

Document No.	DNCQF.P01.GD02
Issue No.	01
Effective Date	01.08.2022

SECTION A:	SECTION A: QUALIFICATION DETAILS													
QUALIFICATION	ALIFICATION DEVELOPER (S) Boitekanelo College													
TITLE	Certificate V in Health Education Assistance NCQF LEVEL 5				5									
STRANDS (where applicable)	N/A													
FIELD	Health a	ealth and Social SUB-FIELD Social Services CREDIT VALUE			120									
New Qualification											Lega	су С	Qualification	<b>√</b>
SUB-FRAMEWOR	2K	General	l Educ	ation			Т	VET		1	High	er E	ducation	
QUALIFICATION TYPE	Certifica	te I	11		111		IV		V	✓ D	iploma		Bachelor	
	Bache	elor Hono	urs		Post	Gradı	uate	Certi	ificate			_	raduate oma	
	Masters								D	octorate/	/ Ph	D		

### RATIONALE AND PURPOSE OF THE QUALIFICATION

Good health and wellness is a basic human right and a necessary condition for development. United Nation's Sustainable Development Goals 3 (SDGs) has been devoted specifically to health thus to "Ensure healthy lives and promote well-being for all at all ages" and focuses on the achievement of universal health coverage and access to safe and effective medicines and vaccines (World Health Organization, 2015). Effective and sustainablePrimary Health Care (PHC) is a cornerstone for achieving the health-related SDG targets. According to WHO (2021) Primary Health Care is "a whole-of-society approach to health and well-being that focuses on individual, family, and community's needs and preferences. PHC ensures that people obtain comprehensive care as early as possible ranging from promotion and prevention to treatment, rehabilitation, and palliative care as close as feasible to their everyday environment.



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Botswana is facing a rise in communicable, non-communicable and emerging infectious diseases. The Vision 2036 therefore emphasizes that, it is the responsibility of the state to guarantee access to health care services of the highest standard attainable, and of individuals to pursue healthy lifestyles (Government of Botswana, 2016). Botswana has invested heavily on increasing access to high quality health services, emphasizing on preventative health care and treatment of existing and emerging health challenges through implementation of PHC principles. One of the four PHC principles is community and individual involvement and promotion of self-reliance, which can only be realized through having, a well-trained and well-motivated team of Community Health Workers at the grassroots. It is therefore imperative that the Boitekanelo College trains Health Education Assistants who will be mandated to mobilize communities for health interventions such as immunization, malaria control, sanitation, and promoting health seeking behavior; promote a culture of healthy lifestyles; target high-risk groups; and strengthen community-based and multisectoral interventions. Furthermore, the Health Education Assistants will participate in planning, developing, and implementing community health education projects using a variety of strategies to improve the health status of the community as a whole.

## PURPOSE: (itemise exit level outcomes)

The purpose of the qualification is to equip graduates with broad technical knowledge, skills and competencies to:

- Assess the health needs and resources at both the individual and community level.
- Plan and implement community health education interventions to improve the health status of the community.

## MINIMUM ENTRY REQUIREMENTS (including access and inclusion)

Minimum entry requirement:

- Certificate IV, NCQF Level 4 (General Education or TVET) or equivalent with passes in relevant subjects
- Access through Recognition of Prior Learning (RPL) and Credit Accumulation and Transfer (CAT) will be provided through ETP policies in line with National RPL and CAT Policies.



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SECTION B QUALIFICAT	TION SPECIFICATION
GRADUATE PROFILE (LEARNING OUTCOMES)	ASSESSMENT CRITERIA
Conduct assessment of health needs and resources at both the individual and community level.	<ul> <li>1.1 Collect relevant data and literature to inform Health education interventions</li> <li>1.2 Identify priority population for health education interventions</li> <li>1.3 Identify the health needs, existing assets and resources relevant to Health education action</li> <li>1.4 Identify the factors and determinants of health which impact on Health (knowledge, attitudes, beliefs, skills, and behaviors)</li> <li>1.5 Prioritize health education needs</li> </ul>
Plan and develop community health     education interventions to improve the     health status of the community.	<ul> <li>2.1 Mobilize and engage stakeholders</li> <li>2.2 Develop goals and objectives</li> <li>2.3 Plan Health education interventions</li> <li>2.4 Determine appropriate health education interventions</li> </ul>
Implement community-based health education interventions.	<ul> <li>3.1 Conduct health education interventions (health talks, workshops, jam sessions)</li> <li>3.2 Conduct community outreach interventions</li> <li>3.3 Employ an appropriate variety of instructional methodologies</li> <li>3.4 Use appropriate resources and materials</li> </ul>
Demonstrate competency in working with diverse cultures and communities.	<ul> <li>4.1 Use culturally appropriate communication methods and techniques for specific groups and settings</li> <li>4.2 Apply appropriate communication skills for Health Education interventions.</li> <li>4.3 Create formal and/or informal alliances, task forces, and coalitions to address the health issues.</li> </ul>
Apply ethical principles informing health education practice.	5.1 Apply relevant ethics to uphold the integrity of the profession to support the worth, dignity, potential, quality of life and uniqueness of all people.



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5.2 Apply professional codes of ethics and ethical
principles throughout assessment,
planning, implementation and communication,
processes.
5.3 Comply with legal standards and regulatory
guidelines in assessment, implementation,
planning for health education intervention.



