Healthy Municipalities, Cities and Communities
EVALUATION RECOMMENDATIONS FOR
POLICYMAKERS IN THE AMERICAS



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Healthy Municipalities, Cities and Communities EVALUATION RECOMMENDATIONS FOR POLICYMAKERS IN THE AMERICAS

Healthy Settings Unit Area of Sustainable Development and Environmental Health

Pan American Health Organization 525 Twenty-third Street, N.W. Washington, D.C. 20037

Phone 202.974.3243 Fax: 202.974.3645

E-mail: cerqueim@paho.org
Internet: http://www.paho.org

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Healthy Settings Unit Area of Sustainable Development and Environmental Health

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EXECUTIVE SUMMARY

Health promotion has emerged internationally as an important strategy for achieving equity, democracy and social justice. It has demonstrated success in addressing difficult health, social, and economic problems, providing a valuable framework through which to organize social and political action to improve health and living conditions. Health promotion is a technical and political approach to work across sectors and improve the quality of life.

Excellence in political leadership is characterized by the successful use of health promotion evaluation. Distinguished political leaders have implemented the following five recommendations for the benefit of their municipalities:

- 1. Recognize that health promotion is a fundamental part of pursuing equity, improving quality of life, and better health for all.
- 2. Require evaluation and monitoring¹ as part of all health promotion initiatives.
- 3. Establish an infrastructure to support health promotion evaluation.
- 4. Encourage and support collaboration among government sectors, the private and public sectors, universities, and non-governmental partners.
- 5. Use health promotion evaluation results.

Mayors and other government policy and decisionmakers who have followed these recommendations, have experienced important successes improving the health of their communities, as well as moving toward equity, democracy and social justice. For example:

They have addressed difficult health and social problems and strengthened environments supportive of health.

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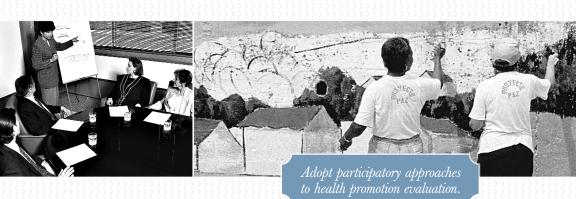
¹ As we advocate an ongoing participatory evaluation process, the use of the term evaluation in this document also implies monitoring.

They have good relations with the public through:

- Enjoying popular support for their initiatives.
- Responding quickly to requests by the public about accountability and results.

They have demonstrated the quality of their programs and services through:

- Consistency and transparency in planning and management practices.
- Improvement of the quality of their health promotion activities and programs.
- Monitoring and evaluation to assess which health promotion activities are successful.
- Use of best practices.
- Strengthened information monitoring systems.



They can work with partners to attract and mobilize resources through:

- The commitment and support of several partners.
- Attracting and mobilizing external funds to build on their successes.

Practical recommendations to implement health promotion evaluation are:

- 1. Adopt participatory approaches to health promotion evaluation.
- 2. Use multiple or mixed methods of evaluation.
- { 4 } 3. Establish an evaluation fund for health promotion effectiveness evaluation using 10% of total financial resources for health promotion initiatives.
 - 4. Support ongoing training and education in health promotion evaluation.
 - 5. Support applied research in health promotion evaluation.

"Health promotion has emerged internationally as an important strategy for achieving equity, democracy, and social justice."



INTRODUCTION

Health promotion has emerged internationally as an important strategy for achieving equity, democracy, and social justice. It has demonstrated success in addressing difficult health, social, and economic problems, providing a valuable framework through which to organize social and political action to improve health and living conditions.

Health promotion is considered the new public health because it is a technical and political approach that works across sectors, fosters empowerment and improves the quality of life. Because it is not focused on disease or illness, health promotion provides tools to cope with the changes in the socio-demographic and epidemiological profile and the subsequent challenge of promoting healthy lifestyles and social spaces, as well as preventing infectious and non transmissible diseases and responding to the needs of vulnerable population groups, especially children, the elderly and persons with disabilities. Regionally, in addition to familiar efforts to foster healthy lifestyles, these actions have taken the form of struggles against poverty and violence, emphasizing popular participation and social accountability.

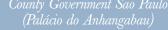
Health promotion, therefore, provides the framework for the creation of public policies in all sectors that support healthy and sustainable development. Examples from across the Americas demonstrate that planning, implementing and evaluating health promotion strategies at all levels, and through the Healthy Municipalities and Communities (HMC) process in particular, provides an important foundation to address and manage difficult health and social issues and create spaces supportive to health.

CREATING SYNERGY AND SUPPORTIVE ENVIRONMENTS FOR HEALTH PROMOTION AT THE LOCAL LEVEL:

The University of Sao Paulo (USP) has created a special scientific center, CEPEDOC (Centro de Estudos, Pesquisa e Documentação em Cidades e Municípios Saudáveis) that provides technical support to Mayors and other local authorities in the process of creating healthy municipalities and communities.

The Center for Policy Evaluation and Technology in Public Health (CEDETES), and the School of Public Health of the Universidad del Valle, together with the municipal government and communities in Cali, Colombia, developed a program to create and evaluate healthy communities. The model is currently generating good healthy municipality experiences, from which best practices are being identified and disseminated. The capacity of community organizations was strengthened by a network, which enhanced social mobilization as well as political and administrative actions that provided the opportunity for citizens to put forth concrete proposals for the consideration of the Mayor. The project was supported by the W.K. Kellogg Foundation.

During the exploratory research to develop this Policy Guide, the team met with and interviewed several policymakers in Brazil. As a result, this sparked the interest of the Ministry of Health of that country to develop a National Policy on Health Promotion. A document was elaborated and presented for consultation and public debate in November 2002.





Health promotion, as a strategy provides the framework for the creation of healthy public policies.

