

ORIGINAL RESEARCH

Policy Brief on the Implementation of Health Promoting University

Informe de políticas sobre la implementación de la educación universitaria promotora de la salud

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Abstract

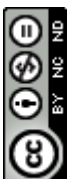
Objective. To develop a policy brief on health-promoting universities in higher education. **Methods.** Qualitative research used descriptive design. The research participants totaled 33 people. Data were collected through focus group discussions including topics: policy, environmental support, behavioral social action, individual capacity, health services, perceptions, and initiatives. Data analysis from participants' answers using ATLAS.Ti23 software. **Results.** Policy themes have a very strong relationship with environmental support with a co-occurrence value of 0.40. Health services and environmental support have a moderate relationship with a co-occurrence value of 0.25. Environmental support and behavioral social action have a weak relationship with a co-occurrence value of 0.20. **Conclusion.** The policies set are factors that provide strong support for the environment. Health services are part of environmental support as facilities are provided for health-promoting university programs. Environmental support from the institution can make it easier for the institution to achieve the planned program.

Keywords: policy brief, health-promoting university, environmental support, social behavior action, individual capacity, health services.

Resumen

Objetivo. Desarrollar un informe de políticas sobre universidades promotoras de la salud en la educación superior. **Métodos.** Investigación cualitativa con diseño descriptivo. Los participantes de la investigación totalizaron 33 personas. Los datos se recopilaron a través de discusiones de grupos focales que incluyeron temas: política, apoyo ambiental, acción social conductual, capacidad individual, servicios de salud, percepciones e iniciativas. Análisis de datos de las respuestas de los participantes utilizando el software ATLAS.Ti23. **Resultados.** Los temas de políticas tienen una relación muy fuerte con el apoyo ambiental con un valor de coocurrencia de 0,40. Los servicios de salud y el apoyo ambiental tienen una relación moderada con un valor de coocurrencia de 0,25. El apoyo ambiental y la acción social conductual tienen una relación débil con un valor de coocurrencia de 0,20. **Conclusión.** Las políticas establecidas son factores que brindan un fuerte apoyo al medio ambiente. Los servicios de salud son parte del apoyo ambiental, ya que se brindan instalaciones para programas universitarios de promoción de la salud. El apoyo ambiental de la institución puede facilitar que la institución logre el programa planificado.

Palabras clave: Informe de políticas, universidad promotora de la salud, apoyo ambiental, acción social, capacidad individual, servicios de salud.



Introduction

Universities, as academic institutions, have a great responsibility to produce quality human resources that are effective in building the nation. This quality can be achieved in a conducive campus environment, free from danger, safe, comfortable, and healthy. The campus is a place for academics to work and self-actualize, so as to achieve an optimal quality of life. Southeast Asian countries in 2017 pioneered the concept of a healthy campus or Health Promoting University (HPU) in the ASEAN region which is compiled in the Ottawa Charter.¹ The role of universities in carrying out education, research, and community service strengthens the 5 pillars of the Ottawa Charter.

The national health campus program in Indonesia was socialized in 2019. The Ministry of Health through the Directorate of Non-Communicable Disease Prevention and Control targeted 4 universities, the University of Indonesia, the University of Andalas, Sebelas Maret University, and the University of Muhammadiyah Yogyakarta, based on data on the prevalence of smoking aged 18 years and over on campus (80%) and the prevalence of high obesity.² The Healthy Campus program encourages universities to involve health in university culture, processes, and policies to achieve the health of the entire campus community.³

The policy brief for the implementation of the healthy campus program is driven by the urgent need to address the high risk of non-communicable diseases in the academic community.⁴ Non-communicable diseases such as hypertension, obesity and diabetes mellitus have become an increasingly profound health problem at the global level. In the university environment, especially among students and academic staff, the risk of developing these diseases is also increasing. Factors such as lifestyle changes, stress, academic pressure,⁵ and lack of physical activity contribute to this increased risk.⁶ Therefore, serious efforts are needed in developing effective healthy campus programs to prevent and manage these non-communicable diseases, as well as raising awareness of the importance of maintaining health in the academic community.

