



Subject Benchmark Statement

Health Studies

October 2016

UK Quality Code for Higher Education
Part A: Setting and maintaining academic standards

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How can I use this document?

This document is a Subject Benchmark Statement for Health Studies that defines what can be expected of a graduate in the subject, in terms of what they might know, do and understand at the end of their studies.

You may want to read this document if you are:

- involved in the design, delivery and review of programmes of study in Health Studies or related subjects
- a prospective student thinking about studying Health Studies, or a current student of the subject, to find out what may be involved
- an employer, to find out about the knowledge and skills generally expected of a graduate in Health Studies.

Explanations of unfamiliar terms used in this Subject Benchmark Statement can be found in the Quality Assurance Agency for Higher Education's (QAA's) glossary.¹

¹ The QAA glossary is available at: www.qaa.ac.uk/about-us/glossary.

About Subject Benchmark Statements

Subject Benchmark Statements form part of the UK Quality Code for Higher Education (the Quality Code), which sets out the Expectations that all providers of UK higher education reviewed by QAA are required to meet.² They are a component of the Quality Code, Part A: Setting and Maintaining Academic Standards, which includes the Expectation that higher education providers 'consider and take account of relevant Subject Benchmark Statements' in order to secure threshold academic standards.³

Subject Benchmark Statements describe the nature of study and the academic standards expected of graduates in specific subject areas, and in respect of particular qualifications. They provide a picture of what graduates in a particular subject might reasonably be expected to know, do and understand at the end of their programme of study.

Subject Benchmark Statements are used as reference points in the design, delivery and review of academic programmes. They provide general guidance for articulating the learning outcomes associated with the programme but are not intended to represent a national curriculum in a subject or to prescribe set approaches to teaching, learning or assessment. Instead, they allow for flexibility and innovation in programme design within a framework agreed by the subject community. Further guidance about programme design, development and approval, learning and teaching, assessment of students, and programme monitoring and review is available in the Quality Code, Part B: Assuring and Enhancing Academic Quality in the following chapters:⁴

- *Chapter B1: Programme Design, Development and Approval*
- *Chapter B3: Learning and Teaching*
- *Chapter B6: Assessment of Students and the Recognition of Prior Learning*
- *Chapter B8: Programme Monitoring and Review.*

For some subject areas, higher education providers may need to consider other reference points in addition to the Subject Benchmark Statement in designing, delivering and reviewing programmes. These may include requirements set out by professional, statutory and regulatory bodies, national occupational standards, and industry or employer expectations. In such cases, the Subject Benchmark Statement may provide additional guidance around academic standards not covered by these requirements.⁵ The relationship between academic and professional or regulatory requirements is made clear within individual statements, but it is the responsibility of individual higher education providers to decide how they use this information. The responsibility for academic standards remains with the higher education provider who awards the degree.

Subject Benchmark Statements are written and maintained by subject specialists drawn from, and acting on behalf, of the subject community. The process is facilitated by QAA. In order to ensure the continuing currency of Subject Benchmark Statements, QAA initiates regular reviews of their content, five years after first publication, and every seven years subsequently.

² The Quality Code, available at www.qaa.ac.uk/assuring-standards-and-quality/the-quality-code, aligns with the *Standards and Guidelines for Quality Assurance in the European Higher Education Area*, available at: www.engq.eu/wp-content/uploads/2015/05/ESG_endorsed-with-changed-foreword.pdf.

³ The Quality Code, Part A: Setting and Maintaining Academic Standards, available at: www.qaa.ac.uk/assuring-standards-and-quality/the-quality-code/quality-code-part-a.

⁴ Individual chapters are available at: www.qaa.ac.uk/assuring-standards-and-quality/the-quality-code/quality-code-part-b.

⁵ See also Part A: Setting and Maintaining Academic Standards, available at: www.qaa.ac.uk/assuring-standards-and-quality/the-quality-code/quality-code-part-a.