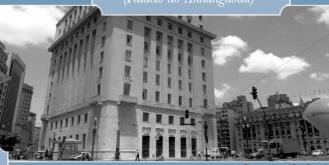


Photo courtesy of Beto Garavel

RECOMMENDATIONS FOR POLICYMAKERS

Health promotion is a valuable strategy to address health and social issues and its evaluation is an essential component of planning, implementing, and managing that strategy. Essential to good evaluation, in turn, is an infrastructure of human, institutional, and material resources. These recommendations express the interconnections among the various elements necessary to good health promotion evaluation and, thus, ideally should be taken as a whole. Within this whole, responsibility for some of these recommendations will lie with political leaders, while other recommendations relate to implementation of the health promotion evaluation process.

Excellence in political leadership is characterized by the successful use of health promotion evaluation. Distinguished political leaders have implemented the following five recommendations for the benefit of their municipalities:

1. Recognize that health promotion is a fundamental part of pursuing equity and better health for all.

Because:

- Health is a prerequisite for any kind of development or progress.
- Health promotion provides a strategic framework for designing public policies that sustain social and community—as well as individual—health and human development.
- Health promotion:
 - empowers individuals and communities to address their own issues,
 - utilizes the energy and creativity of all stakeholders through participatory action,
 - maximizes available resources through partnerships, and
 - fosters sustainable health and social development.

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HEALTH PROMOTION CONTRIBUTES TO SUSTAINABLE HUMAN AND SOCIAL DEVELOPMENT WITH EOUITY

Increasingly, the countries of the Region of the Americas recognize the importance of health promotion as a powerful public health strategy, and many are developing and implementing national and local health promotion plans of action. The Mexico Statement on Health Promotion (June 2000) calls for national or countrywide action plans to promote health. Guidelines for the development implementation and evaluation of said plans were adopted during the Fifth Global Health Promotion Conference held in Mexico (2000).

In Mexico, the Movement of Municipalities for Health is considered a key national strategy to promote health at the local level, through community participation, collaboration among different sectors, the dissemination of information on health and public policies, and the creation of healthy spaces. Today, the country has more than 1,500 registered municipalities supported by the Ministry of Health's Healthy Communities initiatives.

Healthy communities and municipalities in Mexico have implemented various social policies and carried out education campaigns to protect the environment, to improve water and basic sanitation, to promote healthy eating, active lifestyles, smoke free spaces, and to prevent substance abuse. They have invested in policies designed to improve the health conditions of vulnerable groups through programs such as "PROGRESA" and "Arranque Parejo en la Vida." The Municipalities for Health Movement in Mexico improves quality of life by creating healthy and supportive physical and social environments.

State-level networks and the Mexican National Movement of Municipalities for Health create opportunities for mutual support and the exchange of experiences regarding best practices in health promotion. The networks also strengthen management capacity, to improve the analysis and understanding of health and social problems and to share resources among municipalities. Since its creation in 1993, this network has carried out four thematic meetings per year and an annual conference.

THINK GLOBALLY, ACT LOCALLY: SHAPING LOCAL POLICY IN CREATING HEALTHY AND SUPPORTIVE ENVIRONMENTS

The Healthy Municipalities and Communities (HMC) movement, with its emphasis on community empowerment and strengthening of democratic decision-making structures, has influenced action and the development of public policy to address the multiple determinants of health. This is an exemplary health promotion initiative. The movement has particularly taken hold in Latin America and the Caribbean because of the region's rich history of community participation and more recent commitment to the supportive processes of democratization and decentralization. While each country's history and specific priorities have led to different ways of building health-promoting environments, almost every country in the Region is involved at some level in the healthy municipality, schools, work places, and community process. From 1995 to 2000, the number of healthy settings in countries across the Region has quadrupled. Through its participatory approaches, this movement is having a big impact on shaping policy for the development of human capital. Since 1996 the HMC Network of the Americas supported this movement and provided a forum for analysis and debate among Mayors and other stakeholders.



Promote the participation of young people and different stakeholders of the community

2. Require evaluation as part of all health promotion initiatives. Because:

- Produce key information as inputs for decision-making at all levels.
- Evaluation is essential to good planning and management as it:
 - helps to achieve high levels of public sector performance,
 - leads to learning and improvement in the future,
 - is an input to accountability mechanisms,
 - can demonstrate the extent of success, and
 - is critical to identify and sustain successful projects and to support increased access to resources.
- A commitment to health promotion entails a commitment to evaluation.
- Evaluation must be nurtured through appropriate incentives and leadership.
- The political backing of local decisionmakers–especially Mayors or their counterparts–is a key element of success.

HEALTH PROMOTION: COMMITMENT TO EVALUATION THROUGH PLANS OF ACTION AND THE ESTABLISHMENT OF HEALTH TARGETS

In November 2000, President Lagos of Chile declared the development of a national health promotion policy a priority and created VIDA CHILE. This intersectoral council guides and oversees the implementation, monitoring, and evaluation of the national Health Promotion Plan of Action with specific objectives and health targets. The Plan was based on a critical analysis of health conditions within the country and was prepared in consultation with technical experts and broad representation from different sectors of society. The main public health objectives and targets are: to reduce major health risk factors (the prevalence of obesity, sedentary lifestyles and tobacco consumption); to promote healthy psychosocial and environmental conditions; to strengthen citizen participation and social networks; to reinforce the role of the State as a regulator of the determinants of health; and to contribute to new public policies for health and quality of life.

To assess and ensure the effectiveness of the Plan, a commitment to monitoring and evaluation is essential. The Plan maintains a system of trimestral financial monitoring, annual qualitative and quantitative evaluation, and the systematic collection of health promotion "best practices." The commitment to monitoring and evaluation is supported by external evaluation consultants, and is a primary responsibility of the Health Promotion Division of the Ministry of Health.

During the year 2000, the Ministry of Health, with the National Institute of Statistics, carried out the National Survey of Quality of Life and Health for the purpose of creating a baseline by which to determine the changes achieved through the health promotion targets. Other studies carried out by the Ministry of Health include the collection of health education experiences and the application of a health promotion cost-effectiveness evaluation model. Financing for monitoring and evaluation is included in regional and local health promotion programs, with some support from national research organizations.

