Concepts and approaches in the evaluation of health promotion.
Dilemmas in the evaluation of health promotion: how should Brazilian scientific output be oriented?
Concepções e abordagens na avaliação em promoção da saúde.
Dilemas da avaliação em promoção da saúde: como orientar a produção científica brasileira?

Marcia Faria Westphal ¹

The authors of the article “Concepts and Approaches in the Evaluation of Health Promotion”, from the National School of Public Health, have made an important contribution to Health Promotion evaluation in various ways, which will be specified below.

Their article critically analyzes the trend to overvalue evaluation as a methodological instrument producing signs – scientific evidence – of the effectiveness of Health Promotion programs. This problem has been faced by evaluators, generally academics, together with managers and local agents that are urged to prove to funding agents and society at large that this new approach to health work is efficient.

In contrast to this trend, the authors present various arguments, including paradigmatic, epistemological, and methodological ones, related to the conceptual field of Health Promotion. They call attention to analogies and especially to the divergences with the field of medical care practices that have been increasingly oriented by scientific evidence and identified with the biomedical model. The authors show that the evaluative practices and evidence of effectiveness constructed with this biomedical model are simple, direct, and easy to demonstrate: an individual with type-1 diabetes takes insulin and his blood sugar drops, thus demonstrating, through the result of the blood test, the evidence that the medication is effective for such occurrences.

In Health Promotion, participatory and inter-sectoral practices attempt to deal with the socioeconomic, cultural, political, and environmental determination of the health/disease process by establishing healthy public policies that transcend the health sector and are oriented by another model (socio-historical, cultural, and humanist), involving a complex view of the problems and their causality and potential resolution, thus requiring contributions by various sciences and as well as different intervention strategies. The change occurring in the view and the strategies, which encompass various dimensions of social life, requiring multidisciplinary and inter-sectoral practices, has a decisive impact on the evaluation models needed to construct such evidence. The fact that one cannot establish a direct and immediate relationship between the cause (the intervention) and its effects in the resolution of such complex problems (e.g., the influence of social inequality on infant mortality rates, mediated by other conditions and factors) hinders the gathering of evidence of effectiveness in multi-factor interventions and places in a relative light the value of evaluations performed to prove the importance of Health Promotion actions as an essential component of human development actions in an integrated and sustainable development model.

A lesser issue in this debate, but one that needs to be clarified nevertheless, is a conclusive argument related to the paradigmatic discussion: The issue is thus to view the health sector and the population’s health as a fundamental economic investment for human and social development. This statement actually contradicts another, which purports to place Health Promotion within the sphere of the national development model and policies, where the subordination of the economic to the social is pursued. The authors no doubt meant to call attention to Brazil’s development model, which basically values only the economic sphere, relegating human and social development to a secondary status. Health Promotion for the population does not occur only through economic investments, but the paradigm transforms the decision-making process concerning where and how to conduct sectoral investments in such a way as to produce greater gains for the population’s health. This means defining health and quality of life as a fundamental concern for all sectors of government, that is, health should be included as one of the decision-making criteria within all specific sectors. For example, by viewing health as an investment, before making investment decisions the São Paulo Municipal Secretariat of Educa-

¹ School of Public Health, University of São Paulo, Department of Public Health Practice, Health Promotion Thematic Area. Center for Studies, Research, and Documentation on Healthy Cities (CEPEDOC), marciafw@usp.br.
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Proceedings to deal with the issue of Health Promo-

and the search for new methodologies and pro-

cedures to deal with the issue of Health Promo-

tion, especially in dealing with the theory and

practice of evaluating Health Promotion pro-

grams.

The authors’ proposal on the theory and

practice of evaluating Health Promotion pro-

grams, based on “theories of change” and aimed

at an in-depth discussion of the relationship be-

tween the theoretical constructs and the results,

does not correspond to the customary practice

of researchers from other countries, still heavily

influenced by the rationalist paradigm. Potvin

and Richard (2001), in an article discussing

Health Promotion evaluation in the communi-

ty, present the four categories of work found in

the literature and the frequency with which they

are found: comprehensive evaluative designs,

which are the least frequent; articles presenting

results of evaluation of mid-term processes or

results, which are the most frequent; articles

presenting the final results of programs; and fi-

nally articles discussing methodological issues

related to the three previous types (also quite in-

frequent). Articles presenting the final results of

Health Promotion programs are generally dis-

appointing, because their conclusions are gener-

ally that the programs are not effective: either

they have failed to meet with the complexities of

Health Promotion issues, or their evaluation has

failed to grasp this complexity. The authors

comment that the evaluative designs adopted

are generally experimental or quasi-experimen-

tal and fail to grasp the complexity of Health

Promotion interventions, and that this probably

explains why the results obtained fail to demon-

strate the programs’ success.