Relationship to legislation

Higher education providers are responsible for meeting the requirements of legislation and any other regulatory requirements placed upon them, for example by funding bodies. The Quality Code does not interpret legislation nor does it incorporate statutory or regulatory requirements. Sources of information about other requirements and examples of guidance and good practice are signposted within the Subject Benchmark Statement where appropriate. Higher education providers are responsible for how they use these resources.⁶

Equality and diversity

The Quality Code embeds consideration of equality and diversity matters throughout. Promoting equality involves treating everyone with equal dignity and worth, while also raising aspirations and supporting achievement for people with diverse requirements, entitlements and backgrounds. An inclusive environment for learning anticipates the varied requirements of learners, and aims to ensure that all students have equal access to educational opportunities. Higher education providers, staff and students all have a role in, and a responsibility for, promoting equality.

Equality of opportunity involves enabling access for people who have differing individual requirements as well as eliminating arbitrary and unnecessary barriers to learning. In addition, disabled students and non-disabled students are offered learning opportunities that are equally accessible to them, by means of inclusive design wherever possible and by means of reasonable individual adjustments wherever necessary.

⁶ See further the *UK Quality Code for Higher Education: General Introduction*, available at: www.qaa.ac.uk/publications/information-and-guidance/publication?PubID=181.

About this Subject Benchmark Statement

This Subject Benchmark Statement refers to bachelor's degrees with honours in Health Studies.⁷

This version of the Statement forms its third edition, following initial publication of the Subject Benchmark Statement in 2002, and review and revision in 2007.⁸

Note on alignment with higher education sector coding systems

Programmes of study that use this Subject Benchmark Statement as a reference point are generally classified under codes within Group B: Subjects Allied to Medicine in the Joint Academic Coding System (JACS).⁹

Summary of changes from the previous Subject Benchmark Statement (2007)

In the revised Statement, language has been clarified throughout for greater accessibility. For example, the word 'salutogenic' has been replaced with 'well-being'. Interchangeability of the terms 'interdisciplinary' and 'multidisciplinary' has also been resolved.

Global perspectives have been integrated throughout the Statement to recognise their significance in the Health Studies curriculum.

The term 'mental well-being' has been added throughout to emphasise its importance within the subject area.

All references to 'information technology' have been updated and broadened to reflect the digital learning landscape that is now commonplace in higher education and the subject area.

Notions of the 'entrepreneurial' Health Studies graduate have been added.

Section 3 - knowledge, understanding and skills has been revised in recognition of the new demands, expectations and obligations of the contemporary Health Studies graduate.

Section 4 - learning, teaching and assessment has been revised in recognition of the pivotal role now played by students as partners in their own learning.

Section 5 - benchmark standards has been revised substantially through the removal of threshold and typical standards, as these were felt to be confusing. This has been streamlined into a focus on a set of threshold standards that are anticipated for all honours graduates in the Health Studies subject area. This revision was consolidated by cross-referencing with the *Frameworks for Higher Education Qualifications of UK Degree-Awarding Bodies*.

⁷ Bachelor's degrees are at level 6 in *The Framework for Higher Education Qualifications in England, Wales and Northern Ireland* and level 10 in *The Framework for Qualifications of Higher Education Institutions in Scotland*, as published in *The Frameworks for Higher Education Qualifications of UK Degree-Awarding Bodies*, available at: www.gaa.ac.uk/assuring-standards-and-quality/the-quality-code/qualifications.

⁸ Further information is available in the *Recognition Scheme for Subject Benchmark Statements*, available at: www.gaa.ac.uk/publications/information-and-guidance/publication?PubID=190.

⁹ Further information about JACS is available at: www.hesa.ac.uk/content/view/1776/649.

1 Introduction

1.1 Health Studies is a broad subject area reflecting the diversity to be found in both the experience, and the study, of aspects of human health in addition to the range of employability opportunities available for graduates. The term Health Studies is taken throughout this document to include both physical and mental health and well-being, and may also include the study of ill-health (illness) and disease. Health Studies requires students to draw on a wide variety of subject disciplines, and programmes offer the student a range of perspectives throughout the duration of study. Alongside the distinctive contribution of each subject discipline, Health Studies also involves multidisciplinary and interdisciplinary perspectives and may include professional perspectives.