Trinidad & Tobago also formulated and implemented a National Health Promotion Plan of Action 1996-2001. The results of the evaluation carried out in 2002 provided key information on the experience that is now being used to develop a second Plan of Action. Monitoring and evaluation is becoming a growing practice at national and local levels in T&T.

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3. Establish an infrastructure to support health promotion evaluation. Because:

- A policy commitment to health promotion evaluation is essential in order to strengthen the development and implementation of evidence-based health promotion activities, but the commitment must also be manifested in a supportive infrastructure, including:
 - an appropriate conceptual framework,
 - skilled staff supported with financial and technical resources,
 - training opportunities that are accessible to all practitioners,
 - strategic use of existing resources to access essential data, and
 - learning to work with and influence the culture of the research community.



Health Secretariat, Colombia.

Universities can be important allies in the conduct of health promotion research and evaluation. In North America, programs in public health education and health promotion usually include training in evaluation. In contrast, not only is there a significantly less number of programs in health education and health promotion in Latin America and the Caribbean, but only a few of these programs provide training in evaluation. In almost every country there are several sources of data that, if properly analysed, interpreted, and packaged, could serve many health promotion needs such as building evidence of effectiveness, compiling lessons learned, and documentation of experiences.

The International Union for Health Promotion and Education (IUHPE), jointly with PAHO/WHO, is spearheading a global initiative to build the evidence base of health promotion effectiveness. Both the Latin American (ORLA) and the North American Regional Offices (NARO) have formed working groups and are in the process of assessing available information on the effectiveness of health promotion experiences.

The Canadian Consortium for Health Promotion Research is a national network of 15 university-based education and applied research centers from all regions of the country. The Consortium has held conferences, made an inventory for English and French language resources for health promotion education, hosted a listserv for health promotion educators, conducted multicenter collaborative research projects, and done policy-relevant research at the request of the federal government on health promotion issues. Funds for the individual member centers come from a variety of sources and funding to run the Consortium has come from the Canadian government.

In the Province of Ontario, Canada, the government of Ontario funds a network of resource centers specifically to provide evaluation consultation and skills development workshops at no charge to practitioners across the province. Parts of the network also provide resources, information materials, newsletters and other supports.

cedeters and the School of Public Health at the Universidad del Valle, together with key actors and community leaders evaluated the process and results of the healthy community program in Cali. The results were utilized by actors to reorient strategies and actions that maximize achievements, address weaknesses, and disseminate and advocate for the sustainability and expansion of the experience.

Evaluation of health promotion and prevention interventions is a priority for the Departmental Health Secretariat, Colombia, which in collaboration with CEDETES and the Universidad del Valle, developed an evaluation and trained their health staff, responsible for health promotion in all municipalities, on its utilization.

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among many sectors.

4. Encourage and support collaboration among government sectors, the private and public sectors, universities, and non-governmental partners. Because:

- Utilization of evaluation results can be enhanced by tailoring the emphasis and communication of results to the interests and needs of different health promotion partners.
- Partnerships and participation are integral to all stages of health promotion initiatives, from planning to decision-making to evaluation.
- Partnerships may involve intersectoral committees to oversee an entire project, enabling people to have a voice in decisions.
- Particular partners may take responsibility for specific aspects of a health promotion evaluation initiative, thereby taking some of the financial pressures off one sector to do it all.
- Governments can facilitate collaboration between universities, international NGOs, and agencies, some of which have more research and training capacity relevant to evaluation than country partners.
- Addressing the determinants of health requires working across sectors to take action and develop public policies to create supportive conditions.

5. Use health promotion evaluation results in decision-making.

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- Political leaders can respond quickly to requests from the public about accountability.
- The quality of their health promotion activities and programs is improved.
- Existing program effectiveness can be enhanced.

INTERSECTORAL COLLABORATION:

The CEDETES, Universidad del Valle, with the support of the Colombian Institute for Science and Technology (COLCIENCIAS), and the municipality of La Cumbre, Colombia developed a surveillance system to assess Adolescent Risk Behavior. The information generated is useful in the evaluation of health promotion strategies.

The network of PAHO/WHO Collaborating Centers and other partners, old and new (Health Canada, Department of Health and Human Services of the United States- Healthy People 2010, and the IDB) are working together in the development, implementation and evaluation of countrywide health promotion plans of action with health targets, especially in the area of resource mobilization and capacity building (Mexico Statement 2000).

The Healthy Municipalities initiatives exemplify the importance and success of collaboration among many sectors. In evaluation, alliances with universities are especially important to provide evaluation expertise and training resources, but different partners may be most appropriate for different parts of an evaluation.

MISSION BOGOTA: APPLYING THE RESULTS OF COMMUNITY ASSESSMENT AND EVALUATION

To improve the quality of life of Bogota residents, the Mayor and other policymakers implemented an integrated approach, which included critical public policies as part of their healthy municipality activities. This improved public safety and civic coexistence focused on the determinants of violence and the lack of human security. Based on a participatory community assessment, various policies were oriented toward developing mechanisms to prevent and reduce homicides, through the control and suspension of permits to carry weapons, measures that discouraged alcohol consumption and limited sale after certain hours, and the promotion of urban planning, improved public transportation, and extensive training of police officers on how to treat the public with dignity. The Mayor's commitment to social justice and integration, environmental sustainability, and economic growth, were the core values for the development of *Misión Bogotá*, which emphasizes high quality pedestrian public space, sidewalks, parks and bicycle paths. A stronger sense of community and belonging translated into higher confidence.

Based on the assessment, a goal was set to reclaim certain sectors of the city identified as problem areas due to a lack of public safety. In Bogota, the subject of safety was not seen exclusively as a police problem; it was also addressed from a cultural perspective with citizen participation. *Misión Bogotá* is a program where citizens have access to all of the municipal institutional capacity for the purpose of strengthening and revitalizing communities. *Misión Bogotá* has resulted in urban renewal of public spaces and the inclusion, in community development activities, of sectors of the population that were not typically seen as agents of development, such as commercial sex workers and homeless people. Sustainability of this model is greatly favored by the integrated approach, broad citizen participation and continuity in policy implementation by two different mayors during three political terms.

