

# Evaluation Overview - Interim results

## Regional Framework for Scaling Up and Expanding Healthy Cities in the Western Pacific

Dr. Sally Fawkes

Michelle Amri





# Introduction

- **Dr. Sally Fawkes**

La Trobe University, Melbourne, Australia

- **Michelle Amri**

WHO Western Pacific Regional Office

# Background

- **Healthy Urbanization Regional Framework for Scaling Up and Expanding Healthy Cities in the Western Pacific 2011-2015**
- *The goal is to promote, expand and scale up Healthy Cities through national government support as a pathway to healthy urbanization towards the attainment of optimum and equal population health and development*



| 5 Strategic Approaches   | Key Action Areas                         | Output  | Outcome   | Impact  |
|--|--|---|---|---|
| <ol style="list-style-type: none"> <li>1 Strengthening Institutional arrangements</li> <li>2 Building capacity for action</li> <li>3 Strengthening evidence base</li> <li>4 Advancing national policy and action</li> <li>5 Supporting city-to-city learning and networking</li> </ol> | <p>Country specific<br/>WHO specific</p> | <p>Increased physical coverage</p> <p>Improved systems and processes towards institutional approach</p> <p>Improved quality of programmes, projects and areas of work</p> | <p>Healthy urbanization through scaling up and expanding healthy cities in the Region</p> | <p>Optimum and equal population health and development</p> <ul style="list-style-type: none"> <li>▲ Health</li> <li>▲ Equity</li> </ul> |

