

The impact of an international online accreditation system on pedagogical models and strategies in higher education

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Abstract

Health promotion practice is characterised by a diverse workforce drawn from a broad range of disciplines, bringing together an extensive breadth of knowledge, skills, abilities, attitudes and values stemming from biomedical and social science frameworks. One of the goals of the CompHP Project was to ensure that higher education training would not only reach competency-based standards necessary for best practice, but also facilitate mobility within the EU and beyond through the accreditation of professional practitioners and educational courses. As a result, higher education institutions in Italy and elsewhere are requested to shift the focus from the definition of learning objectives to the identification of teaching strategies and assessment measures to guarantee that students have acquired the competencies identified. This requires reflection on the pedagogical models underpinning course curricula and teaching-learning approaches in higher education, not only to meet the competency-based standards but also to incorporate overarching transversal competencies inherent to the profession and, more specifically, to the online accreditation procedure. Professionals applying for registration require competence in foreign languages, metacognition and be digitally literate. The article provides a brief overview of the development and structure of the International Union for Health Promotion and Education online accreditation system and proposes a pedagogical reflection on course curricula.

Keywords: *digital literacy, online accreditation, transversal competencies, reflective practice*

1. An Introduction to Health Promotion Training and Practice

On an international level, as well as in Italy, health education and promotion practitioners are professionals drawn from an array of scientific disciplines (Allegrante et al., 2009; Dempsey, Barry, Battel-Kirk & CompHP Partners, 2010). Throughout Europe, the approach in Higher Education and training in the field varies widely, with a curricula based on biomedical models, as in Italy, and others founded on social sciences, for example, Northern European countries (Contu & Sotgiu, 2012). Yet, from a European Union perspective, and in light of the Bologna process which aims at providing tools to facilitate the recognition of degrees and academic qualifications, mobility and exchange between institutions, the need to establish the theoretical, epistemological and methodological foundations of such an ever-growing area of practice has become a priority (Tremblay & Richard, 2011). Due to this dynamic and heterogeneous nature of health education and promotion, the need to define a shared model and the competencies required for effective practice, a pan-European project undertook the challenge to set up an online European Accreditation System that is based on well-defined competency-based standards as indicators and benchmarks (Barry et al., 2012; Speller et al., 2012; Battel-Kirk et al., 2012). In addition, the CompHP Framework provided a useful tool for curricula planning in undergraduate and postgraduate programmes. The final product of the CompHP Project provided the basis for the implementation of an online platform, managed by the International Union for Health Promotion and Education (IUHPE), where professionals from Europe and other countries can apply for registration by demonstrating their competencies through a specific tool, similar to an e-portfolio (Battel-Kirk et al., 2014). The complex process of identifying competencies acquired in one's own experiences not only requires metacognitive skills such as learning to learn, critical, constructive and creative thought and action upon reflection (Pace, Aiello, Piscopo & Sibilio, 2015), but also digital competencies to be able to use the IUHPE Accreditation platform.

This paper stems from a reflection on the actual implementation of the accreditation system in Italy suggesting the integration of the CompHP Core Competencies in the training of under, postgraduate and in-service training courses in the fields of health, social work and education in Italy. The online IUHPE Accreditation platform offers a challenge for scholarship in reframing health education/promotion courses and for professionals in rethinking their attitude towards theory and practice through metacognitive processes. In fact, tracing one's own experience to demonstrate transversal competencies required for accreditation is more reflective, critical and challenging than one may think. In this paper it is argued that in order to increase interest and success in accreditation of higher education institutions and professionals, courses need to have a competency-based approach and include opportunities for reflective practice, hands-on experience and the acquisition of digital skills needed to be able to use such online platforms with more ease.