Since 1995, a reduction of almost 50% has been achieved in homicides, making Bogota now one of the least violent cities in Colombia. 15 }

RECOMMENDATIONS FOR PRACTITIONERS

Public health practitioners have a critical role to play in the evaluation of health promotion strategies. They are well positioned to advocate for the inclusion of a monitoring and evaluation mechanism in all health promotion interventions and strategies. They can assure that the methodology and instruments used in the evaluation of health promotion effectiveness are adequate to the task. Practitioners should also advocate for and ensure the implementation of the health promotion evaluation process.

Effective policymakers in government, private, and non-governmental organizations, successfully use health promotion evaluation, when practitioners:

1. Adopt participatory approaches to health promotion evaluation. Because:

- Results of program evaluations are more likely to be implemented when key stakeholders have participated in all stages of the evaluation process.
- Participatory strategies are required to reach health promotion outcomes such as equity and empowerment.
- It fosters the process of empowerment and builds stakeholders' capacity to address health needs.
- It increases the relevance and credibility of evaluation results.
- It encourages collaboration among different sectors, enabling conscious choices and a multisectoral approach to selecting indicators in complex health promotion projects.
- It accommodates the breadth and complexity of implementing health promotion strategies in its basic processes while also providing a vehicle for health promotion partnerships.

COTOPAXI AND LOJA, ECUADOR: CITIZEN-INITIATED, PARTICIPATORY COMMUNITY HEALTH ASSESSMENT

The government of Cotopaxi, supports the work of some 26 indigenous communities in the creation of healthy spaces, strengthening local capacity to implement this initiative, organized under a non-governmental organization called Union de Organizaciones Campesinas del Norte del Cotopaxi (UNOCANC). The assessment was conducted in cooperation with the School of Health Sciences at the Universidad San Francisco de Quito (USFQ), the Swiss Red Cross, and Desarrollo y Autogestión (DYA), an Ecuadorian non-governmental organization. There was great commitment and energy displayed by local residents, who viewed the project as a local activity and therefore expressed a sense of ownership and pride in the process.

In Loja, participatory needs assessment and planning provided the basis for a project implemented with five cantons (municipalities) in collaboration with PAHO, the Ministry of Public Health, the University of Loja, and the government of Holland. This project strengthened democratic decision-making at the local level, encouraged social participation, led to the establishment of alliances and improved governance. Along with the implementation of the project there was an evaluation process involving multiple stakeholders and partners that provided valuable information to strengthen local capacity. Major accomplishments included the design of gender policies to prevent violence against women and children, leading to the establishment of supportive social networks.

The municipality of Loja, one of the winners of the PAHO-CDC contest held during World Health Day 2002 to honor the theme of Physical Activity, was recognized during the inaugural ceremony of the Health Promotion Forum held in Santiago, Chile, 20 October 2002, for its role in the revitalization of public spaces to support and promote active lifestyles.



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Due to the successful management by the Municipality of Santafe de Bogota, Colombia, a reduction in deaths due to violence and traffic injuries was achieved between 1995 and 2003.

2. Support the use of multiple methods for process and impact evaluation of health promotion initiatives.

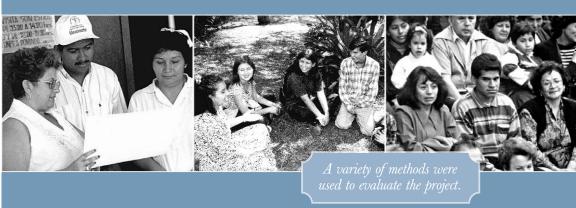
Because:

- Health promotion programs typically have a range of short- and intermediate-term outcomes in addition to the long-term outcome of improved health.
- Health promotion initiatives are complex and use many strategies. All strategies can be measured in terms of their activities (process evaluation) but only some strategies are suited to an impact evaluation.
- The evaluation of health promotion initiatives requires evaluation methods to assess both the process, origins, and the influence of context² on the program activities, in addition to evaluation of outcomes.
- Multiple methods allow the different dimensions of an initiative to be investigated; multiple sources provide a depth of information beyond that available through any one data source; and multiple investigators increase the range of perspectives and interpretations applied to an evaluation.
- The use of multiple methods also lends itself to the participatory partnership approach to evaluation recommended throughout this document.

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MULTI-METHOD ACTION RESEARCH TO EVALUATE

Community improvement initiatives in Cayo Hueso, Havana, Cuba were evaluated in an action research process involving community members and researchers. Indicators were selected through a series of workshops with community leaders. The indicators guided data collection and served as the basis for evaluating the effectiveness of interventions. A variety of methods were used to evaluate the project: A survey of 1,703 individuals in Cayo Hueso and a comparison community was conducted. An economic assessment of the costs of the interventions was performed. Direct effects such as reduction in disease incidence, and indirect effects such as perceptions of improved living and social conditions were assessed by a variety of methods. In-depth key informant interviews and extensive community interviews were completed and analyzed. Ecological indicators of environmental and health status of the communities were used in the assessment. Research results showed improvement in self-rated health of vulnerable populations in the targeted community in addition to a more general widespread increase in satisfaction with living conditions.



The Cuban Municipalities for Health Movement is a growing and very active partner in creating sustainable social development. It responds to a need to improve healthy eating, by improving consumption of fruits and vegetables. It has supported direct sale of these goods in popular fairs and markets, and at the same time, increasing income generation.

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3. Establish a fund for health promotion effectiveness evaluation using 10% of the total financial resources for health promotion initiatives.

Because:

- Analysis of previous international experience suggests that allocation of a minimum of 10% of total program resources is a reasonable standard to ensure the development and implementation of evaluations in health promotion.
- As part of good planning and management, each health promotion initiative should include at least a process evaluation component.
- Impact evaluation requires specific attention and funding in addition to that dedicated to health promotion programming.