**FIGURE 5** Logical framework for scaling up and expanding Healthy Cities

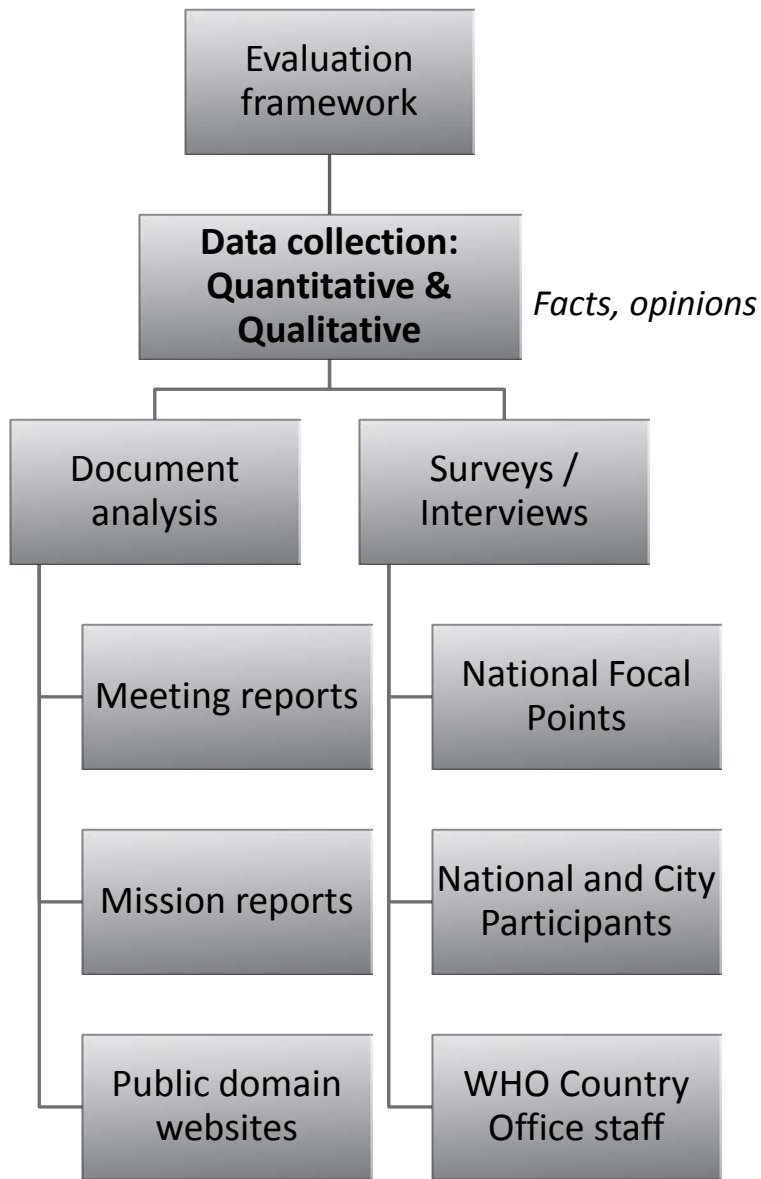
# Evaluation project: Aim

## Aim

- To examine the progress made by countries, cities and WHO in implementing the Regional Framework for Scaling Up and Expanding Healthy Cities in the Western Pacific Region for 2011-2015

# Evaluation project: TOR

- Develop a framework and detailed plans for evaluating the implementation of the Regional Framework
- Assess the impact of the WPRO Healthy Cities activities on the individual, organization and system between 2011 and 2015
- Identify strengths of the WPRO Healthy Cities programme and areas for strengthening
- Assess the cities' need for capacity building and technical support to strengthen implementation of the Healthy Cities approach for healthy urbanization, and
- Make recommendations regarding WPRO's priority support to cities.



**Data analysis**

Pattern, trends in quantitative data

NVivo

Manual thematic coding



**Data display, analysis >> Case studies, report**

# Methodology

# Evaluation Framework

The problem:  
Unhealthy urbanisation  
Drivers of unhealthy urbanisation

Regional context  
- Asia Pacific  
- urban

WHO's role:  
Legitimise and stimulate action at a systems level via the development and implementation of the Regional Framework

| Inputs and processes  | Outcomes  | Impacts   |   |  | Data sources   |  | Analysis   |  | Interpretation  |
|---|---|---|---|--|--|--|--|--|---|
|   |   | City  | Country   | Region   | Quant  | Qual   | Quant  | Qual   | Theory<br>Inter-regional comparison   |
| <b>Regional meetings</b><br><br><b>Policy dialogues</b><br><br><b>Study tours</b><br><br><b>City-to-city activities</b><br><br><b>Training</b><br><br><b>Twinning</b> | Social relationships, trust,<br>Shared knowledge, 'urban health literacy',<br>Motivation,<br>Capacity - individuals, teams, organizations | <b>Governance and Leadership</b><br>- governance structures and processes<br>- leadership | <b>Policy</b><br>- healthy public policy/health in all policies framework | <b>Infrastructure and resources</b><br>- changes in financing<br>- changes in workforce<br>- changes in monitoring, evaluation and research structures and processes | - changes in groups and networks<br>- changes in social institutions | <b>Activities</b><br>- changes in programs and services<br>- changes in environments | Surveys completed by Member State participants<br><br>- Documents - public domain, supplied by WHO WPRO<br>- Surveys completed by Member State participants and interviews | Identification of patterns and trends in quantitative data from surveys<br><br>Identification of key emerging themes from all qualitative data sources | Analysis of findings in the light of the aims of the strategies to expand and scale up Healthy Cities in the Region |

