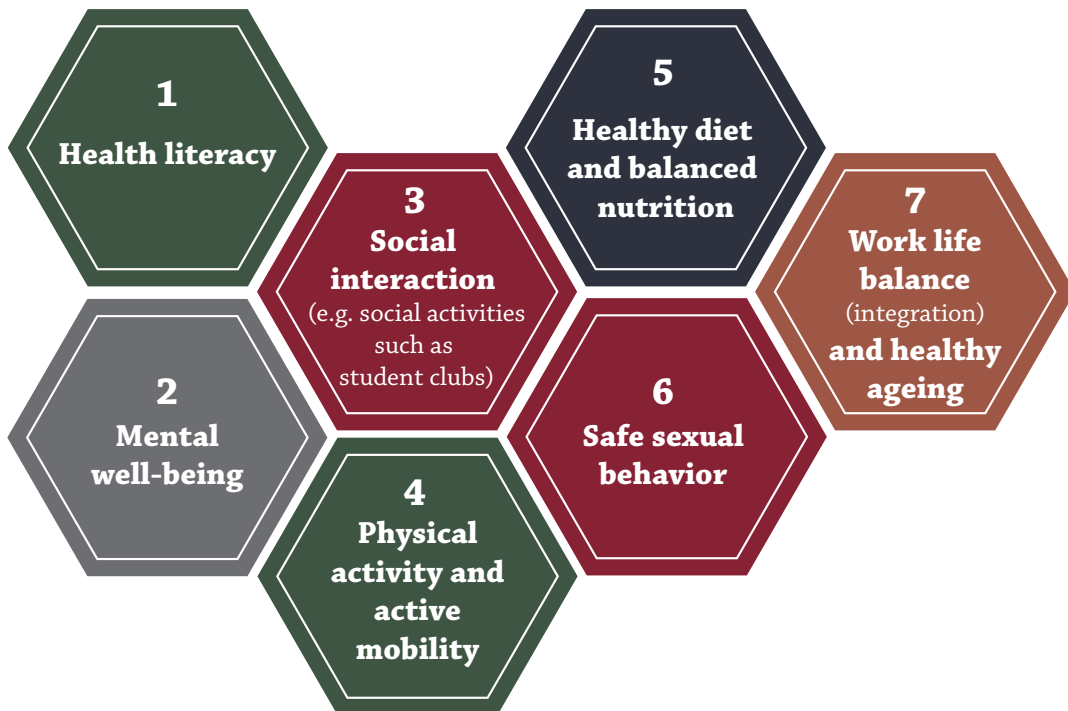**14** Existence of the work on the healthy university key areas:

Systems and Infrastructure

1. Healthy university polices

2. Safe buildings and safe, clean environment, green environments

3. Health promotion services, counseling and advisory support

4. Equal opportunities including disability friendly

5. Health promotion curriculum and co-curriculum

6. Capacity building on health promotion

7. Health promotion research

8. University volunteerism

9. Budgetary support for healthy university programme

Zero tolerance areas:

1 Smoking

2 Alcohol consumption

3 Illicit drug use

4 Gambling

5 Violence, bullying and sexual harassment

6 Road safety violations including helmet use

Health promotion areas:

1 Health literacy

2 Mental well-being

3 Social interaction (e.g. social activities such as student clubs)

4 Physical activity and active mobility

5 Healthy diet and balanced nutrition

6 Safe sexual behavior

7 Work life balance (integration) and healthy ageing

B Rating scale healthy university check list

B1. Rating Scale
(Modified from AUN-Quality Assurance)

Rating	Description
1	**Non-existent or Absent** The specific determinant of healthy university is not implemented. There are no plans, documents, evidences or results available. Immediate improvement should be made.
2	**Inadequatet** The practice on the specific determinant of healthy university to fulfill the criterion is still at its planning stage or is inadequate where improvement is necessary. There is little document or evidence available. The performance of the practice shows little or poor results.
3	**Satisfactory or Adequate** The practice on the specific determinant of healthy university is adequate and evidences support that it has fully been implemented. The performance of the practice shows consistent results as expected.
4	**Excellent or Best Practice** The practice on the specific determinant of healthy university is considered to be excellent or example of high class practices in the field. Evidences support that it has been innovatively implemented. The performance of the practice shows excellent and outstanding results.