4. Support adequate infrastructure for ongoing training and education in health promotion evaluation.

Because:

- Adequate training and education are required to develop expertise in evaluation.
- Evaluators need the knowledge and skills to make appropriate assessments.
- Staff must be trained in evaluation and exposed to new developments, methods, and technologies of evaluation.
- In many cases, continuing professional development opportunities are required to enable existing practitioners and policymakers to acquire the skills to utilize health promotion evaluation results.



required to develop xpertise in evaluation.

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THE ROLE OF UNIVERSITIES IN ONGOING TRAINING AND

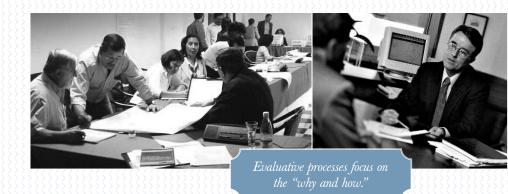
In Latin America and the Caribbean, academic programs in health education have recently incorporated theoretical foundations and strategies associated with health promotion into their curricula.

In 1996, PAHO and the University of Puerto Rico invited the WHO Collaborating Centers in the Region of the Americas, ORLA/IUHPE and a diverse group of faculties (Public Health, Psychology, Public Policy, Education, Nutrition, Family Health and other social and behavioral science programs), to a meeting to analyze the state of the art in training in critical areas of health promotion. The participating institutions formed the Consortium of Universities and Training Centers in Health Promotion and Health Education. This Consortium has fostered national networks of academic institutions that are strengthening the training and development of human resources with essential health promotion and social participation content and methods. More than thirty university institutions of the Americas, the Caribbean Region and Spain have joined the Consortium. The network is also encouraging research and evaluation to build the evidence base in health promotion, identify good practices and foster sharing and collaboration among teachers and students of various institutions.

In 1999, the Canadian Public Health Association (CPHA), Brazil's National School of Public Health (ENSP), and the Brazilian Association of Graduates in Collective Health (ABRASCO) embarked on the three-year Health Promotion in Action (HPIA) Project, with funding provided by CIDA's Canada-Brazil Technology Transfer Fund. The project combines health promotion theory, research and training with practice and dissemination. Activities are led by a variety of players including the ENSP, its Academic Health Centre located within the project site and ABRASCO. Accomplishments include various technical exchange visits and workshops, curriculum development, support to community-based health promotion initiatives, local research projects and reorientation of health care programs toward health promotion. A critical element of the project has been the development of several unique partnerships at the local level to promote equity and better quality of life for residents within the project site.

5. Support applied research in health promotion evaluation. Because:

- Applied research is action-based research that is directly relevant to changing practice and focuses on issues of program design, appropriateness, and effectiveness.
- Evaluation of health promotion is based on the contextual situation of each place where a project is implemented.
- Evaluative processes focus on the "why and how" and not only on the "what and how many."
- Health promoters need to assess the extent to which evaluation results apply to their own circumstances and increase the likelihood that relevant evidence will be utilized in their own setting.
- A feedback loop of good practice and local research findings is strengthened and validated among policymakers, communities, practitioners, and researchers that address the needs of all.





All partners reached consensus and committed themselves to achieve health goals based on the results of their research.

VILLA CENTENARIO AND SAN ROQUE, SAN SALVADOR:

In San Roque, a community of San Salvador City, a partnership between three NGOs, the municipal government, the Italian International Cooperation Agency, the Catholic Church, one public and one private university, the local health center, and the community members, implemented a project for supporting this marginalized community in the health, production and education fields during the period of 1989 to 1996. The community epidemiology approach was applied with remarkable results. All partners reached consensus and committed themselves to achieve four health goals based on the results of their research: 1. That no child would die during the first four years of life; 2. That no woman would die of cervical-uterine cancer; 3. That no elderly person would be lonely or abandoned; and 4. That no adolescent would have an unwanted pregnancy before the age of 20.

Villa Centenario, inaugurated in April 2002, is the result of concerted efforts among PAHO, the Ministry of Health, Vice-Ministry of Housing and the Municipality to implement a new initiative of local and sustainable development. A key feature of this project was the extensive consultation with community organizations and their participation in designing and implementing the first experience in the Americas where a new vision is used to build healthy housing and sustainable human settlements. Villa Centenario is an anti-seismic housing complex, developed to benefit 100 families, whose lives were affected by the earthquakes of January and February 2001. The Villa consists of a plaza, a community center and a health clinic, creating a supportive environment that encourages the adoption of healthy lifestyles.

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CONCLUSION

Health promotion provides an important framework for addressing health and social issues in a democratic fashion and providing a supportive environment to achieve health equity and social justice. Health promotion strategies incorporate geographic and sociological realities, administrative and cultural traditions, prevailing political and economic situations, and widely varying levels of technology. Health promotion, therefore, enables policy leaders to address local issues that build on the capacity of the community. At the same time, local health promotion initiatives can draw on, learn from, and contribute to national and international health promotion experience.

Essential to health promotion is monitoring and evaluation—the imperative for good evaluation and evidence cuts across sectors, programs and countries—which must therefore be supported. The recommendations presented in this document describe ways in which political leaders can provide coherent and systematic support for health promotion and health promotion evaluation. While resources will be required to disseminate and utilize health promotion evaluation results, facilitating the creation of interest networks to share results and experience, and implement all the recommendations in this document can encourage the utilization of health promotion results. The countries of the Americas have made important strides in these areas; strong leadership will continue to yield dividends for sustainable development.

To support the monitoring and evaluation of health promotion initiatives, [as mandated in the key agreements of Member States in the Mexico Declaration for Health Promotion (2000); and the Health Promotion in the Americas, Resolution CD43.R11 (see annexes)], the Pan American Health Organization (PAHO) through its Working Group

on Healthy Municipalities and Communities (HMC) Evaluation³ has compiled a collection of Region-appropriate recommendations on evaluation processes and tools entitled Participatory Evaluation for Healthy Municipalities: A Practical Resource Kit. The HMC strategy is a practical way of applying health promotion principals at the local level, and is being strengthened by the PAHO's Mayors' Guide for Promoting Quality of Life. The evaluation guidelines are based on the key areas agreed on by the Evaluation Group (1999) and the Antigua Principles (see annex). Although the main focus of the Resource Kit is on evaluating Healthy Municipalities Cities, and Communities in the Americas, the guidance provided could also be used to evaluate other local development initiatives that share similar health promotion values and strategies.