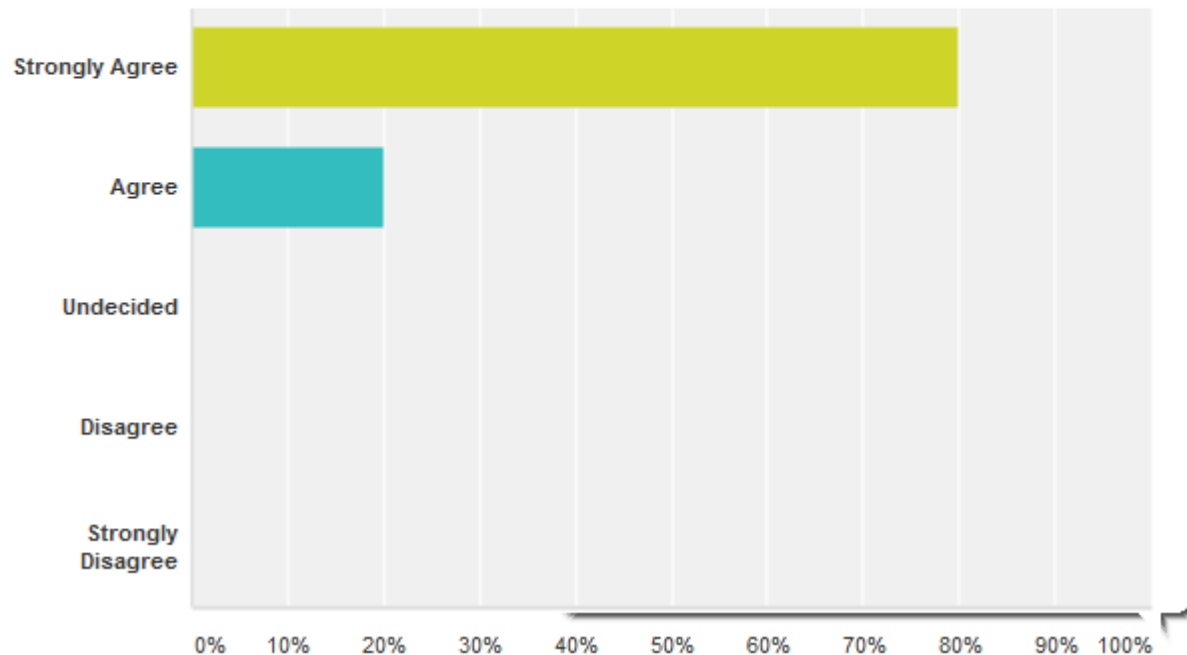


# Example

## Survey Monkey output

**Consider this statement: "Healthy Cities will be the major approach used in our country to address the key emerging urban health priorities"? Do you: (Tick one)**

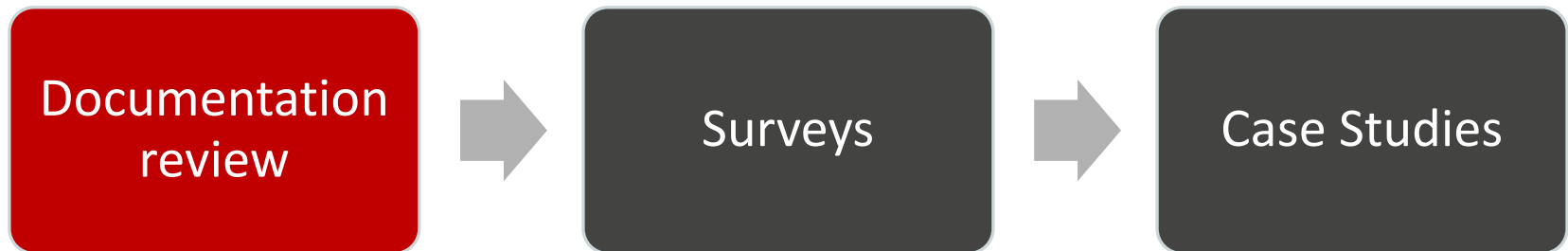
Answered: 5 Skipped: 2



# Headline results

- Healthy Cities has been valued as a strategic approach to promoting urban health and participating countries/cities will apply it in future to address emerging urban health priorities
- There is a need for sustaining efforts in political and technical engagement at all levels; conceptual, institutional, structural and programmatic innovation; and production of evidence

# Evaluation Results



2010

- Meeting of National Focal Points, Dalian (China)
- Meeting for Developing Technical Networks and Resource Centres for HC, Seoul (Korea)
- WHO HC Recognition
- Urban HEART Training, Seoul (Korea)
- ESHUT Project
- Cities Forum on ESHUT, Manila (Philippines)

2011

- Regional Meeting on Promoting Healthy Living and Preventing NCDs through HC, Shanghai (China)