2. The competency-based approach to health promotion training: theoretical frameworks and challenges for higher education

Since the 1970s, the competency-based approach in the field of professional development represented a significant trend in reforming pedagogical perspectives in this field. The shift from planning courses starting from the content to be taught to identifying the knowledge, skills and attitudes needed for students to master competencies for building capacity demanded new methodologies for the teaching-learning process such as distance and blended learning (Falcinelli, 2003, 2009) and new standards for evaluation, certification and continuing professional development and accreditation (Varisco, 2004). As stated by Hamel and Pommier (2012), competency-based approaches and literacy in Information and Communications Technology are the answers for lifelong learning in health education and promotion. Practitioners, teachers and leaders build their health promotion knowledge through their experience, in action and on action (Schön, 1993), inside specific situations. According to this shift, teaching strategies should be rethought, moving towards a more active choice, through which the learner becomes the producer of knowledge from the beginning of his/her education and throughout life.

Piaget's view on cognitive development can be easily collocated within the discourse on the acquisition of competencies. In his view, learning is not the accumulation of knowledge, nor is it sequential. Furthermore, when cognitive development has reached the formal operational stage, around the ages of 11 and 14, the individual uses a comprehensive range of general abilities "irrespective of the content of the task on which the abilities are to be displayed" (Smith, 1986, p. 58). Another contribution highlighted in the revolution of health promotion training is Vygotskij's vision on socioconstructivism (Brahimi, Farley, 2012). The emphasis of his pedagogical model is on the sociohistorical role and social interaction in building knowledge. Vygotskij's influence appears in several approaches essentially used as active and innovative strategies. For instance, to

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foster better learning and teaching in schools, the following methods could be cited as a means to change classroom work such as: the Technology Enabled Active Learning methodology (TEAL), the Content and Language Integrated Learning (CLIL), the flipped classroom (Sams & Bergmann, 2013) or the Integral Learning Model (Atkin, 2000), capable of converging neurosciences studies, socioconstructivism and experiential methods. The pedagogical challenge consists of achieving more participation and more educational success, and more well-being following the health promoting school perspective. Innovative choices in teaching and learning should also be supported and implemented in higher education and should be the bridge between theory and the competency-based approach for the management of a lifelong learning process.

In this perspective the IUHPE Accreditation platform for professionals is presented, outlining the challenges which are demanding urgent innovation in the Italian Health Education Scholarship. The idea is to give priority to enhance curricula finalised for core competencies to be certified but also to support other competencies required when applying to the accreditation system: narrative, reflective and digital skills. As a result, a European platform specifically aimed at defining, certifying and evaluating competencies becomes the pretext to better plan higher education courses in this field in the perspective of technology innovation and pedagogical reflection of one's own professional growth.

3. Methodology

3.1. The European Project

The 'Developing Competencies and Professional Standards for Health Promotion Capacity Building in Europe' (CompHP) Project, funded by the Health Programme of the European Union, was a three-year endeavour, which brought together 11 partners and 13 collaborating partners from practice and academic sectors in health promotion across Europe (Barry et al., 2012). The aim of the CompHP Project was to develop competency-based standards and an online accreditation system for health promotion practice, education and training that would positively impact the workforce capacity to deliver public health improvement in Europe.

Eight teams or work packages (WP) were set up with three core work packages which concentrated, respectively, on the coordination and management, dissemination, and evaluation of the project. Other WPs focused on the development and testing of the CompHP Core Competencies, Professional Standards and a Pan European Accreditation Framework (Barry, et al., 2012). Two distinct WPs were responsible for the mapping and piloting of these Frameworks in academic and practice settings. Different partners led the eight WPs, but all partners contributed to each WP by disseminating information, conducting research and providing feedback from their countries and networks. The eleven Collaborating Partners and an International Expert Advisory Group actively contributed to the project in the consultations and consensus building stages, together with more than 600 practitioners, policy makers and education providers working in the field of health promotion across Europe and worldwide. Figure 1 presents the organisational structure of the project and the main partners involved.

The project included four main phases:

1. the development of the CompHP Core Competencies (Dempsey, Battel-Kirk, Barry & the CompHP Partners, 2011),
2. the identification of the CompHP Standards (Speller, Parish, Davison, Zilnyk & the CompHP Partners, 2011),
3. the testing of these documents in academic (Contu, Sotgiu & the CompHP Partners, 2012) and practice settings (Gallardo, Martinez, Zaagsma, Garcia de Sola & the CompHP Partners, 2012), and
4. the set-up of an online Accreditation System (van der Zanden, Schipperen, Battle-Kirk and the CompHP Partners, 2012).

