

Monitoring and Evaluation of Health in All Policies

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Session 3.1. Evaluating Progress in Health
in All Policies



Outline

- Definition monitoring and evaluation (retrospective)
- Benefits
- Characterise m&e of HiAP
- **Short-term changes**
 - Changes
 - Steps
- Longer term changes
- Global and regional monitoring of HiAP implementation
- SDG indicators



Monitoring health determinants

“the ongoing, systematic collection, analysis, interpretation, and dissemination of data regarding a health-related event for use in public health action.”

<https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5013a1.htm>, and similar for WHO, see: http://www.who.int/topics/public_health_surveillance/en/).



Evaluation

Analysis of the effectiveness of a specific intervention or set of interventions in achieving an intended outcome or set of outcomes



Benefits of Monitoring and Evaluation



- Holds partners and agencies accountable
- Tests the validity and precision of health impact predictions made in assessments
- Adds to the body of knowledge/evidence base on interventions
- Provides early warning of unforeseen results/impacts
- Empowers communities when they are involved in monitoring



Benefits of Monitoring and Evaluation



- Provides a way to circle back to the community and stakeholders
- Provides a better understanding of the value of HiAP
- Lessons learned to improve the HiAP
- Strengthens the vision of health in the community and stakeholders



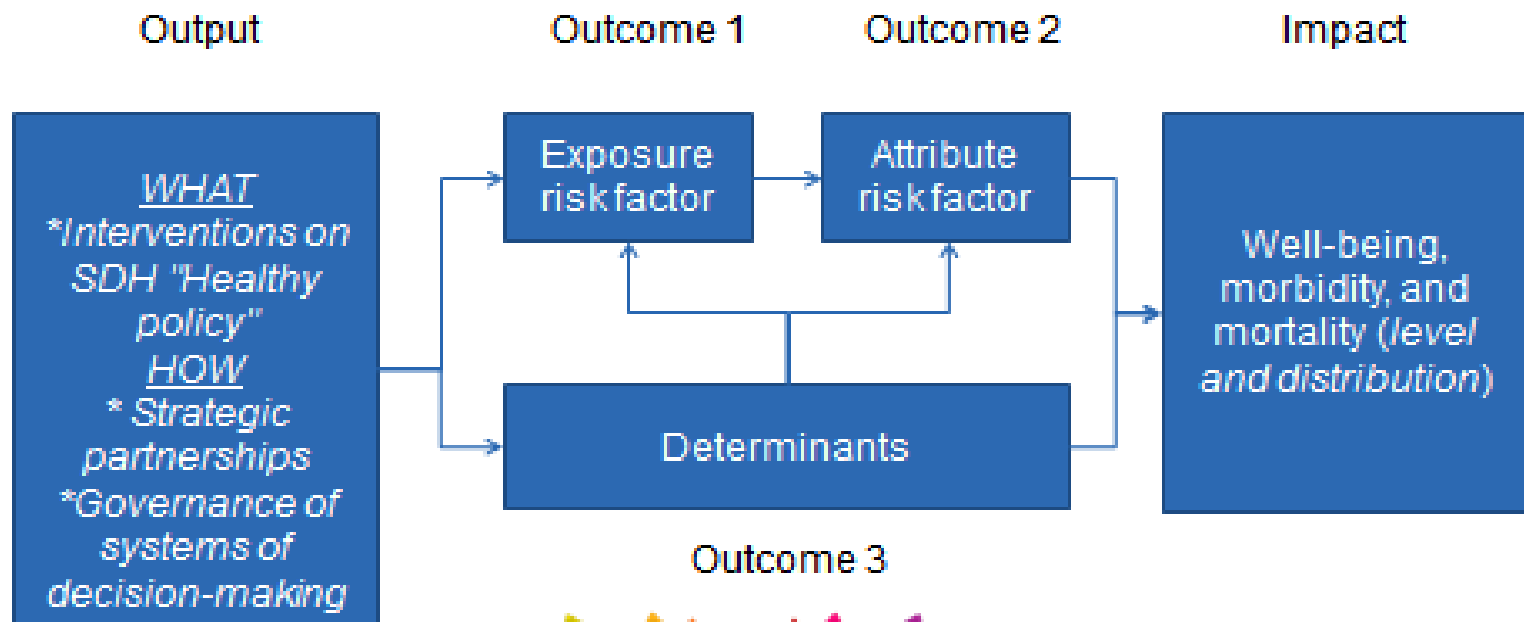
Characterize M&E for HiAP

- Based on the development of a logic framework that outlines a coherent chains of relationships to show how HiAP activities can lead to long term goals
- **Not seeking to establish causality through statistical correlation (not yet)**