2012

- Consultation Meeting for National Accreditation System, Seoul (Korea)
- HC Leadership Program, Macau (China)
- Global Conference for the Alliance for HC, Brisbane (Australia)
- WHO HC Recognition
- HC Advocacy Workshop, Vientiane (Lao PDR)
- HC Advocacy and Multi-Sectoral Planning Workshop, Phnom Penh (Cambodia)
- Pre-Conference Workshop: Regional HC Leadership Course, Brisbane (Australia)
- WKC HiAP and NCDs Course, Brisbane (Australia)
- 5<sup>th</sup> Global Conference for Alliance for HC, Brisbane (Australia)
- Short Course on Community Health Promotion for Pacific Island Countries, (Singapore)
- Urban HEART Pilot Implementation, Mongolia, Philippines, Viet Nam
- Urban HEART Training, Suva (Fiji)
- Workshop on Strengthening Implementation of Health Promoting Schools, Mekong Region (Singapore)
- Mekong Rainbow Project

2013

- Healthy Cities Leadership Program, Macau (China)
- Global Conference for Health Promotion, Helsinki (Finland)
- HiAP Training Course, Manila (Philippines)
- HC Leadership Course for Western Area Health Initiative, Shanghai (China)
- HC Leadership, Hai Phong, Viet Nam
- HC Leadership Course, Ulaanbaatar (Mongolia)
- Mekong Rainbow Project

2014

- Global Conference for the Alliance for HC, Hong Kong SAR (China)
- WHO HC Recognition
- HC Workshop, Phnom Penh (Cambodia)
- 1<sup>st</sup> Biennial Meeting of the HC Leadership Programme, Hong Kong SAR (China)
- HC Strategic Planning Workshop, Davao (Philippines)

### WHO's impact:

- Political engagement and HC legitimacy
- Policy support – national, local levels
- Capacity building through training, events
- Resource mobilization
- Advocacy of multi-sectoral partnerships

WHO HC Activities 2010-2014

# Evaluation Results



# Survey respondents \*

| Category                              | No | Countries  |                                |                 |
|---------------------------------------|----|--|--------------------------------|-----------------|
|                                       |    | <b>National</b>  | <b>Sub-national</b>            | <b>Local</b>    |
| <b>National and City Participants</b> | 6  | National:<br>Cambodia (1)<br>Laos (1)<br>Philippines (2) | Philippines (1)<br>Vietnam (1) | Philippines (1) |
| <b>National Focal Points</b>          | 2  | Laos<br>Vietnam  |                                |                 |
| <b>WHO Country Offices</b>            | 4  | Cambodia<br>China<br>Laos<br>Vietnam                     |                                |                 |

# Survey Key Findings

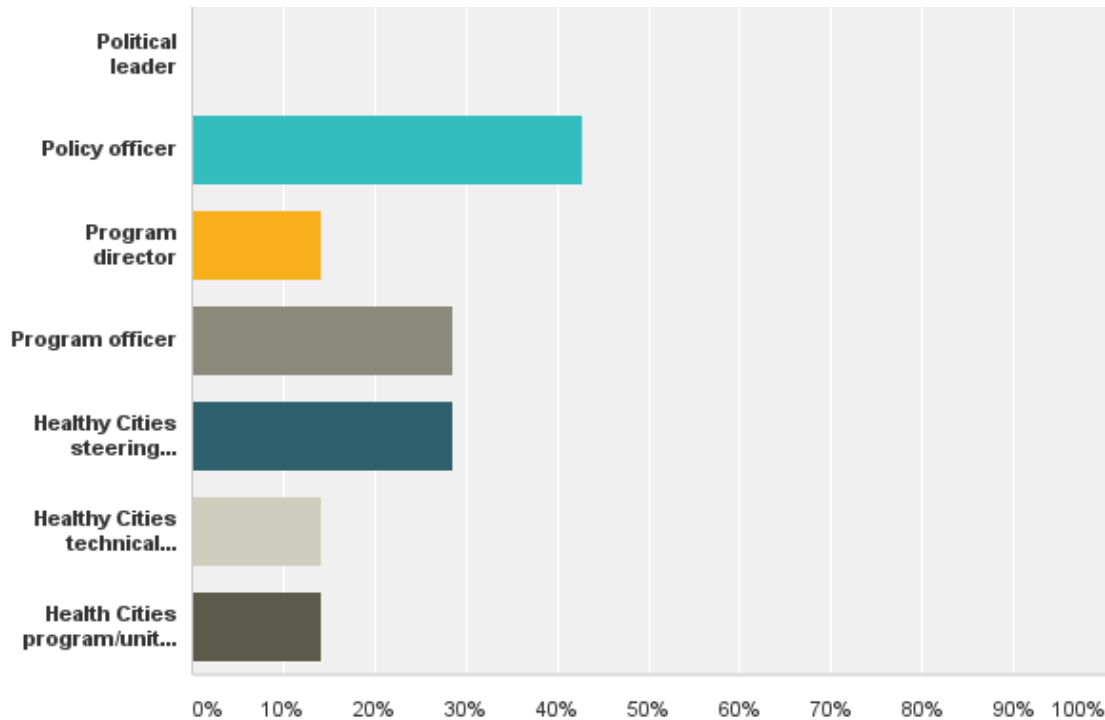
- WHO's roles = technical guidance, strategic support, facilitating exchange of experience(s), encouraging political commitment, mobilizing funds
  - Number of HC has increased
  - Cities don't have own research strategy/ plan or evaluation (or relevant partnerships) in place to support HC work
- HC played a role in local-level healthy urban planning:
  - Multi-sectoral participation (education engaged) and support from national governments need strengthening
- Visibility and political legitimacy of HC needs strengthening (rated none to low to medium)
  - New concept and not yet well established (n=3/4)
  - Quite well established and starting to make a difference to national policies and actions (n=1/4)
- HC regarded as strategic approach in addressing key emerging health priorities