In all four phases a literature review of international and European literature was carried out. Drafts of the initial frameworks were drawn up and consultations were undertaken. In the case of the CompHP Core Competencies a Delphi survey was conducted, whereas for the CompHP Professional Standards and Pan-European Accreditation Framework, online surveys were used to obtain feedback from health promotion experts and key stakeholders throughout Europe. All the three products were tested in academic and practice settings through the mapping of undergraduate and postgraduate courses, interviews with health promotion professionals and focus groups. In order to ensure that the documents produced are the result of a far-reaching engagement process, the documents were revised after each stage of consultation.

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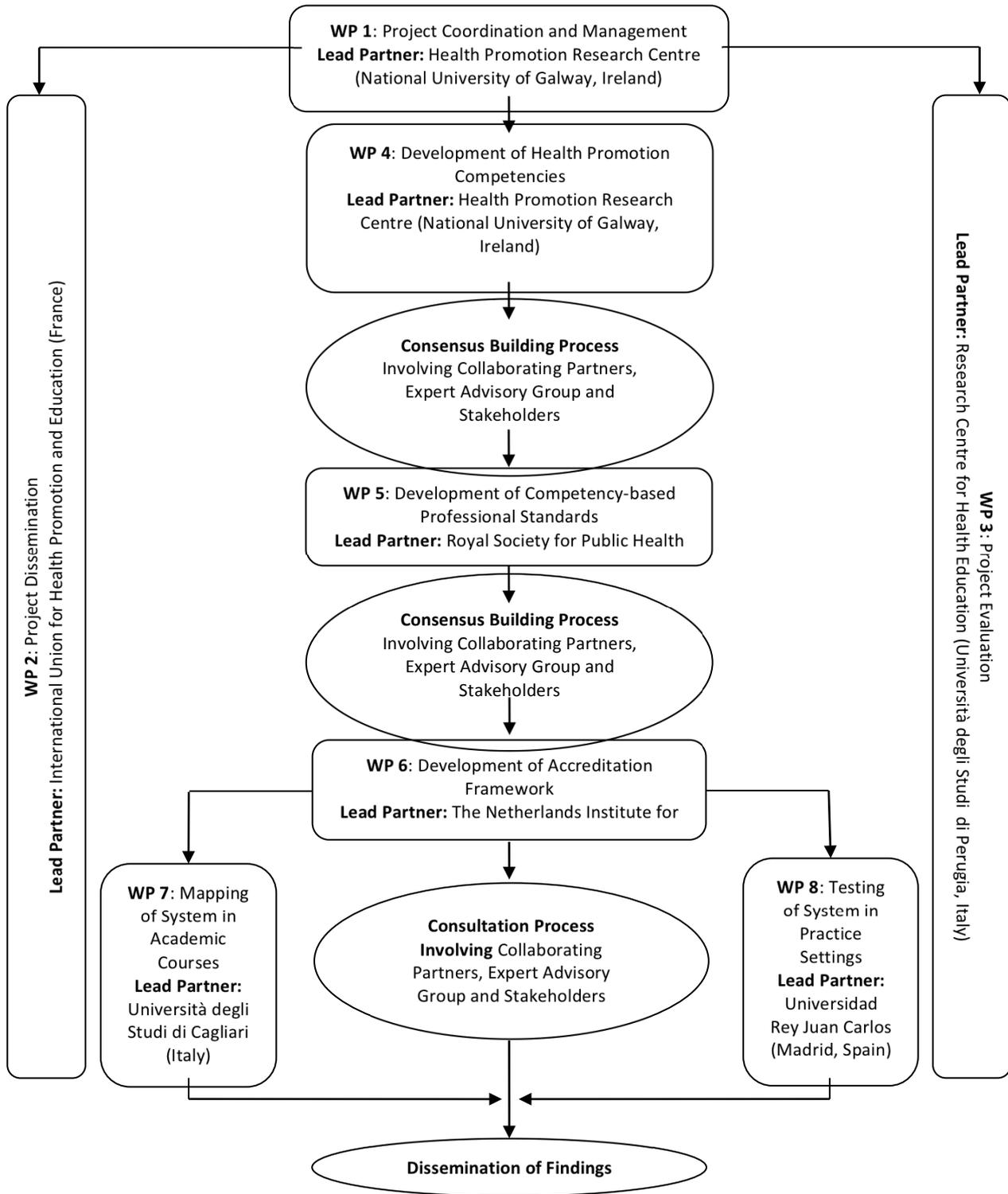