B 2. The Healthy University Check List

AREAS	1	2	3	4
1 Adoption and integration of university policy on health promotion				
1.1 Promoting healthy and sustainable policies and planning throughout the university. The health-promoting university incorporates health and sustainability as key criteria in planning and policy decisions. 　　a. Adoption of the underlying philosophy and values 　　　• There is a steering group overseeing the healthy university framework and its membership reflects the range of stakeholders in the university 　　　• Equity is a guiding principle in selecting priorities for action 　　b. High profile of health 　　　• Media coverage (internally and externally) 　　　• Newsletters 　　　• Annual reports 　　　• The university has a published health profile 　　c. Management commitment to the healthy university framework 　　　• University policy and mission statements 　　　• Resources are allocated 　　　• Health needs are assessed 　　　• An exercise to develop a shared vision of the health-promoting University 　　　• Agreed evaluation strategies and protocols 　　d. Networking 　　　• Cooperation with other universities at the regional, national and international levels 　　　• Participation in the meetings and conferences of national and international networks				
1.2 Adoption of healthy policies and strategies in key policy areas such as 　　a. Basic Facilities and Services 　　　• Healthy and sustainable physical working environments The health-promoting University seeks to create working and learning conditions conducive to health and to adopt good practice in employment policy 　　　　i.　Safe buildings and infrastructure 　　　　ii.　Clean and green environment 　　　　iii.　Disability-friendly facilities 　　　　iv.　Energy conservation 　　　　v.　Waste management and promotion of recycling 　　　　vi.　Incentives for travelling via public transport, cycling and walking 　　　　vii.　Changing university purchasing to more ethical and environmental products and more local services				

AREAS	1	2	3	4
1 Adoption and integration of university policy on health promotion				
1.2 • Health care accessibility promotion and risk surveillance The health-promoting university seeks to identify the specific health needs of its population and to provide a coordinated response by all the primary health care and welfare agencies within and outside the university 　i. Physical health services 　ii. Mental health services • Healthy and supportive social environments. The health-promoting university encourages diversity, choice and accessibility (in terms of availability and cost) in providing services and facilities 　i. Facilities for fitness, relaxation, creativity 　ii. Social activities such as clubs 　iii. Healthy ageing and retirement • Health promotion issues integrated in curriculum and/or co-curriculum programs and research. The health-promoting university seeks to exploit its potential for contributing to health gain by developing the curriculum and research across all university faculties and departments 　i. A university-wide audit to identify opportunities 　ii. Interdepartmental projects for health promotion and research involving for example: arts, history and management studies departments 　iii. Involving students in research on health promotion 　iv. Research into student and staff health • Capacity building and volunteerism on health promotion. The health-promoting university seeks to maximize its role as an advocate for health in the community by creating partnerships, acting as resource for the community, leading through example and exercising its power as a lobbying force for health. 　i. Relevant faculty and staff development 　ii. Alliances for health with external agencies 　iii. Initiatives for health involving partnership with communities				

AREAS	1	2	3	4
1 Adoption and integration of university policy on health promotion				

1.3 Zero-tolerance areas:
  a. Implementation of anti-smoking program
  b. Implementation of alcohol-free initiative
  c. Implementation of program to prevent illicit drug use
  d. Implementation of program to prevent gambling
  e. Implementation of program to prevent and control violence, bullying and sexual harassment
  f. Implementation of program to control road safety violations including non-helmet use				

1.4 Health promotion strategies on the following areas:
  a. Implementation of health literacy programs
  b. Implementation of mental well-being and stress-management program
  c. Implementation of social engagement and social stimulation program (e.g. social activities such as clubs)
  d. Implementation of physical activity and active mobility program
  e. Implementation of program to promote healthy diet and balanced nutrition
  f. Implementation of safe sex education and behavior program
  g. Implementation of healthy workplace program				

AREAS	1	2	3	4
2 Assignment for responsible body for healthy university program				
3 Formation of high level university committee				
4 Formation of specific working groups on thematic health promotion areas				
5 Allocation of sufficient funds and resources to support healthy university activities				
6 Availability of healthy university annual workplan				
7 Availability of healthy university database				
8 Demonstrable multi-sectoral partnership working in relation to the Healthy University initiative				
9 Participation of faculty union and/or staff organization in the university healthy program				
10 Involvement of student union or organization in the healthy university program				
11 Available program to promote health in partner communities				
12 Evidence on creating health promotion to networks, communities, private organizations and other advocacy groups.				
13 Create values for faculty, staff and student awareness in health promotion				
14 Promote work-life balance: financial, family and individual health				
15 Organize screening system for health risk factors and develop health promotion system for students, faculty and staff				

Appendix 2

Examples of University Policy on Healthy University

A systematic review revealed that Health Promoting University approach was first promoted in England in the mid-1990s. Since then, similar initiatives were developed in other countries in Europe, Asia, and Latin America. The common objectives of a Health Promoting University are:

- **A** To promote healthy and sustainable policies and planning throughout the university
- **B** To provide a healthy working environment
- **C** To support the healthy personal and social development of the persons involved
- **D** To ensure a healthy and sustainable physical environment
- **E** To encourage wider academic interest and development in health promotion
- **F** To develop links with the community
- **G** To advocate the concept of health promotion for local and national policy development

The results of a Health Promoting University program should demonstrate the extent to which health has been integrated in the culture, structure and processes of the university; and the extent to which the health of the members of the university community improved.