Researchers dedicated to evaluating Health

Promotion actions according to the concept de-

fended by this article and who propose to ana-

lyze complex interventions utilizing such evalu-

ation approaches as theory-driven evaluation

(TDE) and realist analysis, as the article propos-

es, defend the use of models and therefore logi-

cal criteria for evaluation other than traditional

scientifically rigorous criteria, thus of the posi-

tivist line. There can be two logical criteria based

on previously elaborated complex conceptual

models, according to Potvin & Richard (2001):

either transparency in the decision-making

process or critical implementation of the multi-

ple methodological procedures, which tends to

be criticized by the traditional methodologists

and runs the risk of not have the resulting arti-

cles approved for publication.

Despite the risks related to publication and

the possible underrating of the resulting re-

search work due to the gap vis-à-vis the hege-

monic positivism and rationalism of the capi-

talist world, Health Promotion evaluation as

conceptualized in this article has already be-

come a common practice in some academic in-

stitutions in Brazil. The theme of intersectorali-

ty linked with quality of life is one of the lines

of investigation in Schools of Public Health in

several Brazilian universities and related institu-

tions such as the National School of Public

Health (ENSP-FIOCRUZ), the home institution

of the authors of the current debate article, and

the Center for Studies, Research, and Documen-

tation on Healthy Cities (CEPEDOC – Healthy

Cities), affiliated with the School of Public

Health at the University of São Paulo, focused

on the follow-up and implementation of expe-

riences with integrated and participatory public

management in Brazilian cities, as well as the

State University in Campinas (UNICAMP) and

others. Various theses and documents have been

produced within this line of research, utilizing

methodologies similar to that proposed in this

article, combining methodologies and associat-
ing partners and communities involved in the
production of evidence of effectiveness for
Health Promotion programs, related much
more to the process than to the results in terms
of changes in coefficients and indicators.

Investment in Health Promotion programs
from a broad and critical perspective and the
use of logical evaluation models (Dwyer &
Makin, 1997), with the combined use of differ-
ent methodologies, reflects an alignment with
many professionals working in this area in dif-
ferent parts of the world, but it is not a hege-
monic position. It means a commitment to a
truth, a view of the world and society, but it can
involve problems and conflicts with individuals
and institutions where ideas associated with be-
haviorism, positivism, and or classical epidemi-
ology prevail.

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Health promotion evaluation, realist
synthesis and participacion
Avaliação em promoção de saúde,
síntese realista e participação

Marcia Hills & Simon Carroll 1

There are many ways to enter a debate, more or
less polemical, critical or supportive. We will ad-
dress some very important issues raised by the
initiating paper in this debate (Carvalho, Bod-
stein, Hartz & Matida, 2004), but first we should
thank the authors for an opening that is clear
and forthright, innovative and important. They
have managed to present what we feel are many
of the key issues in the debate over how to eval-
uate the effectiveness of health promotion, with-
out in any way closing off alternative avenues
and approaches.

We are grateful for this opportunity, as one
of the main planks of the paper we are respond-
ing to ask us to consider “realist synthesis” as a
promising alternative approach to the dominant
mode of systematic reviews in health promo-
tion. Along with other colleagues from the
Canadian Consortium of Health Promotion Re-
search, we have recently completed the initial
phase in a multi-year project with Health Cana-
da, that attempts to develop a framework for as-
sessing the effectiveness of community initia-
tives to promote health, based largely on the
theoretical and methodological insights of “real-
ist synthesis” (Hills, O’Neill, Carroll and Mc-
Donald, 2004; Hills, Carroll and O’Neill, in
press; Pawson and Tilley, 1997; Pawson, 2001,

There are three parts to this friendly re-
sponse: 1) A rationale for our agreement with
the fundamental position outlined by Carvalho
et al., that: the “realist” approach is the “most
radical and innovative perspective in evalua-
tion,” and that effectiveness research should be
focused on “mechanisms” that are shared across
initiatives, making these the theoretical units
which form the basis for systematic comparison
and review of evaluation data; 2) a brief descrip-
tion of our initial attempt to apply this approach
to assessing the effectiveness of federally-funded
community initiatives in Canada, and a discus-
sion of some of the opportunities it presented,
along with some of the challenges it posed; this
discussion will raise some of the internal diffi-
culties and questions for the realist synthesis
approach to health promotion; 3) a very short dis-
cussion of a possible external tension between
the realist approach and the principled empha-
sis in health promotion (HP) on the importance
of participation and empowerment in all its as-
pects, including evaluation.

To begin, it is clear that the demand for “e-
vidence-based policy” is not going to go away, be-
cause at its heart, even if it metamorphoses into
something with a new label, it speaks to the need
for policy-makers to account for and justify their
expenditures. This is part of a long-term trend
in changing state-societal relations, where “re-
sults-based management” and “performance in-
dicators” are becoming indispensable tools for

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1 Centre for Community Health Promotion Research.
University of Victoria, BC, Canada.