Impact chain

Health in All Policies impact chain



Characterize types of HiAP activities

1. Intersectoral Policy
2. Systems/process aspects of HiAP
3. Strengthen public health institutions
4. Strengthen other social and political institutions with public health knowledge (e.g. Media, parliament)



1. Health Lenses/Intersectoral Policy Working Groups

- Evidence base (literature review, health impact assessment)
- Reports & recommendations
- Resources
- Proposals
- Projects
- Policy



2. Systems aspects of HiAP

- Develop relational systems that connect individuals, agencies and sectors
- Develop/utilise governance systems that connect HiAP work with senior decision makers
- Undertake joint problem/opportunity (cross-disciplinary) identification and decision-making
- Develop new opportunities for expanding HiAP across more determinants of health
- Follow, coordinate and support the work of the intersectoral policy working groups and overall HiAP



3. Strengthen public health and related institutions



Kingdon's theory of political agenda setting Problems, Policies and Politics

- **Policy windows** open when, simultaneously, an issue is recognized as a **problem**, **policy** formulation and **refinement happens** and the **political** will for action is present
- Kingdon, J. (2011), *Agendas, Alternatives and Public Policies*



Strengthen public health institutions

- Reports on sustainable development
- Reporting on health determinants including HiAP activities
- Public health legislation
- Capacities for health impact evaluation
- Education and training for Health in All Policies
- New tools for monitoring and evaluation



Strengthening evaluative capacities

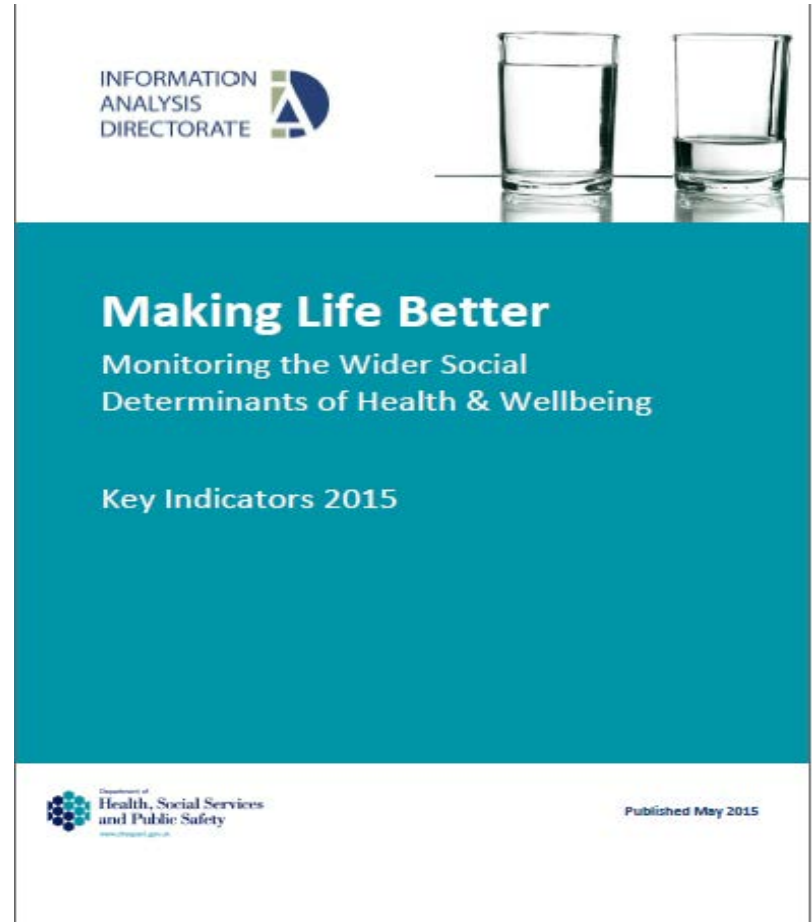
*types of assessments to predict health and health equity impacts
(predictive evaluations/policy analysis)*