* MEMBERS OF THE WORKING GROUP

MARCO AKERMAN DAVID MCQUEEN ABC Region Medical School Director Global Health

CEPEDOC-USP

Sao Paulo, Brazil Atlanta, Georgia, USA

MARIA TERESA CERQUEIRA ANGEL ROCA

PAHO/WHO CDC

Washington, D.C., USA Atlanta, Georgia, USA

MIGUEL MALO ELIAS RASSI NETTO PAHO/WHO Ministerio de Salud

Brasilia, Brazil Brasilia, Brazil SUZANNE JACKSON

Centre for Health Promotion Universidad del Valle

University of Toronto Cali, Colombia Canada

* WITH THE COLLABORATION AND SUPPORT OF

Richard Edwards, CHP, Toronto Claudia Conti, PAHO/WHO Sylvain Paradis, Health Canada Alejandro de la Torre, Kelly Hooper, CDC PAHO/WHO Mary Hall, CDC Maria Cristina Franceschini,

Marilyn Rice, PAHO/WHO PAHO/WHO

Lilian Arevalo, PAHO/WHO

LIGIA DE SALAZAR

In early 2001 as a follow-up to a number of initiatives, The Group agreed that specific evaluation tools, frameworks and evidence of effectiveness were needed to support the Healthy Municipalities Movement in Latin American and Caribbean countries. The establishment of the group has provided an opportunity and platform to discuss these matters, compile and develop the necessary resources, as well as document and disseminate stories from the field.

INTERNET RESOURCES

TOOLS, RESOURCES, INFORMATION, SUPPORT, GOOD EXAMPLES

Pan American Health Organization:

See www.paho.org

Follow the "Health Promotion" link to more information on Healthy Municipalities. Searching for "monitoring" and/or "evaluation" produces a variety of documents of possible interest.

The PAHO Brazilian website has links to several health promotion sites:

See www.opas.org.br/promocao

The PAHO Colombian website has links to several healthy municipalities sites:

See www.col.ops-oms.org/Municipios/

The PAHO/who Carmen Initiative is a non-communicable disease intervention programme complimentary to healthy municipalities concepts and processes:

See www.paho.org/english/hcp/hcn/hcncarmen_1.htm

Mexico Municipalities for Health:

See www.municipio-saludable.gob.mx

World Health Organization:

See www.who.int/hpr

WHO link to health promotion issues and research provides a variety of information and resources.

Follow the previous link to the Global Programme on Health Promotion Effectiveness:

See www.who.int/hpr/ncp/index.shtml

The European Office of WHO has a healthy cities link providing a variety of information and resources, including documents and links for health impact assessment, a tool for assessing the effects of plans and policies of different sectors on health:

See www.who.dk/healthy-cities/UrbanHealthTopics/20020116_2

United Nations Development Programme Evaluation Office:

See www.undp.org/eom

Includes samples and formats for selected monitoring and evaluation tools as well as more in-depth guidance through publications such as Guidelines for Outcome Evaluators and Evaluation

Capacity Development.

The World Bank Operations Evaluation Department: See www.worldbank.org/oed

Follow the links to such topics as "Building Evaluation Capacity" and "Designing Project Monitoring and Evaluation."

The World Bank also provides material on poverty programme impact evaluation.

See www.worldbank.org/impact/index.htm

The University of Kansas, Community Tool Box.

See http://ctb.ku.edu

Indiana Healthy Cities and Communities Network.

See www.iupui.edu/~citynet/cnet.html

California Healthy Cities and Communities Network.

See www.civicpartnerships.org

Centre for Health Promotion, University of Toronto:

See www.utoronto.ca/chp

Includes links to publications and evaluation resources, including information on health promotion best practices.

Ontario Healthy Communities Coalition: See www.healthycommunities.on.ca Information on healthy communities in Ontario, Canada plus links to evaluation resources.

Sustainable Communities Network:

See www.sustainable.org

A United States of America network of communities, including information and resources on community sustainable development, indicators and evaluation.

Centro para la Evaluación de Políticas y Tecnología en la Salud Pública (CEDETES):

See www.cedetes.org

Includes information on the processes evaluation methodology and outcomes of the healthy municipalities and communities initiatives, and information on the evaluation of the effectiveness of health promotion.

Centro de Estudos, Pesquisa e Documentação em Cidades e Municípios Saudáveis:

See www.cidadessaudaveis.org.br

ANNEXES

Healthy Municipalities, Cities and Communities Evaluation Consensus for the Americas (1999)

The Key Areas for Evaluation of Healthy Municipalities, Cities and Communities, identified at the Washington, D.C. Meeting in 1999 are:

- 1. Participation: assess the quality of participation, who participates, and who does not and why; assess mechanisms that contribute to inclusion and those that result in more exclusion; assess participation in decision making and resource management; assess the contribution of citizen participation to achieve health targets; analyze capacity building for people to participate in the evaluation as well as for institutions. What management and/or structure changes favor greater participation?
- 2. Public policy: assess to what extent the Healthy Municipality process contributed to establishing healthy public policy at the local level, or to the revision of existing policies or municipal ordinances or advancement of institutional policies such as smoke free spaces in schools and/or restaurants.
- 3. Intersectorial action: assess the degree and quality of the intersectorial collaboration and coordination; was the Healthy Municipality's Plan of Action developed jointly by various sectors? Was there input from the private sector? Is there an intersectorial committee steering the Healthy Municipality Plan of Action? Do key sectors commit resources and take on responsibility for the targets that are in their scope of action? Which sectors participate?
- **4. Sustainability:** assess the sustainability of the process, in terms of strengthened capacity at the local level, both of people's participation in planning and policy formulation as well as changes in the institutions and organizations that nurtured democratic decisions and good governance in health.
- 5. The process and impact of HMC: monitor and review data on the process and impact of the collective activities to become a Healthy Municipality, the Plan of Action, participation, public policy, intersectorial action and sustainability.