1.2 The aim of Health Studies is to critically examine health and the determinants of health in a wide variety of contexts. This includes local, national, international and global aspects and perspectives, with the focus of study extending from the health and well-being of individuals and families, through communities, to the health of populations at national and international level. It adds to the evidence base by research activity of many different kinds. Because of the wide scope of the subject, individual programmes differ in their particular concerns and areas of interest.

1.3 Within the subject of Health Studies, there are many different degree titles. These include Health, Health Studies, Health and Well-being, and Health Sciences, in addition to more applied titles such as Health Promotion and Public Health. Programme content reflects this variation and may range from highly conceptual to applied and vocational. This Subject Benchmark Statement may be used on its own, when relevant, and in conjunction with others when designing or reviewing multidisciplinary or joint programmes of study, for example, when Health Studies is combined with another related area such as Exercise. Each programme has its own characteristic focus on the range of issues referred to above. All programmes enable a critical examination of contrasting perspectives and provide insight into the human experience of health, physical and mental well-being, and illness.

2 Nature and extent of Health Studies

Context

2.1 The word 'health' has connotations of wholeness and physical and mental well-being; of happiness and contentment; of equity and justice; and of a positive state that goes beyond freedom from disease or deprivation. The concept of health may be considered from an individual, a family or a community perspective, or it may extend to the condition of the planet as a whole. There is no universally agreed definition of health. Despite the complexities of definition and the differences of opinion, there is agreement that the study of health is not the same thing as the study of illness or of training in the care of the sick. Health Studies is a subject that seeks to examine all those factors that have the potential to influence health and physical and mental well-being, from strategic level policy-making to aspects of health as experienced by the individual.

2.2 A welcome consequence of the diversity of focus outlined above is that the scope of Health Studies is extensive. However, it is possible to identify a number of common themes at the heart of the subject, comprising:

- the exploration of health as a human experience mediated by individual, societal and global contexts
- a reflective and critical evaluation of the many factors affecting health and its representations, in which attention is paid to the values, theories and professional perspectives that inform thinking and actions
- an ability to engage actively in the discourses surrounding the concept of health and its representations.

2.3 Irrespective of such distinctions of focus, any Health Studies degree is constructed upon a sound research base, and recognition is given to the need to consider diverse and innovative approaches to methodologies. Individual educational providers may also choose to focus on particular employability contexts to inform the design of their curriculum. Within this context, the development of critical reflection is essential, as it enables the skills of analysis and synthesis to be developed. Such skills provide a foundation from which to move beyond problem solving into an exploration of possibilities for the enhancement of health status and sense of physical and mental well-being.

2.4 It is envisaged that in the process of planning, development, delivery and evaluation of programmes, relevant stakeholders such as students, patients and the public, agencies and individuals, voluntary services and employers would be engaged.

2.5 The challenge for each particular programme is to make explicit the nature of its focus. Health Studies students graduate with a portfolio of employability skills, whether from traditional or vocationally focused programmes, in which the aim is to equip graduates with a set of skills related to particular roles, industries or services.

2.6 Some degree programmes select a particular combination of subject disciplines upon which to base their programmes and provide a rationale for that choice. One central feature of this approach to programme design is the inclusion of the context in which health is located. For example, health can be examined as a human capacity determined by a range of social, cultural, political, global, environmental, organisational and economic factors.

2.7 Some programmes have a specific focus set by the demands of a particular vocational orientation. In all programmes, a suitable breadth of inquiry is included so that the multifaceted and complex nature of health, physical and mental well-being, and illness may be studied, researched and understood.