The implementation of the policies according to these key objectives may be described in terms of process and impact, rather than outcomes, whereby collaboration and networking are key elements. Therefore the evaluation of healthy university will follow these key elements.

Moreover, universities can also demonstrate improvements in terms of service, academic performance, and providing conditions for good health.

As countries and cultures differ, the context for implementing the approach also varies widely. Since health promotion interventions are more effective when they are adapted to the local context. In other word, Health Promoting University initiatives should be adapted to local culture and organizational characteristics.

Examples of university policy on healthy university

Establishing Health Promoting Universities entails several areas of actions e.g.
- The development of personal skills and knowledge regarding health
- The creation of healthy environments
- The incorporation of health issues in the curriculum
- The development of healthy policies
- Activities with the local community
- The continued provision of health services
- The subject of healthy workplaces
- Research was also considered an area of action

In addition, there are some common health topics that are addressed in the context of a Health Promoting University.
- The prevention of alcohol and drug abuse was mentioned most often
- Activities focused on mental health
- Healthy eating
- Sexual health and STI/AIDS prevention
- Road safety and transportation
- Physical activity
- Smoking cessation and promotion of smoke-free spaces
- Other issues mentioned included building design

External evaluation of healthy university

While the importance of evaluation was acknowledged in all health policy, details on the type of evaluation performed were provided in a few studies. Most evaluations involved the use of questionnaires or interviews with students, teachers and/or workers.

Questionnaires were used either to measure modifications in knowledge and health-related behaviors, or to identify needs and opinions about different aspects of the project.

A few studies reported the results of the evaluation process, observing improvements in the well-being of members of the university community and in the physical and social environment. An increase in health-related knowledge and decrease in harmful behaviors among students were also reported in these studies (Table 3).

Table 3 Description of the aspects of implementation of Health Promoting University in the different studies

Study	Country	Area of action	Items of work	Evaluation	Coordination
Dooris (2001)	England	The policy process;student development; healthy workplace; healthy environments; academic development; health of the wider community.	Sexual health; building design; transport and mental well being.	Faculty of Health in partnership with other faculties and services.	Yes (ref. without detail)
Dooris (2002)	England	The policy process; student development; healthy workplace; healthy environments; academic development; health of the ider community.	Mental wellbeing; sexual health; building design; transport; drugs.	Faculty of Health.	Yes (ref. without detail)
Xiangyang (2003)	China	University policies; health supporting environments; personal skills; health services; actions with thcommunity	Smoking control; mental health; STI/ AIDS prevention; sexual health; physical exercise and healthy diet.	Health and education authorities of Beijing. Supported by the WHO.	Yes. Qualitative/ formative and quantitative/ summative.
Dooris (2010)	England	Healthy policy; healthy environments; curriculum; research; social support systems; organizational culture; relation with the community.	Mental wellbeing; physical activity; healthy eating; alcohol; sexual health; smoking control; drugs; sustainabiand transport.	Human resources/ Occupational health, academic departments, student services and sport.	Yes. Qualitative/ formative and quantitative/ summative.
Knight (2013)	England	Integration of health promotion across all schools and departments; personal skills related to health; healthy environments; and partnership with the community.	Mental wellbeing; isolation and drinking; work/life balance.	School of Health and Social Care.	Not reported.

Remark

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- Dooris M. The Health Promoting University: opportunities, challenges and future developments. Promotion & education. 2002;Suppl 1:20-4.
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Suggested components of healthy university committee

Although any faculty in university can initiate a Health Promoting University program, most common faculties led this program were medical sciences or related careers. The project with collaboration between governmental agencies supported by the WHO was also noted.

Other services in charge were the human resources/occupational health, academic department, student services and sports.

The presence of a steering group which had representatives from different members of the university community was identified in many studies, e.g. experienced health promotion journalist, an interdepartmental and multi-agency advisory group, external voluntary and statutory agencies. A joint collaboration between local committee (governmental agencies related to education and health) and international agency (WHO) had an impact for implementation. Establishment of senior-level steering committee composed of external agencies, describing a wide range of partnership working at both local and regional levels. In some cases, partners such as Primary Care Trusts, local authorities, specialist services and taskforces are represented on steering groups.