Antigua Principles

At a meeting in Antigua in 2001, members of the PAHO Healthy Municipalities Evaluation Group discussed important values and principles that need to be part of any evaluation related to health promotion and particularly, the healthy municipalities' movement. These are presented here as additional information for those charged with the implementation of the recommendations in this document. The recommendations were developed to be consistent with these principles.

* VALUE

The evaluation process should uncover theoretical, ideological, and political assumptions, and make explicit power relations, including those involving the evaluator. The evaluation should respect and value local experience and knowledge, acknowledging people as the main health resource. Evaluation should encompass a spirit of hope, happiness, love, and fun, always taking into account equity, social justice, and solidarity.

* CONTEXT

The evaluation of Healthy Municipality initiatives should:

- take into account the local and global contexts, including barriers and facilitators,
- focus as appropriate on populations, social groups, communities, organizations, individuals, etc., and
- recognize and make explicit the different cultural and social identities in the contextual analysis.

* USEFULNESS

The evaluation of Healthy Municipality initiatives is useful when it:

- answers the questions of who, why and how,
- is integrated in the planning process as well as oriented towards action and change,
- contributes to the creation of resources in the community,
- · has practical and political relevance,
- helps position Healthy Municipality as an investment, and
- acknowledges the necessity of a variety of forms of dissemination and feedback mechanisms.

* PARTICIPATION

The evaluation of Healthy Municipality initiatives should at each stage:

- involve in appropriate ways those who have a legitimate interest in this initiative,
- ensure that the members of the community whose health and quality
 of life is being addressed be involved in all stages of the evaluation,

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- ensure that others with a legitimate interest be involved in all stages of the evaluation. These can include organizations of health professionals, policy-makers, local and national health agencies, as well as individuals and organizations of other sectors, funding agencies, etc., and
- lead to a shared ownership of the initiative and the evaluation process.

* MULTIPLE METHODS

The evaluation of Healthy Municipality initiatives should:

- reflect the principles of health promotion,
- utilize an appropriate mix of methods, techniques, and tools,
- draw upon information from a variety of sources,
- focus on structure, process and/or short-term and long-term results depending on the different stages of Healthy Municipality development,
- develop indicators that are timely and appropriate to the context, and integrate learning from results, including unanticipated outcomes.

* EMPOWERMENT

The evaluation of Healthy Municipality initiatives should:

- build on a community's strengths,
- support local problem solving,
- ensure equity by allowing all voices to be heard, including those who are the most vulnerable and least powerful, and
- allow for information from the evaluation to be used by those involved to advocate for and promote Healthy Municipalities.

* LEARNING

The evaluation of Healthy Municipality initiatives should:

- foster a co-learning process,
- encourage dialogue, reflection, and facilitate all forms of knowledge development by those involved in and influenced by the process, including any external evaluators,
- acknowledge that learning is the key to local community and organizational capacity building, and
- lead to action and change.

* APPROPRIATENESS

The evaluation of Healthy Municipality initiatives should:

- adapt to the local context,
- be sensitive to the complexity and dynamics of the context,
- reflect the needs of those involved,
- be viable in terms of local resources,
- be accessible to, and understood by all,
- be designed by those who are stakeholders, and
- be grounded in basic program assumptions.

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FIFTH GLOBAL CONFERENCE ON HEALTH PROMOTION

Health Promotion: Bridging the Equity Gap

Mexico City, June 5th, 2000

MEXICO MINISTERIAL STATEMENT FOR THE PROMOTION OF HEALTH

From Ideas To Actions

Gathered in Mexico City on the occasion of the Fifth Global Conference on Health Promotion, the Ministers of Health who sign this Statement:

- Recognize that the attainment of the highest possible standard of health is a positive asset for the enjoyment of life and necessary for social and economic development and equity.
- Acknowledge that the promotion of health and social development is a central duty and responsibility of governments, that all sectors of society share.
- Are mindful that, in recent years, through the sustained efforts of governments and societies working together, there have been significant health improvements and progress in the provision of health services in many countries of the world.
- 4. Realize that, despite this progress, many health problems still persist which hinder social and economic development and must therefore be urgently addressed to further equity in the attainment of health and well being.
- Are mindful that, at the same time, new and re-emerging diseases threaten the progress made in health.

- 6. Realize that it is urgent to address the social, economic and environmental determinants of health and that this requires strengthened mechanisms of collaboration for the promotion of health across al sectors and at all levels of society.
- Conclude that health promotion must be a fundamental component of public policies and programs in all countries in the pursuit of equity and better health for all.
- Realize that there is ample
 evidence that good health
 promotion strategies are effective

Considering the above, we subscribe to the following:

ACTIONS

- A. To position the promotion of health as a fundamental priority in local, regional, national and international policies and programs.
- B. To take the leading role in ensuring the active participation of all sectors and civil society, in the implementation of health promoting actions which strengthen and expand partnerships for health.
- C. To support the preparation of country-wide plans of action for promoting health, if necessary

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drawing on the expertise in this area of WHO and its partners.

These plans will vary according to the national context, but will follow a basic framework agreed upon during the Fifth Global

Conference on Health Promotion and may include among others:

- The identification of health priorities and the establishment of healthy public policies and programs to address these.
- The support of research which advances knowledge on selected priorities.
- The mobilization of financial and operational resources to build human and institutional capacity for the development, implementation, monitoring and evaluation of country-wide plans of action.

- D. To establish or strengthen national and international networks which promote health.
- E. To advocate that UN agencies be accountable for the health impact of their development agenda.
- F. To inform the Director General of the World Health Organization, for the purpose of her report to the 107th session of the Executive Board, of the progress made in the performance of the above actions.