- Health Impact Assessment
- Cost-Benefit Analysis
- Health Impact Assessment
- Integrated Impact Assessment
- Environmental Impact Assessment
- Human Health Risk Assessment

**EFFECTIVENESS DATA /INTERVENTION
RESEARCH//WHAT INTERVENTIONS WORK?**



Public health reporting



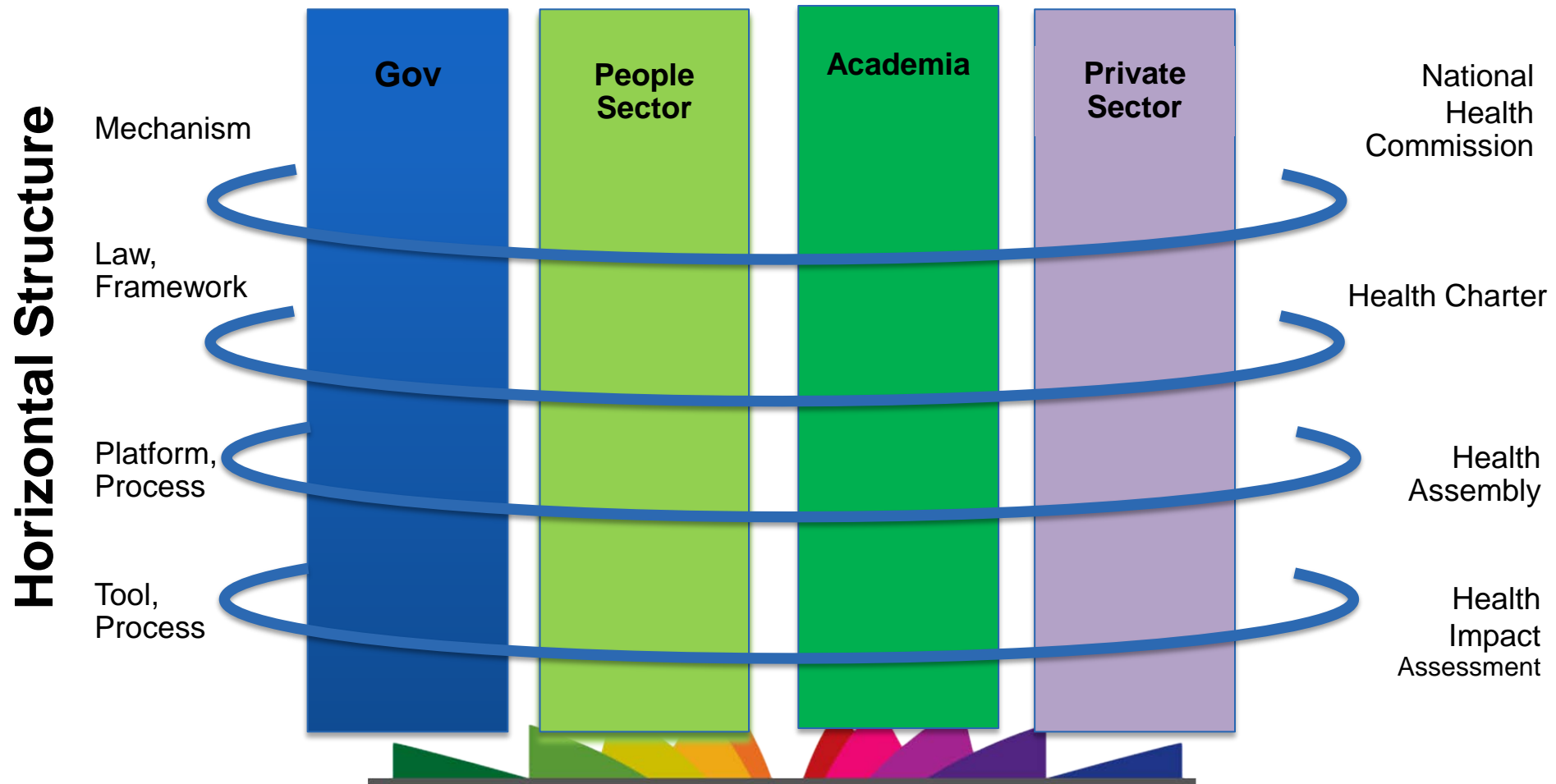
Strengthen other social and political institutions