2.8 Health Studies draws on a number of academic disciplines and subject areas. These could include the following, to a greater or lesser extent:

- Anthropology
- Economics
- Epidemiology
- Ethics
- Geography
- Health Informatics and Analytics
- Health Technology and Digital Health
- Human Geography
- Law
- Nutrition
- Philosophy
- Physiology
- Politics
- Psychology
- Sociology
- Social Policy
- Social Sciences
- Sport and Exercise Science.

3 Knowledge, understanding and skills

Subject-specific knowledge, understanding and skills

3.1 The single honours Health Studies graduate demonstrates knowledge and understanding of health from a personal to a global perspective, including:

- the multidisciplinary nature of Health Studies
- the central place of research activity in the development of the subject
- the diverse determinants of health and physical and mental well-being
- emerging issues at the forefront of the subject
- the range of theories of causality and evidence relating to health
- social policy approaches and potential influence upon health and physical and mental well-being
- the theoretical and professional rationales concerning health interventions
- the role of individual differences in affecting health status
- the diversity of the experience of health and physical and mental well-being
- ethical perspectives and the diversity of values associated with health and physical and mental well-being
- global, environmental and planetary dimensions of health
- comparisons within and between healthcare systems and modes of delivery
- cultural diversity within health and physical and mental
- the central theoretical arguments and paradigms in health research
- an appreciation of how sectors, organisations and businesses operate
- the application and effectiveness of information and health technologies in health care delivery and/or interventions, communication and analysis within the subject.

3.2 The nature of Health Studies entails interdisciplinary and multidisciplinary approaches. A Health Studies student develops the skills necessary for the assimilation and understanding of the complex and diverse nature of the subject, as well as more general skills, which are widely transferable.

3.3 A Health Studies graduate is able to:

- compare between a range of health contexts, such as between individual and institutional contexts, or between national, international and global contexts
- analyse health and health issues, alongside health information and qualitative and quantitative data, that may be drawn from a wide range of disciplines
- access and use a range of digital technologies, such as relevant computer packages, apps and data analysis software, as appropriate to the subject
- synthesise coherent arguments from a range of contesting theories relating to health and health issues
- draw upon the everyday, personal and community experiences of health, physical and mental well-being, and illness
- critically reflect on the links between individual experience of health and health issues, and the wider structural elements relevant to health and physical and mental well-being
- articulate central theoretical arguments within a variety of health contexts, producing logical and structured approaches supported by relevant evidence
- develop knowledge and understanding of ethics, societal responsibilities, environmental impact and sustainability in the context of Health Studies
- draw on authoritative research and research methodologies to locate, review and evaluate research findings relevant to health and health issues, across a range of disciplines.

Generic and graduate skills

3.4 In addition to these subject-specific skills, the Health Studies graduate develops many other skills related to the successful completion of a degree programme, which are relevant and transferable in terms of the graduate's successful career management.

3.5 A Health Studies graduate has the ability to:

- communicate with others in a clear and articulate manner, within a wide variety of audiences, through a range of media
- use appropriate academic conventions in the production and presentation of work
- present ideas and arguments in a well-structured and coherent manner in a variety of formats and media
- work with a range of stakeholders, networks, groups and organisations, taking responsibility for an agreed area of shared activity
- negotiate formally and informally, as appropriate
- demonstrate effective leadership approaches, including working across boundaries, to drive innovation within organisations and independently
- identify and propose solutions to problems, both in relation to the substantive area of Health Studies and to other educational and social issues
- build effective entrepreneurial skills for innovative practice
- recognise issues relating to equal opportunities, and diversity and identify appropriate courses of action in relation to such issues
- gather and evaluate relevant information from a wide variety of sources, using appropriate manual and digital systems
- use information and communications technology to enhance digital capability and digital literacy in a variety of contexts
- reflect on and review progress in their own studies and seek assistance or guidance as appropriate, in order to enhance their own personal development planning
- develop the ability to undertake autonomous and lifelong learning, particularly for continuing professional development purposes
- demonstrate a recognition of the primacy of service user interests and well-being while complying with complex interplay of economic, professional, ethical and legal obligations.