Fig. 1 The CompHP Project Organisational Structure.

Following this project, a pilot study was undertaken to experiment the IUHPE Online Accreditation system. A committee of assessors under the patronage of IUHPE was created and a group of professionals and higher education institutions who had been involved in the project were contacted to participate on a voluntary basis. Each submission was assessed by two assessors who could either accredit, advise to resubmit after minor adjustments, or not accredit. The volunteers were asked to provide feedback on the accreditation system.

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In order to better understand what is expected of those registering for accreditation, a brief overview of the Core Competencies and the online platform needs to be provided. The CompHP Core Competencies Framework comprises 11 domains of core competency (Barry et al., 2012). The domains underpinning all health promotion action are ethical values, considered integral to the practice of health promotion, and the knowledge domain, which describes the core concepts and principles, that make health promotion distinctive. The remaining nine domains each deal with a specific area of health promotion practice with their associated competency statements detailing the skills needed (see Figure 2). One of the distinctive aspects of this framework is that it embraces the concept of ongoing and lifelong professional growth as the accreditation system requires professionals to present the proof of continuous professional development in order to renew their accreditation.

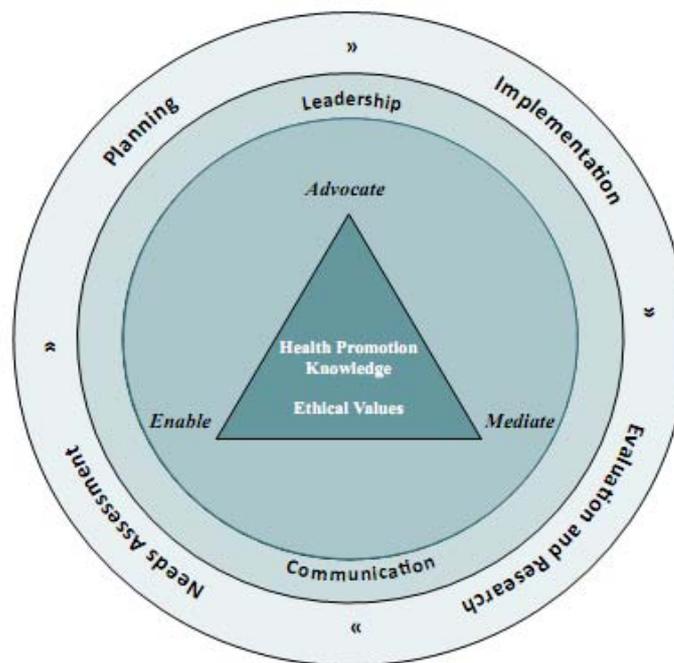


Fig. 2 Core Competencies Framework (Source: Barry, et. al., 2012).