The preparation of a policy brief based on accurate data is a very relevant step in addressing this problem. Precise and up-to-date data on the risk of non-communicable diseases among the academic community will provide a strong basis for identifying priorities and developing policies that suit the specific needs of the university community. The policy brief will also guide concrete efforts to implement a healthy campus program that focuses on the prevention and management of non-communicable diseases. This approach aims to encourage cultural change in the campus environment, promoting awareness and healthy practices in all relevant parties. This strategy is a form of commitment to ensuring that health is not only a physical aspect, but has also been integrated into the intellectual, social, and environmental aspects of the university.

Methods

Study Type and Design

The research conducted was qualitative research, and the design used was descriptive.

Research implementation

August - October 2023. Qualitative research methods aim to understand social phenomena or human behavior in depth through qualitative data analysis, such as interviews, observations, or text analysis.⁷ Common qualitative research designs are case studies, ethnography, phenomenology, grounded theory, and content analysis.⁸ Descriptive studies are concerned with examining phenomena in detail and distinguishing them from other phenomena.⁹

Participants

The research informants were policymakers at the university level, lecturers, teaching staff, students, and security and cleaning workers, totaling 33 people. Research informants were determined using a purposive sampling technique. Subject sampling is based on certain considerations or objectives.¹⁰ Research informants are divided into key informants and supporting informants. Key informants are 7 leaders in higher education, namely: The head of the Bureau of Administration for Financial Planning and Personnel (1 person),

the vice-rector (1 person), the head of staffing (1 person), head of general administration (1 person), and faculty leaders (3 people). Supporting informants consisted of 30 people including; 3 health workers, 8 lecturers, 9 students, 3 security officers, and 3 cleaning workers.

Data collection technique

Data was collected through Focus Group Discussion (FGD) activities. In-depth interviews were conducted with several key informants. The FGD implementation technique involved a group of supporting informant participants, assisted by a moderator who guided the discussion, and research assistants who documented and recorded the results of the discussion.

Data Analysis

Data from observations and interviews was compiled in observation notes, written in transcripts, and then information obtained was analyzed. Participants' answers determine the generalization of concepts.¹¹ Stages of analysis: the process of coding, categorizing, and finding thematic patterns of data so that an understanding of the phenomenon under study is found. Analyze the information using ATLAS.Ti23 software and display the results in a table. Previous researchers used a similar analysis in qualitative research to avoid researcher subjectivity.^{12,13,14,15}

Results

Characteristics of study participants

Characteristics of study participants include age, education, and work unit. Based on age, the minimum is 20 years old and the maximum is 56

years old. Minimum high school education and maximum doctoral level. The majority had a high school education (14 people) and a master's degree (11 people). Based on work status and work units, the majority are lecturers (8 people) and students (9 people). Education staff (3 people) who served in the Bureau of General Administration, Planning, Finance and Personnel, 3 faculty level leaders, 3 health workers, 3 security officers, and 3 cleaning workers.

Discussion themes

The themes extracted from the group discussions presented in Table 1 have a closeness value between themes, also called a co-occurrence value. There are 3 themes that have a closeness value of moderate and weak. The co-occurrence code shows that the quote is used in two different types of codes, indicating overlapping data.¹⁶

It is known that the Policy has a strong category closeness with Environmental Support, with a co-occurrence value of 0.40. The policy set is a factor that provides strong support for the environment. The closeness between the next themes, Health Services and Environmental Support has a medium level of closeness with a co-occurrence value of 0.25. Health Services are part of Environmental Support as facilities are provided for health-promoting university programs. Other themes that have closeness are Environmental Support and the theme of Strengthening Social Action Behavior, with a co-occurrence value of 0.20. The environment is everything that surrounds humans, and environmental support from institutions can make it easier to achieve the planned program.