4 Learning, teaching and assessment

Introduction

4.1 The learning, teaching and assessment strategies selected in Health Studies programmes enable the development of reflective and critical approaches to the study of health, physical and mental well-being, and illness. These strategies reflect the contested and multidimensional nature of Health Studies and facilitate active student participation. This is in recognition of the essential contribution that students bring to the learning and teaching process. The development of flexible, virtual and distance-learning environments within real world contexts provides increasing opportunities for self-determined learning that recognises students as engaged partners in their own learning, and in that of others.

Learning and teaching

4.2 A wide range of learning and teaching strategies provide opportunities for the progressive acquisition of subject-specific knowledge, understanding and skills, as well as wider generic and graduate skills. The learning and teaching strategies are clearly specified within the programme of study. Programmes enable students to experience active and reflective learning through exposure to a range of approaches to learning and teaching.

4.3 Scheduled activities may include lectures, seminars, workshops, tutorials and personal supervision, as well as structured online activity, and sessions outside the classroom, including field trips. These are underpinned by collaborative and individual independent study. The range of activities may also include: peer-led learning, peer-assisted learning, self-directed learning, work-based learning, context-based learning, simulations and personalised learning.

4.4 The above list is not intended to be prescriptive or limiting, and other methodologies may be more or less appropriate for different groups of students and different programmes.

Assessment

4.5 Assessment strategies reflect the learning outcomes of the programme and make a positive contribution to the student's learning experience. Assessment is both formative (in which the goal is usually to enhance student learning by providing ongoing feedback) and summative (in which the goal is normally to evaluate student learning at the end of a learning process by making an academic judgment against a standard). Feedback on all assessment activities is essential for student development and progression. Methods of assessment reflect progression within the programme of study, focusing on both knowledge and skills and enabling students to demonstrate their level of attainment of subject-specific and generic knowledge, understanding and skills. The use of diverse assessment strategies meets the varied needs of students and provides the opportunity to incorporate innovative and original approaches. The assessment strategies adopted may include individual and group work approaches, including:

- a mix of assessment methods that are underpinned by an inclusive practice ethos
- essays and reports of varying lengths and for various purposes (press releases, consultancy reports, evaluation and impact assessments, briefing papers, annotated bibliographies and article critiques)
- the creation of online resources (web pages, blogs, audio and video podcasts)
- oral presentations (debates, conference style poster presentations and seminars)
- project work (relating to quantitative and qualitative analyses)
- unseen and seen examinations with a range of types of questions/tasks

- reflective learning journals/diaries and portfolios
- patchwork assessments and independent research dissertations (and proposals for these)
- work-based assessments (needs assessments, audits and learning histories)
- self and peer assessment.

5 Benchmark standards

5.1 On completion of a single honours degree in Health Studies, graduates are able to demonstrate the threshold level of performance. A typical graduate is capable of more.

Benchmark standards for honours degrees

5.2 A graduate who has achieved a bachelor's degree with honours in Health Studies at the threshold level is able to:

- i demonstrate a comprehensive knowledge base as outlined in Section 3 in selected subject areas that inform health and physical and mental well-being
- ii demonstrate a comprehensive grasp of the scope and breadth of the subject
- iii critically analyse the contested nature of health using a wide range of perspectives
- iv use knowledge of the multidisciplinary nature of Health Studies to analyse health and health issues at personal, national and global levels
- v use research findings in a critical and evaluative way to demonstrate the development of Health Studies as a subject discipline
- vi show a critical understanding of the diversity and changing nature of determinants of health and the controversies that attend them
- vii critically analyse contemporary issues at the forefront of health and physical and mental well-being
- viii critically analyse a range of theories of causality relating to health and ill-health
- ix critically appraise a number of theoretical and professional rationales concerning health interventions
- x demonstrate an informed understanding of the role played by health promotion in the development of autonomous life choices
- xi critically evaluate the role of the individual and of institutions in affecting health status
- xii critically analyse the diversity of experience and values associated with health
- xiii critically analyse different healthcare systems and underpinning health policy development
- xiv critically reflect on and evaluate a range of theoretical arguments within Health Studies
- xv demonstrate an informed understanding of ethical perspectives and the diversity of values associated with health and physical and mental well-being
- xvi critically appraise the nature of health inequalities and evaluate the impact of population interventions aimed at reducing health deficit
- xvii apply an appropriate critical framework to use and evaluate research in Health Studies
- xviii cross traditional subject boundaries drawing on appropriate knowledge from other academic disciplines to reflect critically on health issues
- xix demonstrate an appreciation of using an integrated approach to an analysis of health and health issues
- xx develop an analysis and evaluation of contemporary issues and discourses in health research and debate.