# Survey Key Findings

- HC concept/approach:
  - quite well established and starting to make a difference to national policies and actions (2/2)
  - will be major approach to address key emerging health priorities
- Most impact of HC initiatives on governance, policies in the health sector
- Network of institutions supports technical work on urban health
  - Mainly government sector, also non government and community sector
- Most important sector in HC initiatives: healthcare services
- Current mechanisms/structures are somewhat effective
- Major HC activities: NCD prevention/control, healthy settings
- Participated in city to city learning, training and leadership programs, technical training (Urban HEART, healthy settings)
  - WHO role positively regarded
- Research related to Urban HEART undertaken (STEP survey)



# National and City Participants



**Cambodia**

**1N**

**Philippines**

**2N, 1Sub, 1L**

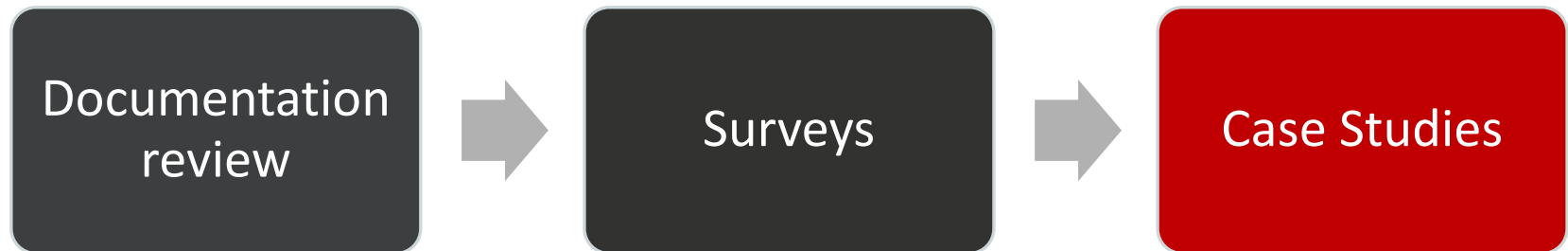
**Vietnam**

**1Sub**

# Survey Key Findings

- HC concept/approach:
  - quite well established and starting to make a difference to national policies and actions (n=3/5); not yet well established (n=2/5)
  - will be major approach to address key emerging health priorities
- Impacts of HC: leadership and governance promoting urban health, cooperation b/n health/non health sectors now standard, policies in health sector
- National focal point for urban health beneficial:
  - stakeholder relations, program implementation, monitoring and evaluation, policy guidance, advocacy e.g. for laws and regulations, networking, coordination, technical support, capacity building and fund mobilization
- Effectiveness of mechanisms and structures for promoting urban health varied – some sectors hard to engage
- Useful activities:
  - WHO leadership development programmes, WHO study visits, policy dialogues, training programs, city to city learning
  - Also: HC events involving political leaders, WHO HC recognition, HC champions