- Reporting and laws in parliament includes criteria for health
- Media education
- Citizen health forums
- Education
- Interlinked data on health determinants

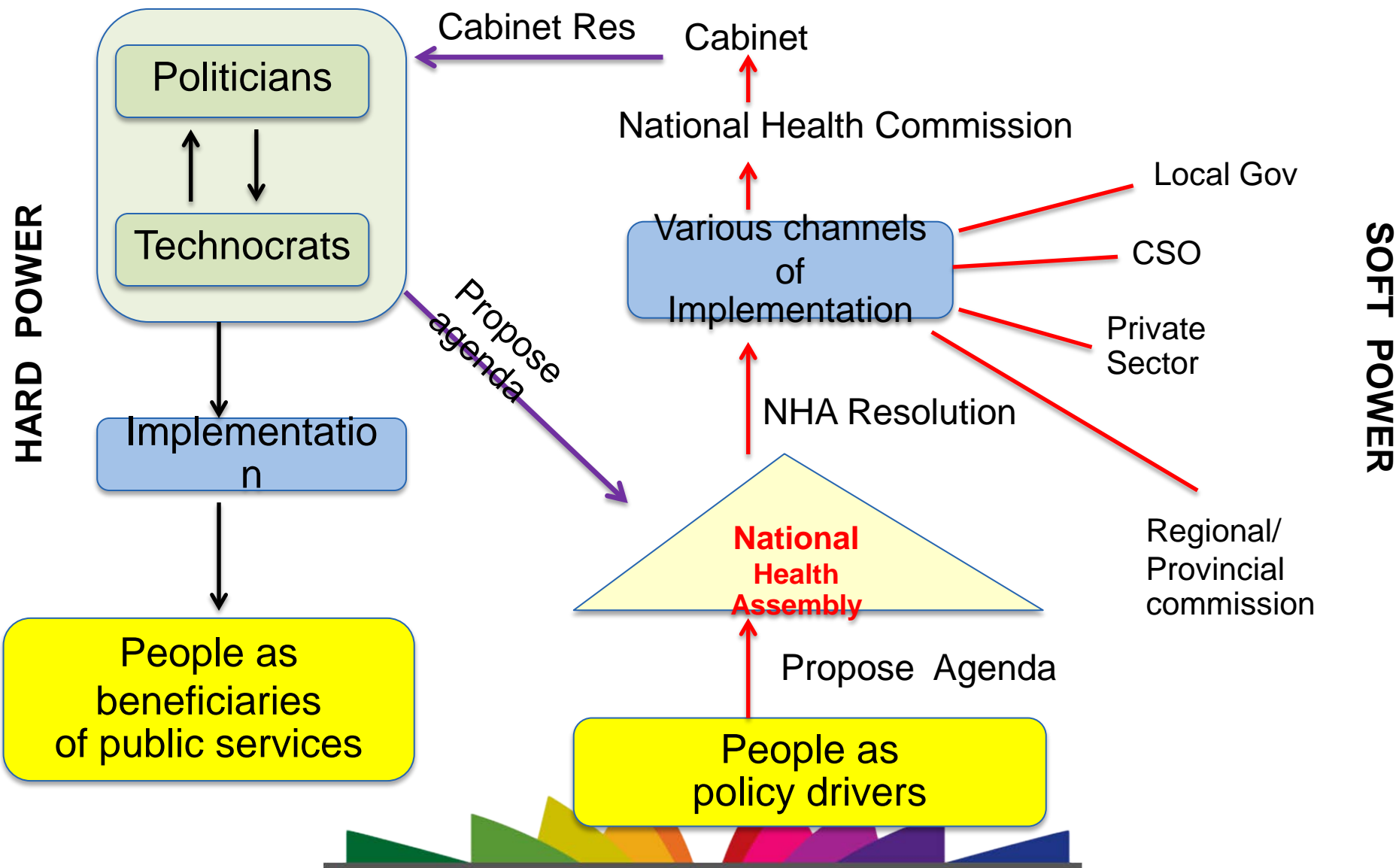


HiAP Implementation in Thailand

Vertical Structure



THAILAND National Health Assembly



Short-term changes

- Increased awareness and understanding of SDoH
- Personal and collective learning
- Broadened perspectives on issue in sectors
- Convergence of agendas and agreement on action
- New and strengthened alliances
- Increased organizational and personal capacity for intersectoral work
- Legitimising proposed actions
- Reduction in 'silo'ed' mindset and processes
- Understanding each others' language and processes



Methodological approaches

