2. WHOLE SCHOOL APPROACHES TO HEALTH PROMOTION

The Pacific Journey

The Pacific region consists of 22 countries and areas (excluding Australia, New Zealand, and Hawaii). Its total population is approximately nine million people, living on land masses encompassing 551,684 square kilometers and situated within a vast area of ocean. The number of people per country range from around 1,500 in Niue to approximately six million in Papua New Guinea (PNG), which has the largest population in the region.

![Map of the Pacific region](http://www.tropicalresortjobs.com/map)

Source: [http://www.tropicalresortjobs.com/map](http://www.tropicalresortjobs.com/map)

The Pacific is plagued with lifestyle and non-communicable diseases such as obesity, diabetes, heart disease, and cancer, which together are responsible for 75% of all deaths, most occurring prematurely (before people reach age 60). There is a high prevalence of risk factors for these diseases. In some countries, up to 95% of the population in the 25- to 64-year-old age group is overweight, more than 50% smoke cigarettes, and most people do little physical activity (WHO NCD STEPS Survey in the Pacific 2002–2009).

Health and health education in Pacific schools was traditionally left to visiting school clinic nurses and dental teams, who carried out inspection and

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monitoring activities, and to classroom teachers, as a curriculum subject. As such, little was done to ensure that the health of students was actively supported and promoted in schools and the wider school community. This situation changed with the introduction of the health promoting schools (HPS) concept to the Pacific in the early 1990s, a concept that gained credibility because of increased understanding that children’s health is a major factor affecting their capacity to learn.

The HPS concept is thus seen to offer advantages. One is that health promotion is more effective if it targets children before (hopefully) they have opportunity to develop unhealthy habits. The second is that because schools are a central part of Pacific communities, access to those communities and significant proportions of Pacific Islanders is made relatively easy. Schools in the Pacific typically bring parents, government agencies, school authorities, and key health and education stakeholders together in the interests of the education of their children. Hence, it is not surprising that many Pacific countries chose schools as settings for “healthy islands” within the context of the World Health Organization’s (WHO) themes in the late 1990s of Preparation for Life and Protection of Life (Erben, 1998).

WHO’s definition of a health promoting school as “a school that is constantly strengthening its capacity as a healthy setting for living, learning and working” (WHO, 1998, p. 2) positioned schools as a place where all members of the school community could work together to promote and protect health among students, staff, families, and the members of wider societies. The principles and practice of HPS also aligned with application of international declarations such as Health for All by Year 2000 and Education for All, sentiments that Pacific nations embraced.

The HPS concept furthermore supported proactive and preventative measures that many ministries of health in Pacific countries were beginning to welcome. These measures included, amongst others, raising awareness about non-communicable diseases, conducting anti-smoking campaigns, and providing information about HIV/AIDS. However, ownership of these initiatives tended to remain exclusively with the health sectors. Partnerships between ministries of health and ministries of education were the exception rather than the rule. This disjunction has been acknowledged in more recent years, and efforts have been made at regional and national levels to address it.

The focus on health promotion received considerable support from the WHO Regional Office for the Western Pacific (WPRO), which outlined three key strategies for maintaining the initiative over the long term:

- Build supportive policies and links to other health initiatives;
- Collaborate with countries in order to advance the development of HPS; and
- Facilitate training directed at ensuring implementation, monitoring, and evaluation of activities and establishment of HPS-related networks and partnerships, especially with the United Nations and regional organizations.