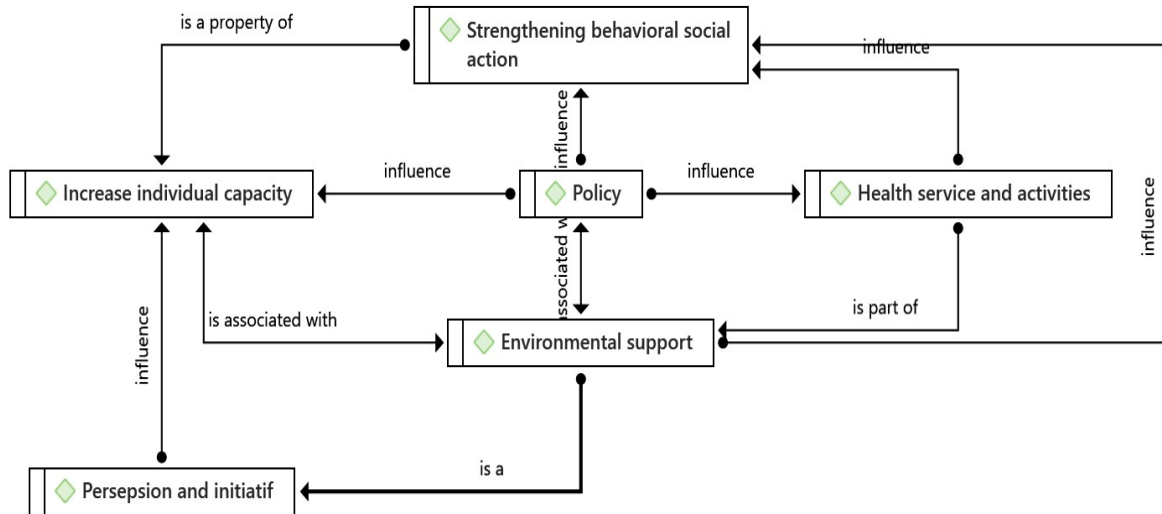
Table 1. Co-occurrence value between research themes

| Theme | Policy | Environment support | Behavior social action | Individual capacity | Health services | Perception and initiative |
|---------------------------|------------|---------------------|------------------------|---------------------|-----------------|---------------------------|
| Policy | 0,00 | 0,40* (29) | 0,17 (14) | 0,09 (6) | 0,15 (10) | 0,03 (2) |
| Environment support | 0,40* (29) | 0,00 | 0,20*** (17) | 0,10 (7) | 0,25** (16) | 0,05 (3) |
| Behavior social action | 0,17 (14) | 0,20*** (17) | 0,00 | 0,16 (10) | 0,14 (9) | 0,00 |
| Individual capacity | 0,09 (6) | 0,10 (7) | 0,16 (10) | 0,00 | 0,00 | 0,05 (2) |
| Health services | 0,15 (10) | 0,25** (16) | 0,14 (9) | 0,00 | 0,00 | 0,00 |
| Perception and initiative | 0,03 (2) | 0,05 (3) | 0,00 | 0,05 (2) | 0,00 | 0,00 |

Source: primary data

*level of closeness between themes: *** strong, ** moderate, *weak

Picture 1. Schematic of the relationship between themes



Discussion

Characteristics of study participants

The results showed varied characteristics of the study participants, including age, education level, and work unit. Based on the age analysis, it was found that the study participants ranged in age from 20 to 56 years old. The age range in the study sample, which varied from 20 to 56 years old, was a significant factor in relation to the maturity of thinking, maturity in general, and reception of information related to the healthy campus program. The ability to access and receive information is associated with its characteristics.¹⁷

Ages ranging from 20 to 56 encompass a period of individual development that characterizes the transition phase from youth to middle adulthood. Younger people may tend to have different levels of maturity in their thinking compared to older people. Maturity levels also develop with age, which may affect how individuals interpret and respond to health programs in the campus environment.

Study participants had a minimum level of education equivalent to high school, up to the highest level of education S3 (doctoral). The link between study participants' education and human resources (HR) support in healthy campus

programs can have important implications. Individuals with higher educational backgrounds, such as master's and doctoral levels, may have a deeper understanding of health issues and a more sophisticated approach to health promotion.