General transferable skills

5.3 A graduate who has achieved a bachelor's degree with honours in Health Studies at the threshold level is able to:

- i demonstrate an ability to deploy accurately established techniques of analysis and enquiry within the subject
- ii demonstrate conceptual understanding that enables the student to devise and sustain arguments, and/or to solve problems, using different ideas and techniques, some of which are at the forefront of the subject
- iii describe and comment upon particular aspects of current research, or equivalent advanced scholarship, in the subject
- iv demonstrate an appreciation of the uncertainty, ambiguity and limits of knowledge
- v demonstrate the ability to manage their own learning, and to make use of scholarly reviews and primary sources (for example, refereed research articles and/or original materials appropriate to the subject).

5.4 A graduate who has achieved an honours degree at the threshold level also has the qualities and transferable skills necessary for employment, requiring:

- i the exercise of initiative and personal responsibility
- ii decision making in complex and unpredictable contexts
- iii the learning ability needed to undertake appropriate further training of a professional or equivalent nature
- iv the use of information and communications technology to enhance digital capability in a variety of contexts
- v the demonstration of self-awareness and confidence in skills transferable to the workplace and the ability to articulate these to a particular employer
- vi the ability to respond appropriately to equal opportunities and diversity issues in context.

Appendix: Membership of the benchmarking and review groups for the Subject Benchmark Statement for Health Studies

Membership of the review group for the Subject Benchmark Statement for Health Studies (2016)

Professor Gwendolen Bradshaw	University of Bradford
Dr Helen Carmichael	University of West London
Dr Jane Day	University of Suffolk
Dr Mary Hannon-Fletcher	Ulster University
Stella Jones-Devitt (Chair)	Sheffield Hallam University
Lynda Stobert	Birmingham City University
Professor Brian Webster-Henderson	Edinburgh Napier University

Employer representative

Hilary Wyles	Skills for Health
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Student reader

Atika Tarajiya	University of the West of England
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QAA officer

Dan Murch	Quality Assurance Agency for Higher Education
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Membership of the review group for the Subject Benchmark Statement for Health Studies (2007)

Details provided below are as published in the second edition of the Subject Benchmark Statement for Health Studies.

Helen Bulpitt	Health Sciences and Practice Subject Centre, Higher Education Academy
Susan Cuthbert	University of Worcester
Stella Jones-Devitt (Chair)	Subject Centre Subject Adviser for Health Studies, York St John University
Mary Larkin	De Montfort University
Lynda Stobert	Birmingham City University
Marion Thompson	Birmingham City University

Membership of the original Subject Benchmark Statement group for Health Studies (2002)

Details below are as published in the original Subject Benchmark Statement for Health Studies.

Professor Elizabeth Alder	Napier University, Edinburgh
David Balsamo	Chester College
Dr Stuart Brand	University of Central England in Birmingham
Susan Cuthbert	University College Worcester
Lee-Ann Fenge	Bournemouth University
Carol Hodgkinson	The Nottingham Trent University
Martin Johnson	University of Central Lancashire
Dr Mike Money (Chair)	Liverpool John Moores University
Janet Quallington	University College Worcester
Dr Pamela Shakespeare	Open University
Lynda Stobert	University of Central England in Birmingham
Dr Robin Talbot	St Martin's College
Dr Marion Thompson	University of Central England in Birmingham

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