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SECTION C	Q	UALIFICATION	ON STRUCTU	JRE	
	TITLE	Credits Pe	Total Credits		
COMPONENT		Level [5]	Level [6]	Level [7]	
FUNDAMENTAL COMPONENT	Basic computer application	<b>√</b>	1		9
Subjects/ Courses/ Modules/Units	Communication & study skills	<b>√</b>	E		9
	Anatomy and physiology	<b>√</b>	y-37		12
		7.8	4		
			7		
CORE COMPONENT	Health Education and Promotion (HEP 101)		<b>√</b>		6
Subjects/Courses/ Modules/Units	Ethics and Principles in Public Health	<b>√</b>			6
	Basics of Nutrition	<b>√</b>			6
	Sexual and Reproductive Health and Rights	✓			6
	Introduction to Counselling	<b>√</b>			6
	Communicable and non- communicable diseases	<b>√</b>			6



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	School Health		<b>√</b>		12
	Community Health		<b>√</b>		12
	Practical Assessment		<b>√</b>		30
STRANDS/ SPECIALIZATION Subjects/ Courses/ Modules/Units		Credits Per	Total Credits		
	Level []	Level []	Level []		
	N/A				
1.					
2.					



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SUMMARY OF CREDIT DISTRIBUTION FOR EACH COMPONENT PER NCQF LEVEL  TOTAL CREDITS PER NCQF LEVEL		
5	60	
6	60	
TOTAL CREDITS	120	
Rules of Combination:		
(Please Indicate combinations for the different constituent components of the qualification)		
This qualification is worth a total of 120 credits and comprises of the following;		
Fundamental Component = 30 credits (25%)		
Core Component = 90 credits (75%)		



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#### ASSESSMENT ARRANGEMENTS

Contribution of the final marks is 50% formative and 50% summative assessments

## **MODERATION ARRANGEMENTS**

The following shall apply for both internal and external moderation.

Internal moderation requirements and External moderation requirements shall be carried out in accordance with BQA requirements.

Professional registration and accreditation

All assessors and moderators must be registered and accredited with BQA.

## RECOGNITION OF PRIOR LEARNING

**Recognition of Prior Learning** 



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- Candidates may submit evidence of prior learning and current competence and/or undergo appropriate
  forms of RPL assessment for the ward of credits towards the qualification in accordance with applicable
  institution's RPL policies and relevant national- level policy and legislative framework.
- Implementation of RLP shall also be consistent with requirements, if any, prescribed for the field. Subfield of study by relevant national, regional or international professional bodies.

#### CREDIT ACCUMULATION AND TRANSFER

Credit accumulated shall be evaluated and transferred guided by the institutional and BQA CAT policy

## PROGRESSION PATHWAYS (LEARNING AND EMPLOYMENT)

## Learning pathways

Horizontal Articulation (related qualifications of similar level that graduates may consider)

Graduates may consider articulating with qualifications such:

- 1. Certificate in Health Education
- 2. CommunityHealth Assistant Certificate
- 3. Certificate V in Health Promotion.

**Vertical Articulation** (qualifications to which the holder may progress to)

- 1. Diploma in Health Education
- 2. Diploma in Health Education and Promotion,
- 3. Diploma in Health Promotion and Diseases prevention
- 4. Diploma in Public Health

## **Employment**

The graduates of the Certificate in health education assistance are prepared in such a way that, they can work in:

- Health education assistants in schools
- Health education assistants in community and civil society organizations, particularly providing



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preventive, and health maintenance services.

- Health education assistants in insurance companies
- Health education assistants in Community Home Based Care institutions
- Health education assistants Non-governmental Organizations



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### **QUALIFICATION AWARD AND CERTIFICATION**

For a student to qualify for the award of Certificate V in Health Education Assistance, they must have achieved aminimum of 120 credits according to the rules of combination. Successful candidates will be issued with a certificate indicating the award

#### SUMMARY OF REGIONAL AND INTERNATIONAL COMPARABILITY

There is no qualification comparable to this one locally, However, regionally the qualification compares to Must Graduate Academy (South Africa) while internationally it compares with to and Kisii National Polytechnic (Kenya) and Johns Hopkins university (USA)

### **Similarities**

- Must academy and Kisii National Polytechnic offer the program in 1 year inclusive of attachment just like in this qualification.
- Similar modules offered like Communication study skills, Nutrition module, Community Health
- Exit Learning Outcomes similar, such as needs assessment, planning, health education on various health issues.
- Assessment is both theory and practical.
- The 3 modules offered in Johns Hopkins University (Program Planning for Health Behavior Change and Implementation and Sustainability of Community-Based Health Programs and Health Literacy: Challenges and Strategies for Effective Communication) are a subset of Community health, School health and Health education and promotion offered in this qualification.

#### **Differences**

- Entry requirement in this qualification has been based on Prior Learning Experience, whilst must academy and Kisii National Polytechnic was based directly from High School
- Johns Hopkins University offers electives whilst this qualification does not.
- Johns Hopkins University offers course work modules only while this qualification offers field practicum.
- Johns Hopkins University offers the program between 1 to 3 years whilst this qualification offers the program for one year only.
- The total credits for the program in Johns Hopkins University is 18 while in this qualification is 120 (according to the NCQF.)

This qualification generally compares well with other qualifications that was contrasted with. This is derived from the observations made when looking at the similar modules offered in the above captioned institutions. In conclusion this program will produce graduates with similar competencies as those from the institutions it compares with which will allow opportunities of employment and articulation for our graduates locally and internationally.

### **REVIEW PERIOD**



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# **Every 5 years**