Appendix 3 — List of Contributors

On 29-30 August 2016, the AUN-HPN organized a workshop to develop a framework for healthy university. The participants were representatives from AUN member universities and members of AUN-HPN Working Group of Mahidol University, the Convener of the Health Promotion Network of the AUN. The tables below are the list of participants in the workshop.

A   Participants from AUN and AUN Member Universities

Country	University Name	Participant	Position
Brunei Darussalam	University Brunei Darussalam	Dr.Hajah Fazean Irdayati binti Haji Idris	Senior Lecturer in Clinical Academia, Institute of Health Sciences
		Dr. Hajah Rafidah binti Haji Gharif	Dean, Institute of Health Sciences
Cambodia	Royal University of Law and Economics	Mrs. Buoy Thida	Head, Academic Office
Indonesia	Universitas Gadjah Mada	Dr. Yayi Suryo Prabandari	Lecturer, Faculty of Medicine
Malaysia	Universiti Malaya	Prof. Dr. Maznah Binti Dahlui	Deputy Dean (Development)
	Universiti Kebangsaan Malaysia	Prof. Dr. Sharifa Ezat Binti Wan Puteh	Head, Community and Industry Partnerships, Faculty of Medicine
	Universiti Putra Malaysia	Dr. Fauziah Adnan	Head, University Health Center
Philipines	De La Salle University	Prof. Romeo B. Lee	Full Professor
	University of the Philippines	Dr. Nymia Pimentel-Simbulan	Vice Chancellor for Academic Affairs
	Ateneo de Manila University	Ms. Marie Joy R. Salita	Associate Dean for Student and Administrative Services
Singapore	National University of Singapore	Prof. Yik-Ying Teo	Vice-Dean (Research), Saw Swee Hock School of Public Health

Country	University Name	Participant	Position
Thailand	Burapha University	Assoc. Prof. Dr. Aporn Deenan	Associate Dean for Research & Academic Service Affairs, Faculty of Nursing
	Chulalongkorn University	Assist. Prof. Dr. Thira Woratanarat	Lecturer, Department of Preventive and Social Medicine, Faculty of Medicine
	Chiang Mai University	Assoc. Prof. Ronnaphob Uaphanthasath	Assistant to the President for Student Development
	Mahidol University	Dr. Wiwat Rojanapithayakorn	AUN-HPN Executive Director
	Prince of Songkla University	Mrs. Uraiwan Pattanasattayawong	Leader, Division of Health Promotion and Occupational Health
		Dr. Boonprasit Kritpracha	Vice President for Human Resources and Quality Assurance
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		Dr. Choltis Dhirathiti	AUN Deputy Executive Director
		Ms. Piyapat Kultanan	AUN, Program Officer

B Participants from Mahidol University

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Ms. Lamdoun Pluangklang	International Relations Division
Dr. Orasa Kovindha	AUN-HPN, Program Manager
Mr. Dussadee Maneesuwannarat	AUN-HPN, Program Officer
Ms. View Wongladarom	AUN-HPN, Program Officer

Appendix 4

AUN's Adoption of the AUN-HPN Healthy University Framework

ASEAN University Network

Report of the 9th AUN Rectors' Meeting
18-19 July 2017
Nha Trang, Viet Nam

Agenda 6: AUN-HPN Healthy University Framework

22 Dr. Wiwat Rojanapithayakorn, Executive Director of AUN-HPN, updated the Meeting on the organisation of AUN-HPN Workshop on 29-30 August 2016 at Mahidol University, Thailand. He reported that the development of AUN-HPN Healthy University Framework had been kicked off with contribution of intellectual inputs from representatives of AUN Member Universities. Later, AUN-HPN Healthy University Framework was approved by the AUN-HPN International Advisory Committee on 27-28 February 2017 at Mahidol University, Thailand.

23 The Meeting noted that AUN-HPN Healthy University Framework has 4 main objectives as follows:
• To set standards for health promotion universities in ASEAN region;
• To raise awareness of university administrators on the threat of unhealthy behaviors and poor environment
• To promote the role of AUN member universities in health promotion within and outside universities;
• To scale-up health promotion activities in ASEAN and Plus Three universities

24 The Meeting noted that AUN-HPN Healthy University Framework will serve as guideline for university roles and policies in health promotion in ASEAN. AUN-HPN Healthy University Framework appears as Annex.

25 The Meeting adopted AUN-HPN Healthy University Framework.

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