- Organizational learning and critical action research
- Realistic evaluation
- Program logic as a basis for attribution of health and equity outcomes
- Theories on policy agenda setting and implementation
- Complexity as a frame for understanding policy making processes
- Health, human impact assessment



Evaluation steps-

Develop/utilise governance systems that connect HiAP work with senior decision makers

Stage 1: Building theories and mapping context

- Program Logic Model
- Interviews with key political actors and senior executives

Stage 2: Testing the theories and examining practice

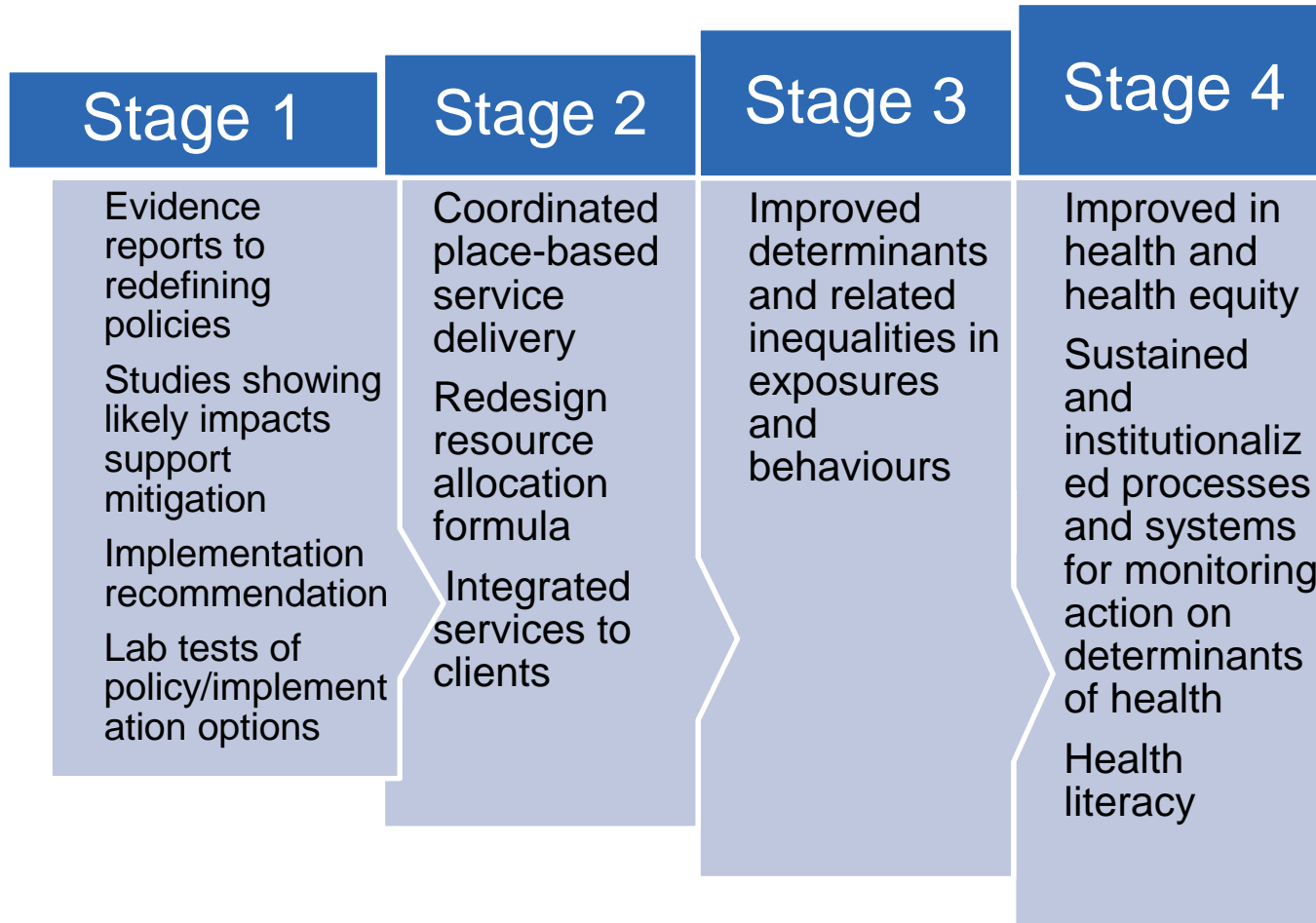
- Policy working groups assessments and case studies
- How is the Steering group functioning
- Annual online surveys