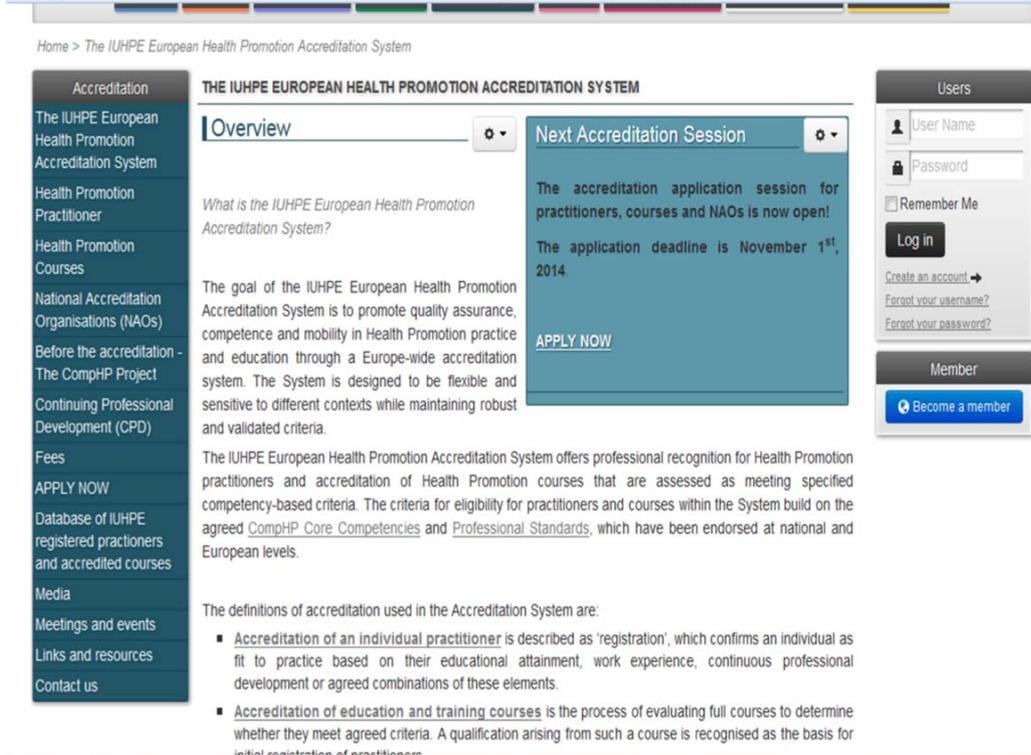


Fig. 3 Screenshot of the online platform for accreditation (Site available at: <http://www.iuhpe.org/index.php/en/the-accreditation-system>)

7 Planning – please provide a summary of health promotion work that you have done which demonstrates the performance criteria for this standard. At least 50% of your examples must describe work done in the last five years. If more than one activity is referred to please list as A, B, C in each section.

Type of work/activity:

When completed (year):

Where completed:

Summary (Max 1300 characters)|

Fig. 4 A screenshot from the e-portfolio.

4. The Impact of CompHP in Italy and its implementation for all professionals involved in the health promotion and education field

In terms of higher education programmes, the CompHP framework gives the opportunity for course providers who plan, teach and assess health promotion competencies in undergraduate and postgraduate courses, to

redesign their course programmes following the competency-based approach. Although the competency-based standards are described in detail and are well-defined, the CompHP handbooks do not offer any advice on how to transfer these competencies into learning objectives and programme contents for higher education courses, leaving this in the hands of higher education institutions. The IUHPE accreditation committee can only decide to accredit courses by checking coherence between their content and the performance criteria outlined in the standards. This means that the pedagogical aspects of the courses are not addressed directly in the accreditation process.

The dissemination of the accreditation system in each country needs to give attention to its impact. Two indicators can be used: the number of professionals that are registered and the number of courses accredited. To date, after one year since its launch, uptake in terms of both course and practitioner accreditation has been low. So far, in Italy, four health promotion professionals have positively concluded the accreditation process, while no course has yet been accredited. Another interesting aspect is that of the four professionals, three are academics, whereas only one is a practitioner. On a European level, the CompHP-IUHPE model has only been used by a few higher education institutions to restructure their course curricula, although it has gained a lot of interest in other areas of the world. Such results raise the need to find elements that could support the IUHPE Accreditation System. In the authors' opinion, a real change can be made only by acting within the scholarship of teaching and learning, both in undergraduate and postgraduate learning settings in order to fulfil the requisites for national accreditation through a better definition of learning objectives according to Dublin descriptors, assessment criteria and methods.

5. How can an international online accreditation process influence pedagogical models and strategies in higher education?