Theme Analysis

Policy

The implementation of the Health Promoting University concept at the university level requires careful and structured policy setting. The first step in the process of establishing this policy is to build a shared commitment among university stakeholders. Forming this commitment requires active involvement from various parties within the university, including leaders, lecturers, administrative staff, and students. This shared commitment is a strong basis for carrying out various initiatives that support health in the campus environment. Cooperation between units is the cornerstone of health promotion.¹⁸

Socialization is an important step in establishing a Health Promoting University policy. Socialization can be done in various ways, one of which is through the placement of posters or banners in various work units at the university. Posters and banners contain information on health programs available on campus, the principles of a Health

Promoting University, and the benefits that can be obtained. Policies in a country have implications as a strong driver of improving public health,¹⁹ for example, to protect public health, several countries have issued policies prohibiting food and drinks that are harmful to health.²⁰

Socialization through posters or banners can also create awareness of the importance of health among the academic community. Information provided visually will be understood by the campus community so that they support the Health Promoting University, motivating them to actively participate in various activities that support health, such as exercise, disease prevention, and the promotion of healthy lifestyles. Online campaigns based on evaluation results are considered effective in increasing awareness and motivation of the campus community to improve health.²¹ The implementation of the Health Promoting University policy through the socialization of posters or banners not only increases knowledge but also encourages real action. Audio-visual media as health education and literacy provides information that can increase readers' knowledge.²²

Environmental support

This research explores the theme of environmental support in the context of higher education, which has a significant contribution to the Health Promoting University (HPU) program. The aspects analyzed include human resources, equipment, and facilities in the university environment that can play a role in supporting the program. The main finding in this study is that human resource support in universities plays a role in supporting the Health Promoting University program. Skilled and knowledgeable human resources in the health sector not only support the implementation of health programs but also play an important role in providing education and information to students and the university community.

The equipment and facilities available at universities also have a significant impact on the success of HPU programs. Colleges equipped with adequate equipment and facilities can provide better health services and education to students and the college community as a whole. Therefore, it is important to consider investing in health infrastructure in universities as part of efforts to

support the Health Promoting University program. Educational institutions have a responsibility to facilitate students to be physically active.²³

Behavioral Social Action

The results of this study show that behavioral social action in the context of the work environment consists of two main aspects, namely the activities carried out and the comfort of the work environment. These activities include a variety of actions, such as integrating worship and health, maintaining personal hygiene, getting used to washing hands, and the habit of throwing garbage in the trash. In addition, behaviors such as cultivating a clean and healthy life, maintaining a healthy diet, doing healthy physical activity, and getting used to washing (ablution) are part of daily activities that play an important role in supporting healthy social behavior. Ablution is a culture among Muslim communities.²⁴

The comfort aspect of the work environment plays a key role in shaping the social action of healthy behavior. Factors that create a supportive work environment, such as easy access to facilities and infrastructure that support healthy activities, as well as opportunities to worship and maintain mental health, also influence individual behavior in the work environment. One factor that affects comfort is the air quality in the environment, which can affect psychological discomfort for individuals working in the environment. This can disrupt concentration, increase stress levels, and ultimately negatively impact worker performance and well-being. Previous research outlines that universities produce a huge amount of waste every day, resulting in discomfort. Waste management strategies in higher education are needed, like recycling waste to create a waste-free and healthy campus.²⁵ The implementation of Health Promoting University according to Suarez (2018) is oriented towards prioritizing actions based on initiatives and the local cultural context of the university.³

Individual Capacity

The capacity of the academic community is the main element that is crucial to support the healthy campus program. Increasing capabilities based on the data that has been collected shows that efforts to increase individual capacity can be done with

various methods and strategies. Behavior reinforcement strategies are based on Skinner's theory in the form of praise, management study feedback. These implications increase the expected positive behavior.²⁶ Skinner's theory underscores the importance of positive reinforcement in shaping and reinforcing desired behavior.

One approach is to implement regulations in the work unit, which include policies and rules that encourage healthy behavior and support individual well-being. In addition, organizing health seminars that integrate aspects of religion and science has been an effective means of increasing individual understanding and awareness of the importance of health. Furthermore, increasing the awareness of the academic community to implement their worship and activities as an effort to avoid stress in the workplace supports the Health Promoting University program.

