Evaluating Healthy Universities

Introduction: Key Issues, Challenges and Opportunities

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The Healthy Settings approach, as applied through the Healthy Universities model, offers a range of perceived benefits:

- Comprehensive framework within which to work
- Connections between people, environments and behaviours
- Importance of interrelationships between different groups of people
- Value of interactions between different health issues and initiatives
- Inward and outward perspective
- Contribution to ‘joined-up’ public health
A judgement or appraisal about the effectiveness of an initiative.

This judgement can be:

- about the **process** – whether the most appropriate approaches and methods were used for the particular circumstances

- about the **outcome** or the effectiveness of the initiative – whether you achieved your set objectives.
The aim of evaluation is to contribute towards solving practical problems, in terms of what works and why. It is about collecting information to inform action. Most of all it is learning from experience.

Springett, 2001
Types of Evaluation

- Process evaluation
- Outcome evaluation
- Impact evaluation
- Cost-benefit and cost-effectiveness
Agree purpose of evaluation

Clarify the aims, objectives and vision of your HU approach

Develop objectives which are: Specific, Measurable, Achievable, Realistic, Time-Bound

Agree what information needs to be collected – how, when and by whom

Plan milestones for review

Develop a reporting system – who would be interested, how should accomplishments be reported, how could partners use results to assess impact
Within the context of a Healthy University, evaluation is likely to be focused at two levels:

- **‘Discrete’ Component Activities and Projects:** relatively easy to plan and conduct evaluation
- **Overall ‘Whole System’ Programme and Approach:** much more challenging...
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The Healthy Settings approach offers:
“opportunities for comprehensive interventions which can be directed at health behaviour change and environmental change to achieve improved health outcomes”

Nutbeam, 2000 [IUHPE: The Evidence of Health Promotion Effectiveness]

“an efficient and effective framework for planning and implementing health promotion initiatives and ultimately assessing their impact”

Goodstadt, 2001 [WHO: Evaluation in Health Promotion]

However…
“The settings approach has been legitimated more through an act of faith than through rigorous research and evaluation studies.”

St Leger, 1997
Diversity of interpretations & real-life practice under ‘healthy settings’ banner

“Whilst the theoretical framework guiding the work may be rooted in systems thinking and organizational development, the practice is often constrained to smaller-scale project-focused work around particular issues.”

Dooris, 2004
Construction and funding of evidence base tends to be behavior or disease focused

“[what settings initiatives achieve] does not fit easily into an epidemiological framework of ‘evidence’ but needs to be analysed in terms of social and political processes.”

Kickbusch, 2003
Complexity of evaluating integrated and ecological ‘whole system’ approaches

“Researchers fail to recognize and monitor the synergy created by integrating components…This ignores an essential quality of the settings approach – the interaction of components in a specific context.”

Rowling and Jeffreys, 2006