Signed in Mexico City, on June 5th 2000, in Arabic, Chinese, English, French, Portuguese, Russian, and Spanish, all texts being equally authentic

43rd Directing Council 53rd Session of the Regional Committee Washington, D.C., USA, 24-28 September 2001 RESOLUTION

CD43, R11

Health Promotion in the Americas

THE 43rd DIRECTING COUNCIL, Having considered the proposal for strengthening health promotion planning for action in the Americas (Document CD43/14);

RESOLVES:

- 1. To urge Member States to:
 - (a) position the promotion of health on the political agenda and as a priority in national and local development plans and programs;
 - (b) implement public policies and legal frameworks to improve the determinants of health and reduce disparities in the health of vulnerable populations and communities:
 - (c) strengthen intersectorial collaboration and ensure the active participation of all sectors and civil society in the development, implementation, and evaluation of health promotion plans of action for jointly identified health priorities:
 - (d) support research to advance knowledge on selected priorities, to identify good practices, and increase the evidence base of effective health promotion interventions;
 - (e) support the training and development of human resources in health promotion theory and practice across the various health and social science disciplines;

- (f) mobilize and designate the necessary financial and operational resources to build human and institutional capacity for the development, implementation, monitoring, and evaluation of health promotion plans of action at national and local levels:
- (g) establish and strengthen local, national, and international networks to promote health;
- (h) strengthen activities designed to create healthy environments and protect the environment.
- 2. To request the Director to
 - (a) support Member States in strengthening their strategic planning for action in health promotion, as called for in the Mexico 2000 Declaration;
 - monitor progress made towards fulfillment of commitments made at the Global Conference in Mexico City, as well as to evaluate the experiences, and identify and disseminate best practices;
 - (c) intensify efforts to mobilize additional financial and human resources for technica cooperation in health promotion and protection.

(Eight meeting, 27 September 2001)

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Health Promotion Forum of the Americas: Enabling and Empowering Partnerships for Health Santiago, Chile, 20 October 2002

The Chile Commitment for Health Promotion

Gathered in Santiago, Chile the participants of the Health Promotion Forum of the Americas, on the occasion of the Centennial of the Pan American Health Organization, Regional Office of the World Health Organization (PAHO/WHO), inspired by the health promotion principles and values in the Ottawa Charter, establish the following Commitment.

Recognizing the urgency of addressing the social determinants of health and acknowledge the different challenges that each State faces, reaffirm that it is necessary to strengthen the mechanisms of collaboration among all sectors and levels of society in order to promote health and equity.

Are mindful that the 43rd Directing Council of the Pan American Health Organization in September 2001 and the Mexico Statement of 2000 (Fifth Global Conference on Health Promotion) committed countries to significantly strengthen healthy public policies, as well as health promotion planning, surveillance and evaluation in the Americas.

Encouraged by this historic consensus and aware that there is evidence of the effectiveness and best practices of health promotion strategies, we agree to carry out the following concrete actions:

 Significantly strengthen the necessary policy and judicial frameworks as a solid base for health promotion.

- Develop national health promotion action plans togethe with public and private sectors and civil society, backed by stable financing, legal frameworks, and organizational infrastructure
- Implement national action plans with goals and health targets to promote and protect the health of populations, especially the most vulnerable groups, in accordance with the needs and priorities of each country.
- 4. Encourage the development of subregional health promotion plans with objective and goals according to priority areas of common interest, while at the same time strengthening cooperation and solidarity among countries.
- Establish healthy public policies that promote quality of life and social development beyond the health sector, contributing to forming alliances between public and private sectors and civil society.
- Incorporate health promotion as a central component in the health sector reform process and as a basic element in the reorientation of health systems and services, improving access to services and essential drugs.
- Reinforce the relationship between national policy and local actions. As part of the

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- decentralization process of health promotion, local authorities are assuming leadership to position health or the political agenda, reinforcing health promotion in municipalities, communities, schools and work places.
- 8. Implement local action plans with goals and health targets or objectives, strengthening health municipalities and communities, a healthy diet and physical activity, the prevention of violence and accidents, as well as the promotion and protection of human rights.
- Strengthen municipal management capacities to establish intersectorial committees, develop action plans and implement long-term and short-term health promotion strategies with the participation of civil society.
- 10. We dedicate ourselves to improving the health and quality of life of the population of the Americas, taking into account the commitments in the UN Millennium Goals (especially, reducing maternal and infant mortality), as well as the PAHO/WHO Strategic Plan 2003 07 (especially promoting healthy lifestyles and social spaces, and growth and development).
- 11. Reinforce or develop surveillance, monitoring and evaluation of the different health promotion plans, processes and strategies at the subregional, national and local levels.

SUPPORT MECHANISMS

We recognize that in order to implement health promotion political frameworks, strategies and action plans, the following support mechanisms must be in place:

- A critical mass of professionals and community leaders trained and constantly updated in the area of health promotion.

 Although there is the need to evaluate and document experiences in the Region, the health promotion knowledge base and evidence is increasing at such an accelerated rate that it is essential that researchers, academic centers, professionals and government maintain continuous communication and collaboration.
- Partnerships between public and private sectors and NGOs to foster and support the implementation of healthy public policies, including actions to protect the environment, and national health promotion plans (including the monitoring and evaluation of policies, action plans and goals).
- A scientific evidence base for the establishment of health promotion policies at the regional and national level. The Member States should strengthen the evaluation of health promotion strategies, as well as strengthen surveillance systems and monitoring mechanisms in order to support political decisions with data and provide scientific evidence of achievements and progress.

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In support of these actions, PAHO will strengthen leadership and technical cooperation in health promotion, facilitating the collaboration among countries and the mobilization of necessary resources. It will also assist in the monitoring and evaluation of the progress in fulfilling this Commitment and will inform the Member States every three years.

PAHO will also offer opportunities for disseminating and sharing knowledge and experiences gained in the process of reaching the agreements adopted in the Chile Commitment through publications, the Web page, subregional meetings, and periodic conferences.

Signed on 24 October 2002 ir Santiago, Chile.



















Health Promotion: Enabling and Empowering Partnerships for Health