# Evaluation Results



# Vientiane -2012

## Case study snapshot



Foundations for action:

- \* Strong connections and network of villages
- \* HC introduced in 1996 – 6's model and Healthy Villages

# Vientiane -2012

## Case study snapshot

### **Strengthening institutional arrangements**

HC Steering Committee (based on decree) launched 2012. Chair – Vice Governor [Multi-department, multi-sectoral]

### **Building capacity for action**

Health Leadership Study Tour (WHO-Macao)

\$1.085 m budget for 5-year HC and NCD prevention and control plan: 2 > 9 districts (2012-15)

Workshop on Strengthening Implementation of Health Promoting Schools

Advocacy workshop – Engaged 9 district vice governors in discussing HC concepts and drafting a plan for establishment of a Vientiane healthy environment policy

# Vientiane -2012

## Case study snapshot

### ***Strengthening evidence base***

### **Advancing national policy and action**

Vision articulated: Promote good health and provide good public security, environments and access to essential services

Plan for HC and NCD prevention/ control drafted and proposed

### **Supporting city to city learning and networking**

Participation in: HC Leadership Course, Alliance for HC meeting, Mayors' Forum

### **WHO support**

Technical support: recommendations for sustainability, accountability, engagement of non-health sectors, clarity re roles of partners

Financial support: seed funding based on concrete proposals, participation

Convenor of political and technical events, meetings

# Evaluation Results: Overall





## Impact of WPRO Healthy Cities activities

- More cities have implemented HC initiatives and/or joined the HC network over the last 5 years
- HC has been “quite well established and is starting to make a difference to national policies and actions” or “a new concept and not yet well established”
- Healthy Cities was primarily a health sector initiative with wider ownership starting
- Impacts on governance, leadership and institutional strengthening were evident, that in turn will help promote urban health and pro-health policies (in the health sector in particular)





# Strengths of the WPRO Healthy Cities programme and areas for strengthening

## **Strengths**

Diverse initiatives promoting learning + support popular

Evidence-base = foundation

Leadership development and performance

Partnerships across health and non-health sectors

Encouragement of pro-health policies in non-health sectors


## **Strengthen**

National government commitment – provincial, city level

Understanding among key non-health sectors and actors

Opportunities for cross-country/ city exchange and learning

Sustainability and accountabilities



# Cities' need for capacity building and technical support to strengthen implementation of the Healthy Cities approach

Data, information, research evidence

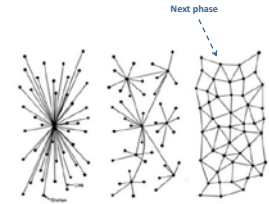
Technical advice

Support to convene activities

Advocacy at a political level

Material resources

## Recommendations regarding WPRO's priority support to cities



- Intensify collaboration with **national governments** as well as cities to improve visibility and political legitimacy of Healthy Cities, and increase support
- Continue to **deliver and evaluate innovations** to help countries establish and develop Healthy Cities and learn from international experiences
  - Technical networks, city to city learning, twinning, leadership training, tool development, policy dialogues, recognition initiatives
- Link HC to **emerging health issues**/ issues for health - air quality improvement; road traffic; ageing; and migrant health



# Evaluation of the next Regional Framework: Lessons

- Facilitate knowledge transfer within organizations when staff leave to promote continuity of learning and inform evaluation
- Capture insights in a systematic way throughout implementation to enable individual and organizational level data to be collected
  - Eg 'data capture logs', reflective practices, organizational reviews, communities of practice dialogue-based evaluation
- Conduct mid-term evaluation to assure data collection methods and tools – implement PDSA cycle
- Allow more time for data collection tools to be available in various languages



# Thank You!

## Acknowledgements

All respondents to surveys and interviews in countries  
WHO WPRO and WHO Country Offices

Nicola Palmer + Lucy Spanwick (MPH, La Trobe University)