Stage 3: Synthesis and triangulation of data

- Collaborative examination of emerging findings
- Annual research forums



Longer term view of evaluation



Global / regional monitoring: *indicators of Health in All Policies implementation (1)*

- Number of national policies for health and well-being that systematically address at least two priority determinants of health (and involve at least two sectors) and health inequalities (with targeted populations)
- Existence of favourable conditions for Health in All Policies development (joint budgets)



Global / regional monitoring: *indicators of Health in All Policies implementation (2)*

- System for SDH-focused monitoring: determinants and actions on determinants, routine national reports
- Existence of training and capacity-building



SDG key targets of health determinants

WHO as custodian Agency [blue]

Health in All Policies (HiAP) in SDGs SEEN THROUGH THE EQUALL LENS

Indivisibility of SDGs



Opportunity: Urban Health

Nearly 70% of the world's population will be living in urban areas by 2050

URBAN CLIMATE

Clean energy

Transport

Housing

Waste management

Thank you!



SDG— promote EQuALL opportunities for health

6.1. Access to safe drinking water; 6.2 sanitation;
7.1 modern energy
11.1 Adequate housing and basic services
11.2 Safe, affordable.. transport systems for all
11.6 Reduce adverse impact of cities .. air quality
11.7 provide green and public spaces
12.5 Reduce waste generation, chemical waste
13.1 Strengthen resilience to climate-related hazards
14.1 Prevent and significantly reduce marine pollution
15.1 Conservation.. of freshwater ecosystems

5.2 Eliminate violence against women and girls
10.3 Eliminate discriminatory laws
10.6 Ensure enhanced representation and voice for developing countries
10.5 regulate and monitor global financial markets
12.6 Encourage ..transnational companies to integrate sustainability into reporting
16.1 Reduce all forms of violence/related death
16.3 Ensure equal access to justice for all
16.5 Substantially reduce corruption and bribery
16.7 Ensure responsive, inclusive, participatory, representative decis.-making
16.10 Ensure public access to information

1.3 Implement social protection systems
2.1.Ensure access by all people to safe, nutritious,.. food
2.3 Double.. incomes of small-scale food producers, secure, equal access to land
4.1 Ensure quality primary and secondary education
4.2 Ensure that all girls and boys have access to quality early childhood development
8.5 Achieve **full employment** and decent work for all
8.6 Reduced proportion of youth not in employment, education or training
8.8 Protect labour rights and promote safe and secure working environments