Health Services

Health facilities play a role in providing health check-up services to lecturers and teaching staff within the university. However, it should be noted that this health service does not yet cover all members of the academic community, including students, cleaning workers, and security. Although health facilities are available, the level of affordability and accessibility of these health services is not yet known in depth by other work units at the university. This information is important to understand the extent to which health services are available and accessible to all members of the university community.

Perception and initiative

The results of this study provide a deeper understanding of how participants' perceptions and initiatives can influence their needs and expectations for healthy campus programs. Through identifying the arguments presented by participants, this research provides a strong scientific foundation for the development of policies and actions aimed at creating a healthier and more sustainable campus environment.

These expectations encompass a wide array of initiatives that are considered important for improving the well-being and health of the

academic community. These expectations provide a snapshot of the university community's aspirations to create a healthier, more sustainable and safer environment. In theory, community needs assessment refers to an evaluation process based on identifying the health needs of the community.²⁷ This process begins with primary data collection through the conduct of a face-to-face health survey, known as a "needs assessment and community survey".

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In line with this, the work program planned in the context of policy is vital. A well-planned program should be able to integrate health, education, and environmental elements within the campus environment. A holistic approach that includes these aspects will be a strong foundation in ensuring the success of health programs in the university environment. Worker characteristics influence employee well-being and performance.²⁸

The steps needed to implement the "healthy campus" concept in a policy context also require careful planning. There needs to be good coordination between relevant parties in the university, including management, academic staff, and students. In addition, data collection and continuous evaluation are needed to measure the effectiveness of the implemented health program. A policy brief on Health Promoting University was developed as an effort to achieve campus public health. A comprehensive interdisciplinary approach as well as the participation of all academicians in the university environment is an integral part of a healthy campus program in a sustainable manner.²⁹

Conclusion

Practically, the policy brief provides guidelines and practical recommendations for universities to implement a campus concept that supports health promotion. These recommendations can be used as a guide in designing health policies and programs in the campus environment. The findings of perceptions, initiatives, and innovations from the academic community that can be implemented in the Health Promoting University program refer to the identification of creative ideas and potential

contributions from the university academic community. These initiatives involve a variety of approaches to increasing health awareness and participation in health promotion programs. The final finding is that the diverse perceptions, initiatives, and innovations coming from the academic community are valuable assets in the development of the Health Promoting University program. All of these are important steps in making the university a center for effective and sustainable health promotion.

The health promotion-based Healthy Campus implementation strategy promoted by the World Health Organization concretely integrates health aspects in the culture, processes, and policies that exist in the university environment. The World Health Organization has developed a strategy for implementing a healthy campus based on health promotion, so that the role of the campus is not limited to carrying out health education for students and academicians but actually integrates health in the culture, processes and policies at the University.³⁰

This strategy is intended to achieve a holistically healthier campus, where health promotion efforts will be an integral part of daily life at the university. This includes the development of policies that support health, the provision of facilities that support healthy lifestyles, as well as the promotion of health behaviors among students, staff, and faculty. The results of this study provide a deeper understanding of how environmental support, including human resources, equipment, and facilities, can play a role in creating a university environment that supports the Health Promoting University program. The findings also provide a basis for developing more effective strategies and policies in encouraging universities to become agents of change in health promotion in the community.

The form of facility support in the college environment is also an important concern in this study. Forms of facility support include the availability of hand sanitizers and sports facilities, although additional facilities are needed to meet more comprehensive needs. Environmental support in the context of the Health Promoting University program has key components in the

form of activities and facilities that have the potential to contribute to the achievement of health goals in higher education. Incomplete and inequitable health care infrastructure results in inequalities in the health care system.³¹ Open dialogue and transparency are necessary to understand community needs. (Loyal, 2022).

Informed Consent of Human Subjects

This research has received permission from the Research Ethics Committee of the Maluku Husada College of Health Sciences Number: RK.0103/KEPK/STIK/IX/2023. In line with the Declaration of the Helsinki II World Health Assembly, Human Research Subjects must undergo review by the Ethical Research Appropriateness Advisory Committee.

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