A recent reflection on the online IUHPE accreditation platform reveals that challenges are emerging regarding the possibility of introducing new active methods for capacity building in order to foster reflective, narrative, and digital skills. The online accreditation system requires professionals to be capable of describing their practice activities, to check their professional work from a health promotion perspective in order to demonstrate their knowledge, skills and capacity; to consider their future training choices after a negative evaluation or to develop other competencies. Furthermore, professionals need to track and document their activity in a *digital format* or on the web and in English, a second language for many. The online accreditation process puts the practitioner in a "global" setting for knowledge construction.

- Focus on competencies rather than on the course content to be taught
- Curricula characterised by metacognitive activities (reflective and narrative methods)
- Support of digital skills acquisition within digital learning settings (flipped learning, blended learning, MOOCs)
- Foster global and European courses to support second language acquisition or use CLIL in higher education

According to reflective and narrative skills, several learning situations have been developed with the purpose of making competencies understandable and more clearly defined. Narrative methods and art-based techniques have a good potential to help understand complex situations and simulate how competencies act in practice (Garista et al., 2014; Garista, Zannini, 2011).

In addition, all possible educational innovations, capable of transforming the student into a "knowledge producer" within the learning environment, have the potential to foster active learning and a more independent lifelong learner and knowledge producer. Academic courses and in-service training courses should enhance these methods.

Another important point for practitioners is to become confident in the use of digital programs designed to document and support their health promotion practice. A significant part of the curriculum should be developed using a wide selection of digital tools. This would be a useful approach for students' success in learning but also in dealing with health promotion issues with new generations and in health promotion interventions in schools and communities.

This pedagogical challenge can be considered as offering an opportunity to reflect on pedagogy in health promotion and on more innovative methodologies such as: experiential learning, active methods, digital tools, self-directed learning, reflective practice and visual and narrative methods that have proved to be effective in other fields of professional training for the acquisition of similar competencies (Garista et al., 2005; Garista et al., 2014).

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Another pedagogical digital skill is curriculum vitae writing, describing one's own experience related to standards, organising digital documents and their web access for the evaluation. The online IUHPE accreditation registration is a process similar to the creation of an online portfolio using new interesting tools such as the e-portfolio and open badge, to name a few. A portfolio recognises and encourages autonomous and reflective learning (Nicol & MacFarlane-Dick, 2006). It is based on the real life experience of health promotion work and in that way consolidates the connection between theories and practice. The accreditation portfolio also enables assessment within a framework of transparent criteria and it provides a process for both formative and summative evaluation and is therefore a suitable model for lifelong learning (Varisco, 2004).

Conclusions

The CompHP project focused on developing health promotion competencies, through a consensus-building approach, was an interdisciplinary effort, which brought together the health promotion policy, practice and education fields. It represents a model, which links theory to practice, undergraduate to postgraduate training, research to best practice, and teaching to self-directed learning. It also provides the basis for the planning of higher education programmes on a cross-curricular level.

The IUHPE Accreditation System opens new critical perspectives and questions to which pedagogy in health promotion needs to find answers to. Proactively, three priority issues to be dealt with can be presented. First, how to improve the professionals' foreign language competencies in countries where English is not a native or second language. Second, is the issue on finding ways to facilitate the use of the IUHPE Accreditation System platform and therefore how to develop digital competencies required for the management of such a system. Third, within a competency-based approach, summative evaluation methods are not enough to provide evidence of competency acquisition and do not help in developing the culture of professional reflection that entices continuing professional development. Hence, more research needs to be carried out on how tools such the portfolio and e-portfolio can be used to demonstrate the level of competencies achieved. In this regard, the online accreditation process emphasises the necessity to establish blended learning or MOOC type courses focusing attention on the course content – performance criteria requested by the accreditation system – but also offering the opportunity to put their knowledge into practice.

The next step is to engage in a deep pedagogical reflection to ensure that higher education students acquire the specific CompHP and other relevant competencies as discussed and that modes of assessment are reliable and valid not only for accreditation purposes, but also to ensure a stronger and more competent health promotion workforce. The translation into Italian of the CompHP Handbooks offers a further opportunity to share and disseminate this work and provides a basis for discussion and for the planning and implementation of similar projects for the identification of competence-based standards in other dynamic interdisciplinary fields such as education.

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